



*Psychology*

*Psychology Council of New South Wales*  
***Annual Report 2014***

Psychology Council of New South Wales  
Level 6, North Wing, 477 Pitt Street, Sydney NSW 2000  
Locked Bag 20, Haymarket NSW 1238  
Telephone: 1300 197 177  
TTY: (02) 9219 0250  
Fax: (02) 9281 2030  
Email: [mail@psychologycouncil.nsw.gov.au](mailto:mail@psychologycouncil.nsw.gov.au)  
Website: [www.psychologycouncil.nsw.gov.au](http://www.psychologycouncil.nsw.gov.au)

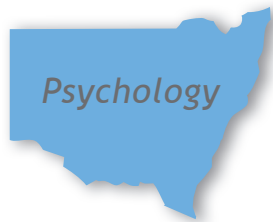
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## Psychology Council of New South Wales

Level 6 North Wing 477 Pitt Street Sydney NSW 2000

Locked Bag 20 Haymarket NSW 1238

Phone: 1300 197 177 Fax : (02) 9281 2030

Email: [mail@psychologycouncil.nsw.gov.au](mailto:mail@psychologycouncil.nsw.gov.au)

Online: [www.psychologycouncil.nsw.gov.au](http://www.psychologycouncil.nsw.gov.au)

The Hon Jillian Skinner MP  
Minister for Health and Minister for Medical Research  
Parliament House  
**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 2014 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

Michael Kiernan  
Council Deputy President

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## About the Council

The Psychology Council of New South Wales (the Council) is a statutory body established to manage complaints about conduct, performance and health matters concerning registered psychologists practising in 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 Council is one of 14 health professional Councils in NSW. The Health Professional Councils Authority (HPCA) provides secretariat and corporate support to assist the Councils in carrying out their regulatory responsibilities.

### Charter

The Council is constituted under the *Health Practitioner Regulation National Law (NSW)* (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 this objective. 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

Clause 9 of Schedule 5C of the Law prescribes that 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, clause 9(2)(b):
  - Ms Wendy McCartney BA MA(Hons)(USyd)  
DipCrim FAPS
  - Dr Robyn Vines BA(Hons)(Psych) MSc(ClinPsych)  
PhD FAPS FIAAP 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, clause 9(2)(c):

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

- (c) one psychologist nominated by the Minister, clause 9(2)(d):

- 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, clause 9(2)(e):

- Ms Margo Gill DMU MAppSc MBA

- Dr Patricia Jenkins BA(Hons) PhD(USyd)

- (e) one Australian lawyer nominated by the Minister, clause 9(2)(f):

- Mr Geoffrey Graham LLB

The President and Deputy President positions are prescribed in Part 2, Schedule 5C of the Law.

As at 30 June 2014, the Council had five female members.

### Remuneration

Remuneration for members of the Council was 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 Council Inquiries or hearings under section 150 of the Law, and \$436 per day or \$218 per half day if a Counselling Committee is convened to conduct counselling interview.

Council members are reimbursed for expenses incurred 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 12 times. Attendance at meetings was as follows:

Member	Meetings Attended	Leave of Absence Granted
Associate Professor Caroline Hunt	11	1
Associate Professor Michael Kiernan	12	0
Ms Margo Gill	12	0
Mr Geoffrey Graham	8	4
Dr Patricia Jenkins	11	1
Ms Wendy McCartney	12	0
Mr Thomas O'Neill	12	0
Dr Robyn Vines	10	2

## 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

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. The Committee members assessed nine applications but did not meet in person during this time.

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.

The Finance Committee members were:

- Mr Geoffrey Graham
- Associate Professor Caroline Hunt
- Associate Professor Michael Kiernan
- 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 section 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 the Appendix.

The Assessment Committee did not consider any matters during the reporting period.

### Impaired Registrants Panel

Impaired Registrants Panels are established under section 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 experienced in working with practitioners demonstrating health problems.

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

### Performance Review Panels

Performance Review Panels are established under section 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 the Appendix.

### Psychology Tribunal and NSW Civil and Administrative Tribunal

The Psychology Tribunal of NSW was established under section 165 of the Law and comprised four members: the Chairperson or Deputy Chairperson being an Australian lawyer appointed by the Governor; two registered psychologists and a lay member appointed by the Council.



The Psychology Tribunal ceased on 31 December 2013 with the commencement of the NSW Civil and Administrative Tribunal (NCAT) on 1 January 2014. The NCAT exercises jurisdiction for all matters previously dealt with by the 14 distinct health profession Tribunals. Health practitioner matters are now dealt with in the Health Practitioner Division List in the Occupational Division of NCAT. The Council nominates two registered practitioners and a lay member to NCAT for appointment to a tribunal by NCAT.

Tribunal members who participated in hearings are listed in the Appendix.

### Executive Officer

Under section 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 of the Council.

### Meetings and Conferences

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 12 November 2013.

The President attended the Council Presidents' Forum and strategic planning workshop in April 2014.

### Education and Research

Section 41S of the Law allows the Council to establish an Education and Research Account to provide funds for education and research purposes relevant to its regulatory functions and for meeting any associated administrative costs. The Council approved three applications for grants. These were:

1. *Examination of the practice of Family Court report writing by psychologists.* The aim is to assess the quality of, and judicial use of reports provided to the Family Court by psychologists. \$55,371.80
2. *Identifying factors associated with best practice by registered psychologists.* The study aims to investigate factors that are associated with best practice and ethical decision-making processes by registered psychologists. \$56,217.39
3. *Developing standards of clinical supervision practice for preventing professional and personal boundary violation in the correctional setting.* This study will develop,

test, and implement a set of standards to promote a structured approach to the provision of clinical supervision in relation to the prevention of professional and personal boundary violation, and increase clinical supervisors' role in the prevention of such violations. \$54,780.00

### Overseas Travel

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

### Promotion of Council Activities

The Council's website is updated regularly and is the principal medium for communicating with the public and the profession and disseminating information to psychologists.

### Other Council Activities

The Council published its first electronic newsletter (Winter 2013) and aims to publish quarterly. It is distributed to all registered psychologists in NSW and is available on the Council's website.

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 the Australian Psychology Accreditation Council Professional Advisory Group for the Children's Court Clinic.

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

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. A complaint handling policy and procedures are in place for addressing complaints regarding the Council's administrative processes, activities, staff or service delivery.

Two complaints were received during the reporting period. One complaint related to the Council's administrative processes and the release of documents to a practitioner against whom a complaint had been received. As a result, the Council has implemented processes to resolve such issues more efficiently and has put in place procedures to further improve

its communications with the HCCC. The other complaint was found to be unsubstantiated and outside the scope of the Council's or HPCA's responsibilities.

### Legislative Changes

Details of the legislative changes in 2013/2014 are in the Appendix.





# Regulatory Activities

The primary responsibility of the Council, in conjunction with the HCCC, is to protect the public by managing 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 practitioners 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.

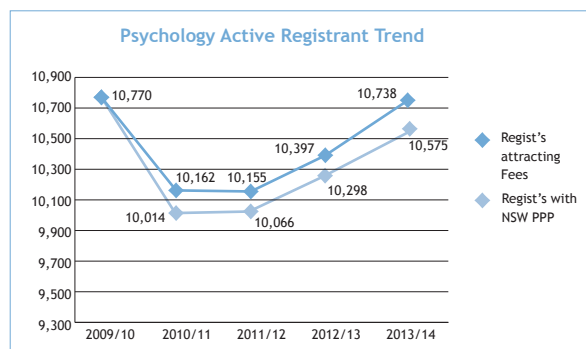
Further information about the operations of the National Board can be obtained on the Australian Health Practitioner Regulation Agency (AHPRA) website ([www.ahpra.gov.au](http://www.ahpra.gov.au)).

## 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 2014, there were 10,575 registered psychologists whose principal place of practice was in NSW. This represents 33% of the total number of psychologists registered under the Scheme across Australia.

The graph shows the trend in the number of psychologists registered in NSW from 2009/2010 to 2013/2014. There was a 2.7% increase in 2013/2014 (277 practitioners).



Registrations by registration type as at 30 June 2014 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	8,905	125	9,030
Provisional	1,171	2	1,173
Non-Practising	499	36	535
<b>Total</b>	<b>10,575</b>	<b>163</b>	<b>10,738</b>

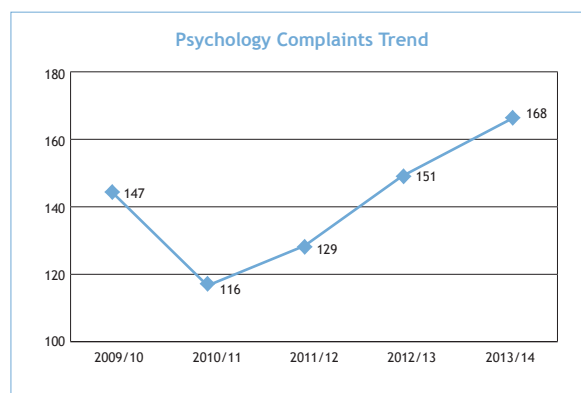
## Complaints Received

Any person may make a complaint against a registered psychologist. Complaints may relate to the conduct, health or performance of a registered psychologist. A 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 complaints received and to consult concerning the course of action to be taken. A complaint made to the Council is deemed to be also made to the HCCC, and vice versa.

The Council received 168 new complaints during the reporting period.

The following graph indicates the trend in complaints received since 2009/2010.



The percentage of psychologists about whom complaints were received was 1.34%. This compares with 1.29% in 2012/2013 and 1.13% in 2011/2012.

Of the psychologists with a new complaint in 2013/2014, 22 have had one other complaint, eight have had two other complaints, four have had three other complaints, four have had four complaints and one has had five complaints in the past. For the remaining 103 psychologists it was the first complaint for each.

The complaints managed by the Council were as follows:

Complaints	2013/2014	2012/2013^
Case volume open* at year beginning	57	55
New complaints received	168	151
Complaints closed	166	149
Case volume open* at year end	59	57
<b>Total case volume managed</b>	<b>225</b>	<b>206</b>

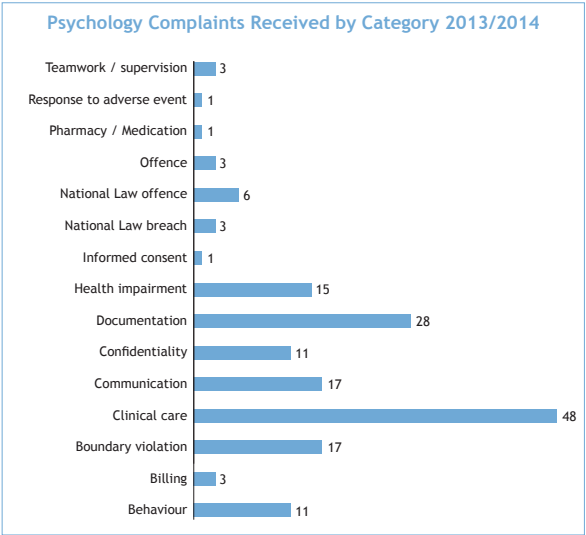
\* See Glossary for definition of open matters

^ Differs from 2012/2013 Annual Report due to data cleansing

When they are received, 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 primary stream is identified based on the seriousness of the matter. There were 95 new complaints classified as performance issues; 58 conduct issues and 15 complaints related to health issues.

Complaints are also allocated to an issue category. The Council has adopted the AHPRA issue categories, which facilitates reporting across jurisdictions.

The number of complaints received by the issue category was:



The sources of complaints received were:



• Data vary from that published in the AHPRA Annual Report. An error was identified subsequent to the submission of data to AHPRA

The total number of complaints managed was 225: 168 new matters and 57 carried over from the previous period. Of the complaints managed, 38% (85) related to conduct, 52% (118) to performance and 10% (22) to health matters.

### 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. AHPRA then refers the matter to the Council for management.

There were six mandatory notifications received, all related to impairment.

Mandatory notifications represent 4% of all complaints received. Three notifications were made by other health practitioners, two by a treating health practitioner, and one was made by an employer.

The status of mandatory notifications was as follows:

Mandatory Notifications	2013/2014	2012/2013
Mandatory notifications in progress at year beginning	9	14
Mandatory notifications received	6	8
Mandatory notifications closed	7	13
Mandatory notifications open at year end	8	9
<b>Total case volume managed</b>	<b>15</b>	<b>22</b>

### 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 is carried out. Information on the processes for making and managing complaints is available on the Council’s website.

Following an assessment, the HCCC and the Council determine if the matter requires some form of action or should be dismissed. A 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.

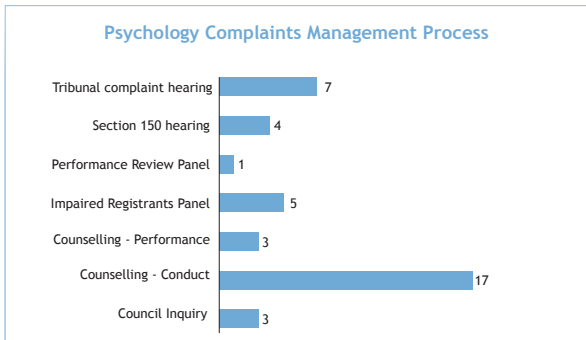
When action is required, further assessment or investigation occurs. Some matters may also be referred for further inquiry by a Tribunal, Panel or Committee.

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 225 complaints managed, 18% (40) were referred for management to other legislated committees or adjudication bodies. Of the matters referred to these bodies in this or prior periods, 75% (30) were completed in 2013/2014.

The volumes of complaints that were referred to an adjudication body or counselling were as follows:



**Protective Orders - Immediate Action under section 150 of the Law**

The Council must exercise its powers to either suspend or impose conditions on a psychologist’s registration 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.

The Council considered taking immediate action on four occasions and exercised its powers on three matters. Two related to breaches of conditions; and one to conduct. One health related matter was still under consideration at the end of the period.

The outcomes of the three matters were that two psychologists were suspended and one had conditions imposed on an interim basis while the matters are considered further.

**Assessment Committee**

The Council may refer a 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.

There were no new matters in the reporting period.

**Health Program**

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.

The Council managed 22 matters in the health stream of which 15 were new matters and seven carried over from the prior period. Of the new matters, one involved drug addiction, one involved an alcohol dependency and 13 were mental health issues.

**Council Appointed Practitioner Assessments**

The Council may refer a psychologist, who is the subject of a complaint, for a health assessment to determine whether or not the person has an impairment. This may include a medical, physical, psychiatric or psychological examination or testing.

The Council referred 15 matters for a health assessment. Of these, five were referred to an Impaired Registrants Panel.

## Impaired Registrants Panels

Impaired Registrants Panels (IRPs) deal with matters concerning psychologists who suffer from a physical or mental impairment which affects or is likely to affect their 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, obtaining reports and other information from any source it considers appropriate, and to make recommendations to the Council.

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

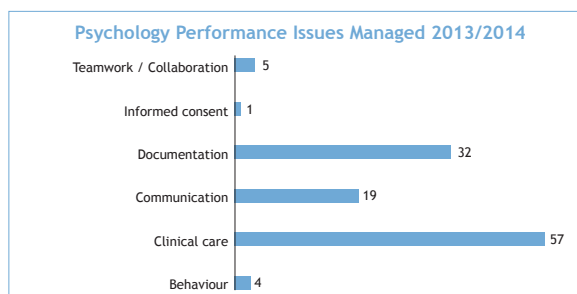
The Council referred five matters to an IRP, all of which related to mental health and resulted in conditions being imposed on the practitioners' registration by agreement. One of these matters involved conditions that had been imposed by the National Board and subsequently removed by the Board on the recommendation of the Council.

## Performance Program

Performance issues generally relate to concerns about the standard of a psychologist's clinical performance, that is, whether or not 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 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 indicative of a broader problem.

There were 118 matters managed in the performance stream: 23 carried over from the previous period and 95 new matters. The performance issues managed were:



## Performance Assessments

To assist it in determining a course of action the Council may require a psychologist to participate in a performance assessment to establish whether their performance is at a standard expected of a similarly trained or experienced psychologist. It is intended to be broad-based and not limited to the substance of the matter that triggered it.

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.

Three performance assessments were carried out. Two resulted in the practitioner being referred to a Performance Review Panel and the third resulted in no further action being taken by the Council.

## 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 or not their practice meets the standard reasonably expected of a psychologist of an equivalent level of training or experience at the time of the review.

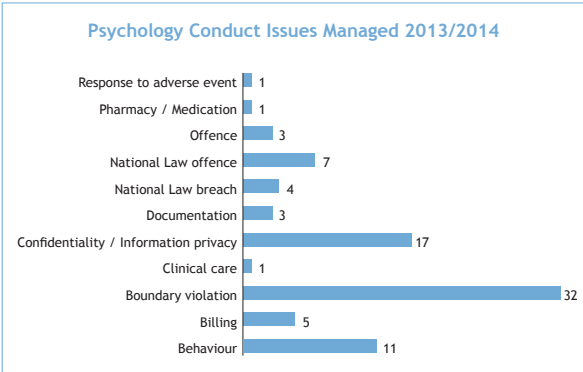
Where deficiencies are identified, the psychologist is required to undertake remediation tailored to their individual needs. This may entail attending courses, undertaking supervision or engaging in additional continuing professional development. Conditions on practice may also be required to ensure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

One matter was heard by a PRP. It related to billing and was not completed in the reporting period.

### Conduct Program

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.

There were 85 matters managed in the conduct stream: 27 carried over from the previous period and 58 new matters. The conduct issues managed were:



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

Six matters were referred to the HCCC for investigation, resulting in three referrals to the Director of Proceedings to consider prosecution before the Tribunal.

### 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.

Two Council Inquiries were finalised. The status of matters referred to a Council Inquiry was as follows:

Status of Council Inquiries	2013/2014	2012/2013
Matters referred to an Inquiry but not completed at beginning of year	1	1
Matters referred to an Inquiry	2	4
Matters where an Inquiry was completed	2	4
Matters referred to an Inquiry but not completed at year end	1	1
Total case volume managed	3	5

Two of the matters referred to or managed by Council Inquiry related to boundary violations and one to documentation. The Council was satisfied that no further action was required in the two completed matters.

### Reviews by the Council

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

The Council received one application for review of a suspension and four for review of conditions. Two applications were made for review of conditions imposed by the Council following an Inquiry; one application for review of conditions imposed through the Performance Program and one through the Health Program.

The outcomes were that in two matters conditions were lifted; in one matter the conditions were amended; and one matter has not yet been considered. The application for review of the suspension resulted in the suspension being lifted and conditions being imposed. There is one matter carrying over to the next reporting period.

### Psychology Tribunal and NSW Civil and Administrative Tribunal

Tribunals deal with serious complaints that may lead to suspension or cancellation of registration, appeals against Council decisions regarding disciplinary matters and appeals against decisions of the National Board in relation to registration matters.

Matters may be referred to a Tribunal by the Council or the HCCC Director of Proceedings. Hearings are generally open to the public unless otherwise directed by the Tribunal. Notices of hearings are posted on the Council's website one week prior to the first hearing day.

The Psychology Tribunal was replaced by the NSW Civil and Administrative Tribunal (NCAT) on 1 January 2014.



The Tribunals finalised two disciplinary matters in the reporting period.

Tribunal Matters	2013/2014	2012/2013 <sup>^</sup>
Matters referred to a Tribunal but not completed at year beginning	2	2
New matters referred to a Tribunal	5	2
Matters completed by a Tribunal	2	2
Matters referred to a Tribunal but not completed at year end	5	2
<b>Total case volume managed</b>	<b>7</b>	<b>4</b>

<sup>^</sup>Differs from 2012/2013 Annual Report due to data cleansing

The matters were:

Name	Date of Decision	Outcome Summary
Leonard, Ross	20/12/2013	Conditions and reprimand
McKeehan, Catherine	23/08/2013	Would be conditions if registered

NCAT decisions are published on the NSW Caselaw website ([www.caselaw.nsw.gov.au](http://www.caselaw.nsw.gov.au)) and may be accessed via the Council’s website. The Reasons for Decision of the former Tribunals are published in full on the Australasian Legal Information Institute website ([www.austlii.edu.au](http://www.austlii.edu.au)).

### Tribunal Reviews

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

There was one application received for a review but this had not been finalised during the reporting period.

### 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.

Two appeals were filed against decisions of the Psychology Board of Australia regarding registration status and two carried over from the

previous period. Three matters were withdrawn and one matter has been finalised with the dismissal of the appeal. The status of matters appealed was as follows:

Status of Tribunal Appeals	2013/2014	2012/2013
Appeals lodged but not completed at year beginning	2	0
Appeals lodged	2	3
Appeals completed	1	0
Appeals withdrawn	3	1
Appeals lodged but not completed at year end	0	2
<b>Total case volume managed</b>	<b>4</b>	<b>3</b>

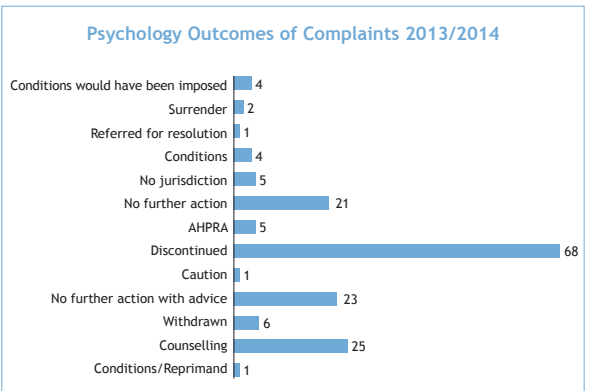
### Appeals to the Supreme Court

Psychologists may appeal a decision made by the Tribunal to the Supreme Court. One appeal was carried over from the previous reporting period. The matter has been heard but the decision is reserved.

### Complaints Outcomes

The outcomes of the 166 complaints closed are summarised below. The majority of matters were dealt with expeditiously and did not require investigation or referral to a regulatory or adjudication body. The most prevalent outcome was to agree with the HCCC to discontinue the matter, followed by counselling interviews and determinations to take no further action.

The outcomes of these matters were as follows:



Of the 166 complaints closed, 27% (44) were considered to require no action by the Council as the complaints were not substantiated.

The stage at which matters were closed is as follows:

Stage* at Closure of Complaint	Number
Assessment	141
Health	10
Performance	3
Investigation	2
Panel (IRP, PRP, Inquiry)	8
Tribunal	2

\*See Glossary for description of each stage

## Complaints Received Under Former Psychologists Act 2001

The Council finalised two matters that had been lodged with the former Psychologists Registration Board. At the end of the reporting period all matters under the former law had been completed.

Matters under the former Act	2013/2014	2012/2013
Open matters under former Act at year beginning	2	5
Matters under former Act closed	2	3
Matters under former Act open at year end	0	2

One matter would have resulted in the cancellation of the practitioner's registration had the practitioner been registered at the time and one resulted in the practitioner being reprimanded and having conditions imposed on their registration.

## Counselling

The Council may direct a psychologist to attend 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.

The Council managed 20 practitioners by directing them to attend counselling, 18 of which were finalised. Some of the issues managed by counselling involved boundary crossing, performance and communication. In some instances, counselling dealt with more than one complaint about the practitioner.

Counselling interviews were conducted by all eight members of the Council.

## Matters Referred to Another Entity

The Council referred five matters to AHPRA as they were outside the Council's jurisdiction.

## Matters Referred to HCCC for Assisted Resolution and Conciliation

The Council may refer a complaint to the HCCC for assisted resolution or conciliation to be dealt with under the *Health Care Complaints Act 1993*. One matter was referred to the HCCC.

## Outcomes of Mandatory Notifications

The outcomes of the seven mandatory notifications completed were as follows:

Outcome	Number
Conditions by consent	1
Registration surrendered	3
Discontinued	1
No further action after Council process	1
Withdrawn	1

## Monitoring and Compliance of Orders and Conditions

The Council is responsible for monitoring compliance with orders made and conditions imposed by an adjudication body. The Council also monitors practitioners with performance, health or conduct related conditions imposed in another state or territory who have changed their principal place of practice to NSW.

Conditions fall into two categories:

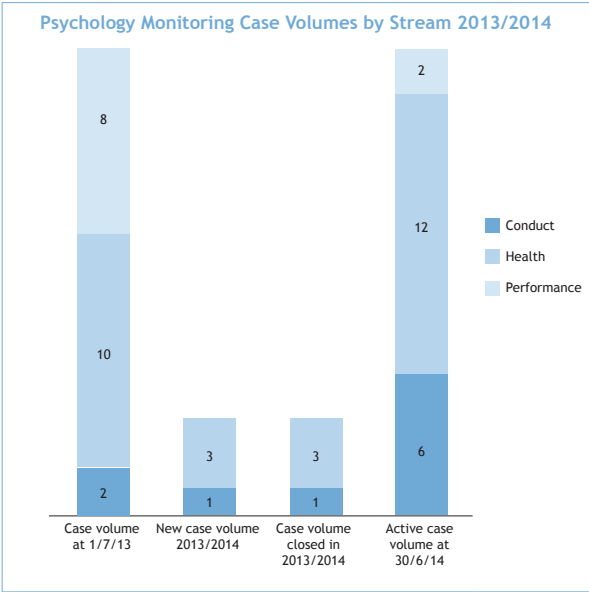
- public conditions, which are published on the AHPRA website ([www.ahpra.gov.au](http://www.ahpra.gov.au)) or
- private conditions, which relate to impairment.

During the year, 24 cases were monitored, and 20 remain active as at 30 June 2014.

Status of Monitoring Cases	2013/2014	2012/2013 <sup>^</sup>
Practitioners monitored as at year beginning	20	18
Practitioners commencing monitoring	4	11
Practitioners for which monitoring was completed	4	9
Practitioners under monitoring as at year end	20	20
<b>Total practitioners monitored</b>	<b>24</b>	<b>29</b>

<sup>^</sup>Differs from 2012/2013 Annual Report due to data cleansing





The monitoring matters managed related to the following conditions:

Matters Monitored	Number
Individual or peer supervision of practice	18
Restrictions placed on scope of practice	18
To attend for treatment with a health practitioner	15
Review by Council Appointed Practitioner and/or IRP	15
The practitioner must work only in a group practice	9
Additional professional development or training required	5
Drug and/or alcohol testing	5
Restricted working hours	3
Financial audit of practice	1

\*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 activities.

On behalf of the Councils, the HPCA liaises with:

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

This coordinated approach provides efficiencies through shared services that would be costly for each Council to implement on its own. It also allows the Council to direct its attention to protection of the public by concentrating on its core regulatory functions.

The Council and the HPCA have signed a three year service level agreement (SLA) effective from 1 July 2012. The SLA outlines 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.

The HPCA Advisory Committee was established in October 2013 to advise on strategy and improvements to services the HPCA provides to Councils and to support communication with the Ministry of Health and the Secretary on matters relating to Council regulatory practices and emerging issues. The Committee is chaired by the Ministry's Director of Legal and Regulatory Services and includes selected Council Presidents and the HPCA Director. A priority for the Committee will be a response to the NRAS review and a review of the Law in 2015.

## Strategic Planning

In April 2014 the Council Presidents and senior HPCA staff participated in a facilitated planning session to agree a shared strategic vision and priorities for the next three years. A broad Strategic Framework was outlined and further work is underway to develop a strategic plan.

The first priorities focus on communication and stakeholder engagement, in particular to improve Council websites and electronic communication, including newsletters and to develop a research plan. These plans will be developed during 2014/2015.

## Business Process Improvement

A process improvement plan is being implemented that brings together the recommendations of the business process reviews completed in 2012 and 2013. It also includes the priorities in the records management plan and the workforce management plan. A priority in 2014/2015 is to develop a regulatory handbook for use by staff in Council teams that will bring together the complaints management business process maps and other key business processes, resources and information guides. This will promote consistency in the way complaints and notifications are managed from receipt to resolution by the Council.

A project to publish an electronic conditions handbook is underway to promote consistent decision making and monitoring. The handbook includes generic information about the regulatory adjudication bodies and considerations when drafting conditions; information unique to individual professions that decision-makers need to take into account when imposing conditions, and a set of resources. The first tranche of conditions is nearing completion and covers procedural conditions, limiting practice conditions and prescribing and drug conditions.

A series of process indicators has been developed as a mechanism for Councils to report on qualitative aspects for their work and to supplement the current quantitative measures in place. The indicators will also identify areas where there is a need to focus on strategies for improvement and support consistent and regular reporting across Councils.

A major initiative this year was implementation in February 2014 of a technology solution for the preparation and distribution of Council and committee meeting papers. Diligent Boardbooks software was selected through a comprehensive tender and evaluation process.

Staff upload the agenda papers to a secure Internet portal from which Council members download them to iPads prior to their meeting. The Boardbooks application allows members to read and annotate the papers on their iPad during the meeting when the agenda is discussed. The system eliminates the need to print large agenda packs for all members for each meeting, saves on mailing and courier costs, enhances security over confidential information and provides members with a lightweight and effective means of viewing Council material.

## Research

The Council continues to participate in and contribute to an Australian Research Council (ARC) research project in partnership with the University of Sydney, the Medical, Pharmacy, Dental and Nursing and Midwifery Councils, the HCCC and AHPRA. The project involves a number of studies to enable comparative review of the notifications and complaint systems in NSW compared with other States, inform best practice and investigate complainants' expectations and experiences under the two systems. The project outcomes will be progressively reported in 2014 and 2015.

This year complaints data from July 2012 to June 2014 has been collected from each of the participating professions across Australia and is being analysed. Staff and members of tribunals, committees and panels participated in a survey to determine their priorities in handling complaints and decision-making, and will be reported later in 2014. A survey of complainants commenced and a range of complaints are being selected for a series of case studies.

## 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. Nevertheless the Council has appropriate internal audit and risk management practices in place in line with the core requirements of TPP09-05.

In 2013/2014 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.

The HPCA implemented the recommendations of the Audit Office of NSW 2012/2013 Management Letter, and improved the finance working papers in preparation for the 2014 audit. A repeat recommendation that the HPCA has a memorandum of understanding (MOU) with the Ministry of Health for the services the Ministry provides has been completed with the MOU being signed in May 2014.

## Internal Audit

IAB is commissioned to undertake the internal audits nominated in the internal audit plan. In 2013/2014 an audit of monitoring of practitioners with orders and/or conditions on their registration was completed and the recommendations are being implemented. Standard operating procedures for dealing with monitoring cases have been documented and will be published following consultation with staff.

Implementation of the recommendations of the audit of the HPCA's workforce management framework was also completed. Position descriptions have been updated and the performance management framework is being implemented in accordance with the *Government Sector Employment Act 2013*.

An internal audit of complaint handling by Council teams was undertaken in June 2014 and the report and recommendations will be considered in the next financial year.

## Information Management and Systems

An Information and Communications Technology (ICT) strategic plan is being developed that formally identifies the ICT infrastructure, capability and priorities for the next three years. An ICT Steering Committee has been established and includes a Ministry of Health IT professional to inform the Committee on developments within the health sector and provide expert advice on proposed ICT projects.

Further system modifications were 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 training and support as changes were made and the accuracy and

reliability of reporting is improving.

The TRIM records management system has been further embedded in practice. Training has been a focus and priorities developed to promote the use of TRIM to meet State Records compliance requirements. Planning is underway to upgrade and integrate TRIM to one platform across the Pitt Street and Gladesville sites. A request for quote was issued and a successful provider selected.

A TRIM user group has been established to finalise the file and document naming conventions for regulatory activities that will be applied consistently across all Council teams. The user group members also provide back up support and training within their work groups.

### Information Security

The Council has adopted the NSW Government *Digital Information Security Policy*. As the Councils' shared services provider the HPCA has submitted an attestation statement to the Department of Finance and Services which outlines the timeframes for compliance with the core requirements of the Policy.

The Council is also required to present an attestation statement in the Annual Report, which is in the Appendix.

### 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.

All new and revised policies and other information are publicly released 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:

- Annual Report 2012/2013
- Business Continuity Management Plan
- Council/HPCA Strategic Framework Summary (April 2014)
- Handbook for Council, Committee and Panel members
- HPCA Strategic Action Plan 2013/2014
- Managing email access policy and procedures
- Media and communication policy and procedures
- Electronic newsletter
- Staff handbook
- *YourSay* staff survey report summary.

#### 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 partly refused the application 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 the Appendix.

### 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.

### 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. The PID statistics are reported in the Appendix.

## Human Resources

The HPCA staff who support the Council are employed under Part 4 of the *Government Sector Employment Act 2013*.

As at 30 June 2014 the HPCA employed 97 permanent full-time equivalent (FTE) staff and three temporary FTE staff, of whom 3.2 FTE staff provided secretariat support directly to the Council. The organisation chart is provided in the Appendix.

## 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.

Staff attended training sessions on:

- GIPA and privacy 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 Law (NSW)* - regulatory responsibilities and Council processes to protect the public
- *Government Sector Employment Act 2013* requirements. Managers and staff also attended training on the Performance Management Framework.

The *Government Sector Employment Act 2013* requires agencies to implement a Performance Management Framework and for all employees to have a performance agreement. Performance agreements are being developed and staff and managers are working on their individual priorities and identifying training needs.

The first all staff forum was held in July 2013, which brought staff together to hear about

priority, strategic and operational issues and to provide an opportunity for discussion about matters of interest. It also enabled staff from across teams and work groups to meet and share ideas. The forum included discussion on the common issues raised through the *YourSay* staff survey that was conducted through the Ministry of Health.

The second forum was held in February 2014 and included staff led discussion to develop team building and communication activities. The forums have been well received by staff and will be held twice each year. Each forum includes a presentation and discussion on an aspect in the Code of Conduct.

Induction sessions for members of Councils, committees and panels were held in September and October 2013. These annual events aim to introduce new members to their legislative and regulatory responsibilities and were very well received. A number of long-standing members also participated and reported that the workshops provide a valuable opportunity to refresh their knowledge and share their experiences.

A series of seminars on the Council's core programs was also initiated. The Conduct Program seminar in June 2014 was attended by over 70 members from all Councils, committees and panels as well as practitioners who provide assessments, counselling and other services to the Council. Sessions focused on the management of complaints about practitioners' conduct, including progression to a tribunal. The conduct and content of the seminar received overwhelmingly positive feedback.

Seminars on the Performance Program and the Health Program are being planned for 2014/2015.

The Handbook for members of Councils, committees and panels was also revised and is available on the Council website.

## Workforce Diversity

The HPCA recognises the value of workforce diversity and encourages and aims to attract and retain people with diverse skills, experience and background. Appointments to the Council, committees and panels are also made on the understanding that diversity of knowledge, experience and background supports the Council's regulatory activities.



The workforce diversity statistics provided by the Public Service Commission are in the Appendix.

### Multicultural Policies and Services Program

The Council applies the NSW Government's *Principles of Multiculturalism* and ensures that information and services are available to meet the diverse language needs of the people of NSW.

The Council and the HPCA websites provide advice on how to access translating and interpreting services in 19 languages for people making an inquiry or a complaint. A number of HPCA staff are also able to provide assistance in translating and interpreting in a range of languages.

Responsibility for the registration and accreditation of overseas trained health professionals rests with the National Board. The Council supports the National Board's commitment to providing opportunities for overseas trained health practitioners to be registered and practise in Australia.

The following strategies are in place to address the *Principles of Multiculturalism*:

- promoting a culturally diverse workforce, membership of Committees and participation in the Council's regulatory activities
- maintaining ongoing commitment to the *Principles of Multiculturalism* and the requirements of relevant legislation and Government policy.

The HPCA is organising cultural awareness and diversity training for staff and members. Staff are also encouraged to complete the Health Education and Training Institute's online cultural training modules.

### Disability Services

The Council supports the NSW Government's *Disability Policy Framework* and the Principles outlined in Schedule 1 of the *Disability Services Act 1993*.

The HPCA maintains a range of strategies to implement these requirements including:

- workplace assessment and adjustments to support staff and members with a disability
- assistance from external providers to

prepare and coordinate return to work plans for staff with work related injuries and/or temporary disabilities

- provision of ergonomic furniture and equipment for all staff, including those requiring workplace adjustment
- access to disabled washrooms
- a TTY service and a hearing loop in hearing rooms available for the hearing impaired.

### Occupational Health and Safety

The Work Health and Safety Committee oversees the workplace environment to ensure compliance with legislation and government policy. Committee members participated in training in the legislative requirements and new members received appropriate induction. Fire wardens undertook refresher training and the outcomes of an evacuation drill were reviewed.

### Waste Management (WRAPP)

The HPCA manages implementation of the NSW Government's WRAPP on behalf of the Council. During the year the HPCA maintained efforts to reduce waste, recycle paper products, consumables and equipment, and to purchase resources with recycled content, with the following results:

- purchased all A4 copy paper with 50% recycled content
- recycled 95% of total paper waste
- recycled 100% of paper/cardboard packaging; separated and directed packaging material to the building's centralised recycling systems
- provided paper recycling containers at each workstation to divert paper from waste bins and landfill
- sent 100% of toner cartridges for recycling.

The following waste avoidance strategies are in place:

- scrap recycled paper diverted for use as message pads and notetaking
- increased use of email for internal communication and with Council members. The introduction of the Boardbooks technology for the distribution and management of Council meeting papers has significantly reduced the use of paper. It will be progressively extended to other meetings to further reduce dependence on printed papers.
- clients referred to Council websites

for access to publications and other information as an alternative to providing hard copy documents

- use of double-sided printing as much as possible
- inclusion of “please consider the environment before printing” note on email communication.

The HPCA also participates in the Sydney Central Recycling Program managed by the owners of the Pitt Street building. The Program aims to improve recycling activity with increased use of centrally located colour-coded bins. An opportunity to dispose of electronic equipment securely is provided twice a year.

## Consultants

The Councils together commissioned six consultancies. The Council made the following contribution to these consultancies:

### Engagements costing less than \$50,000

Service Provided	Number	Cost inc. GST \$
Council business processes	2	998
Financial management	2	1,987
Governance	2	1,513
<b>Total</b>	<b>6</b>	<b>4,498</b>

## Insurance

The Council’s insurance activities are conducted by the HPCA through the 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.

## 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 Service Level Agreement, the Council endorsed revised cost allocation methodologies for the distribution of shared

costs across all Councils. The methodologies are largely based on Council activity and provide a formula to apportion shared services staff, facilities and other resources. The methodologies were reviewed in 2013/2014 to ensure they are equitable and the best means of cost allocation. The review concluded that the existing formulae are equitable and the most effective means of calculating Councils’ individual contributions to shared costs. Minor adjustments were made to the methodologies following consultation with all Councils.

## 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.

## Performance

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

	\$
Operating expenditure	945,731
Revenue	1,142,213
Net profit/(loss)	194,583
Net cash reserves (cash and cash equivalents minus current liabilities)*	1,609,014
* Included in the net cash reserves is Education and Research bank account balance of:	171,652

## Investment Performance

The Council’s banking arrangements transferred to Westpac Banking Corporation in accordance with the agreement between NSW Treasury and Westpac Banking Corporation for the provision of transactional banking.

The guaranteed credit interest rate is calculated on daily balances as per the Reserve Bank of Australia cash rate plus an agreed fixed margin for five years.

## Payments Performance

The consolidated accounts payable performance report for all 14 Councils is in the Appendix.



## Budget

The budget for the period 1 July 2014 to 30 June 2015 is as follows:

	\$
Revenue	1,127,287
Operating expenses	1,356,943
Education and research	0
Net Profit/(Loss)	(229,656)

**PSYCHOLOGY COUNCIL OF NEW SOUTH WALES**

**YEAR ENDED 30 JUNE 2014**

**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 2014 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.



Caroline Hunt  
President

Date: 19.10.14



Michael Kiernan  
Deputy President

Date: 19.10.14



## 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 2014, 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 2014, 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

20 October 2014  
SYDNEY

## Psychology Council of New South Wales

Statement of Comprehensive Income  
for the Year Ended 30 June 2014

	Notes	2014 \$	2013 \$
<b>EXPENSES EXCLUDING LOSSES</b>			
Operating expenses			
Personnel services	2(a)	(387,447)	(337,110)
Other operating expenses	2(b)	(317,584)	(350,014)
Depreciation and amortisation	2(c)	(47,229)	(26,665)
Finance costs	2(d)	(678)	(720)
Other expenses	2(e)	(142,071)	(148,622)
Education and research expenses	3	(50,722)	(25,000)
<b>Total Expenses Excluding Losses</b>		<b>(945,731)</b>	<b>(888,131)</b>
<b>REVENUE</b>			
Registration fees		1,074,833	1,030,220
Interest revenue	5(a)	64,141	51,127
Other revenue	5(b)	3,239	5,256
<b>Total Revenue</b>		<b>1,142,213</b>	<b>1,086,603</b>
Gain/(Loss) on disposal/additions	6	(1,899)	7,814
<b>Net Result</b>		<b>194,583</b>	<b>206,286</b>
Other comprehensive income		-	-
<b>Total Comprehensive Income</b>		<b>194,583</b>	<b>206,286</b>

The accompanying notes form part of these financial statements.



## Psychology Council of New South Wales

Statement of Financial Position  
as at 30 June 2014

	Notes	2014 \$	2013 \$
<b>ASSETS</b>			
<b>Current Assets</b>			
Cash and cash equivalents	7	2,246,303	1,956,778
Receivables	8	30,319	27,260
<b>Total Current Assets</b>		<b>2,276,622</b>	<b>1,984,038</b>
<b>Non-Current Assets</b>			
Plant and equipment	9		
Leasehold improvements		35,478	65,775
Motor vehicles		443	750
Furniture and fittings		9,738	13,823
Other		7,160	11,102
Total plant and equipment		52,819	91,450
Intangible assets	10	19,585	21,864
<b>Total Non-Current Assets</b>		<b>72,404</b>	<b>113,314</b>
<b>Total Assets</b>		<b>2,349,026</b>	<b>2,097,352</b>
<b>LIABILITIES</b>			
<b>Current Liabilities</b>			
Payables	11	158,844	125,487
Fees in advance	12	478,445	452,013
<b>Total Current Liabilities</b>		<b>637,289</b>	<b>577,500</b>
<b>Non-Current Liabilities</b>			
Fees in advance	12	4,873	6,886
Provisions	13	16,031	16,716
<b>Total Non-Current Liabilities</b>		<b>20,904</b>	<b>23,602</b>
<b>Total Liabilities</b>		<b>658,193</b>	<b>601,102</b>
<b>Net Assets</b>		<b>1,690,833</b>	<b>1,496,250</b>
<b>EQUITY</b>			
Accumulated funds		1,690,833	1,496,250
<b>Total Equity</b>		<b>1,690,833</b>	<b>1,496,250</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 2014

	Notes	Accumulated Funds
		\$
Balance at 1 July 2013		1,496,250
Net Result for the Year		194,583
Other comprehensive income		-
Balance at 30 June 2014		<u>1,690,833</u>
Balance at 1 July 2012		1,289,964
Net Result for the Year		206,286
Other comprehensive income		-
Balance at 30 June 2013		<u>1,496,250</u>

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 2014

	Notes	2014 \$	2013 \$
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>			
<b>Payments</b>			
Personnel services		(387,064)	(357,212)
Other		(494,248)	(598,887)
<b>Total Payments</b>		<b>(881,312)</b>	<b>(956,099)</b>
<b>Receipts</b>			
Receipts from registration fees		1,109,324	1,051,138
Interest received		69,488	53,175
Other		244	628
<b>Total Receipts</b>		<b>1,179,056</b>	<b>1,104,941</b>
<b>Net Cash Flows from Operating Activities</b>	17	<b>297,744</b>	<b>148,842</b>
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>			
Proceeds from sale of plant and equipment		-	-
Purchases of plant and equipment and intangible assets		(8,219)	(6,295)
<b>Net Cash Flows from Investing Activities</b>		<b>(8,219)</b>	<b>(6,295)</b>
<b>Net Increase/(Decrease) in Cash</b>		<b>289,525</b>	<b>142,547</b>
Opening cash and cash equivalents		1,956,778	1,814,231
<b>Closing Cash and Cash Equivalents</b>	7	<b>2,246,303</b>	<b>1,956,778</b>

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 2014 have been authorised for issue by the Council on 19 October 2014.

#### 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 2014 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

In accordance with an agreed Memorandum of Understanding, the 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 price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

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 \$254 (2012/2013 - \$238) (all Council shared use asset), or \$399 (2012/2013 - \$364) (Pitt Street shared use asset), whichever is applicable.

#### 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.

## Psychology Council of New South Wales

### Notes to the Financial Statements

#### 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 17% - 27.8%

#### v. Fair Value 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 with approval of the Council as incurred.

### 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.

# Psychology Council of New South Wales

## Notes to the Financial Statements

### ii. Personnel Services - Ministry of Health

In accordance with an agreed Memorandum of Understanding, 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.

In accordance with NSWTC 14/04 'Accounting for Long Service Leave and Annual Leave', the Council's annual leave has been assessed as a short-term liability as these short-term benefits are expected to be settled wholly before 12 months after the end of the annual reporting period in which the employee renders the related services.

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.

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

A number of new standards were applied from 1 July 2013, including AASB 13 *Fair Value Measurement* and AASB 119 *Employee Benefits*. The application of these new standards did not have a significant impact on the financial statements.

A number of new standards, amendments to standards and interpretations are effective for annual periods beginning after 1 July 2014, 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 TC14/03 circular which states none of the new revised Standards of Interpretations are to be adopted early.

The standards that are relevant to the Council are as follows:

- a) AASB 9, AASB 2010-7 and AASB Financial Instruments 2012-6 regarding financial instruments (2015/2016)
- b) AASB 10 Consolidated Financial Statements with NFP guidance
- c) AASB 12 Disclosure of interests in other entities.

# Psychology Council of New South Wales

## Notes to the Financial Statements

### 2. EXPENSES EXCLUDING LOSSES

#### a. Personnel Service Expenses

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

	2014 \$	2013 \$
Salaries and wages (including recreation leave)	333,138	281,046
Superannuation	29,139	29,698
Payroll taxes	21,789	23,020
Workers compensation insurance	3,381	3,346
	<u>387,447</u>	<u>337,110</u>

#### b. Other Operating Expenses

	2014 \$	2013 \$
Auditor's remuneration	7,004	6,450
Rent and building expenses	77,634	80,777
Council fees	14,600	14,600
Sitting fees	89,751	110,403
NSW Civil & Administrative Tribunal fixed costs	16,000	-
Contracted labour	112,595	137,784
	<u>317,584</u>	<u>350,014</u>

#### c. Depreciation and Amortisation Expense

	2014 \$	2013 \$
<b>Depreciation</b>		
Motor vehicles	370	347
Furniture and fittings	3,265	3,456
Other	6,995	7,603
	<u>10,630</u>	<u>11,405</u>
<b>Amortisation</b>		
Leasehold improvement	26,457	4,162
Intangible assets	10,142	11,098
	<u>36,599</u>	<u>15,260</u>
<b>Total Depreciation and Amortisation</b>	<u>47,229</u>	<u>26,665</u>



## Psychology Council of New South Wales

### Notes to the Financial Statements

#### 2. EXPENSES EXCLUDING LOSSES (continued)

##### d. Finance Costs

	2014 \$	2013 \$
Unwinding of discount rate on make good provision	678	720
	<u>678</u>	<u>720</u>

##### e. Other Expenses

	2014 \$	2013 \$
Subsistence and transport	26,988	27,647
Fees for service	78,675	84,668
Postage and communication	7,134	8,274
Printing and stationery	7,891	10,867
Equipment and furniture	1,000	769
General administration expenses	18,751	16,397
Loss on re-allocation of Make good	1,632	-
	<u>142,071</u>	<u>148,622</u>

#### 3. EDUCATION AND RESEARCH

##### Education and Research Expenses

	2014 \$	2013 \$
Grants	25,169	25,000
Other expenses	25,553	-
Total (excluding GST)	<u>50,722</u>	<u>25,000</u>



## Psychology Council of New South Wales

### Notes to the Financial Statements

#### 4. EXPENDITURE MANAGED ON BEHALF OF THE COUNCIL THROUGH THE NSW MINISTRY OF HEALTH

The Council's accounts are managed by the NSW Ministry of Health (MOH). Executive and administrative support functions are provided by the HPCA, which is an executive agency of the MOH.

In accordance with an agreed Memorandum of Understanding, 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.

#### 5. (a) INTEREST REVENUE

	2014 \$	2013 \$
Interest revenue from financial assets not at fair value through profit or loss	64,141	51,127
	<u>64,141</u>	<u>51,127</u>

During the year, in accordance with the agreement between NSW Treasury and Westpac Banking Corporation on 1 April 2013 for the provision of Transactional Banking, the HPCA on behalf of the Council, transitioned all current banking arrangements to Westpac Banking Corporation.

The guaranteed credit interest rate is calculated on daily balances as per the RBA cash rate plus an agreed fixed margin for five years.

	2014 %	2013 %
Average Interest Rate	2.54	2.81

#### (b) OTHER REVENUE

	2014 \$	2013 \$
Recoupment of costs	-	165
Make good revenue resulting from decrease in make good provision	2,996	5,091
Other	243	-
	<u>3,239</u>	<u>5,256</u>

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

	2014 \$	2013 \$
<b>Plant and equipment</b>		
Net book value (disposed)/acquired during the year	(3,697)	9,325
Proceeds from sale/acquisition costs	-	-
	<u>(3,697)</u>	<u>9,325</u>



## Psychology Council of New South Wales

### Notes to the Financial Statements

#### Intangible assets

Net book value (disposed)/acquired during the year	1,798	(1,511)
Proceeds from sale/acquisition costs	-	-
	<u>1,798</u>	<u>(1,511)</u>
<b>Total Gain/(Loss) on Disposal/Additions</b>	<b><u>(1,899)</u></b>	<b><u>7,814</u></b>

Included in the above Gain/(Loss) on disposal are adjustments arising from the Council's prior year decision to adopt a significant accounting policy, an agreed cost sharing arrangement for the distribution of pooled costs between health professional Councils and to dispose or acquire of a portion of its share of the opening carrying values of the pooled assets. Refer Note 1 (d).

#### 7. CASH AND CASH EQUIVALENTS

	2014 \$	2013 \$
Cash at bank and on hand	171,652	542,486
Short-term bank deposits	-	333,041
Cash at bank - held by HPCA*	2,074,651	1,081,251
	<u>2,246,303</u>	<u>1,956,778</u>

\* This is cash held by the HPCA, an executive agency of the MOH, on behalf of the Council for its operating activities.

The Council operates the bank accounts shown below:

	2014 \$	2013 \$
Operating account**	-	321,697
Education and research account**	171,652	220,789
	<u>171,652</u>	<u>542,486</u>

\*\* managed by the HPCA, an executive agency of the MOH.

## Psychology Council of New South Wales

### Notes to the Financial Statements

#### 8. RECEIVABLES

	2014 \$	2013 \$
Prepayments	4,862	1,270
Other receivables	14,887	(182)
Interest receivable	11	5,358
Trade receivables	11,021	21,276
Less: allowance for impairment	(462)	(462)
	<u>30,319</u>	<u>27,260</u>
<b>Movement in the Allowance for Impairment</b>		
Balance at 1 July 2013	462	-
Amounts written off during the year	-	-
Amounts recovered during the year	-	-
Increase/(decrease) in allowance recognised in profit or loss	-	462
<b>Balance at 30 June 2014</b>	<u><b>462</b></u>	<u><b>462</b></u>

The trade receivables include monies that AHPRA has collected from registrants as at 30 June 2014 and has remitted the monies to HPCA in July 2014.

#### Analysis of Trade Debtors Overdue

2014	Total \$	Past due but not impaired \$	Considered impaired \$
< 3 months overdue	-	-	-
3-6 months overdue	-	-	-
> 6 months overdue	462	-	462
<b>2013</b>			
< 3 months overdue	-	-	-
3-6 months overdue	-	-	-
> 6 months overdue	462	-	462

#### Notes

- Each column in the table represents the 'gross receivables'.
- 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 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>
<b>At 30 June 2014</b>					
Gross carrying amount	65,370	1,478	16,326	52,843	136,017
Accumulated depreciation and impairment	(29,892)	(1,035)	(6,588)	(45,683)	(83,198)
<b>Net Carrying Amount</b>	<b>35,478</b>	<b>443</b>	<b>9,738</b>	<b>7,160</b>	<b>52,819</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 2014</b>					
Net carrying amount at start of year	65,775	750	13,823	11,102	91,450
Additions	-	-	-	2,153	2,153
Disposals	-	-	-	-	-
Other <sup>1</sup>	(3,840)	63	(820)	900	(3,697)
Depreciation	(26,457)	(370)	(3,265)	(6,995)	(37,087)
<b>Net Carrying Amount at End of Year</b>	<b>35,478</b>	<b>443</b>	<b>9,738</b>	<b>7,160</b>	<b>52,819</b>

## Psychology Council of New South Wales

### Notes to the Financial Statements

	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>13,824</b>	<b>11,102</b>	<b>91,450</b>

1. Other includes:

- Adjustments required to opening balances due to the agreed Cost Allocation Methodology as at 1 July 2013 & 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

### 10. INTANGIBLE ASSETS

The Council has an interest in intangible assets used by all health professional Councils. The assets are 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 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>

<b>At 30 June 2014</b>			
Cost (gross carrying amount)	9,102	91,380	100,482
Accumulated amortisation and impairment	-	(80,897)	(80,897)
<b>Net Carrying Amount</b>	<b>9,102</b>	<b>10,483</b>	<b>19,585</b>

	Software Work in Progress	Software	Total
	\$	\$	\$
<b>Year Ended 30 June 2014</b>			
Net carrying amount at start of year	3,037	18,827	21,864
Additions	6,065		6,065
Disposals	-	-	-
Other <sup>1</sup>	-	1,798	1,798
Amortisation	-	(10,142)	(10,142)
<b>Net Carrying Amount at End of Year</b>	<b>9,102</b>	<b>10,483</b>	<b>19,585</b>



## Psychology Council of New South Wales

### Notes to the Financial Statements

	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
Transfers	-	-	-
Disposals	-	(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 agreed Cost Allocation Methodology as at 1 July 2013 & 1 July 2012.



## Psychology Council of New South Wales

### Notes to the Financial Statements

#### 11. PAYABLES

	2014 \$	2013 \$
Personnel services - Ministry of Health	34,309	37,307
Trade and other payables	124,535	88,180
	<u>158,844</u>	<u>125,487</u>

#### 12. FEES IN ADVANCE

	2014 \$	2013 \$
<b>Current</b>		
Registration fees in advance	478,445	452,013
	<u>478,445</u>	<u>452,013</u>
<b>Non-Current</b>		
Registration fees in advance	4,873	6,886
	<u>4,873</u>	<u>6,886</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

	2014 \$	2013 \$
<b>Non-Current</b>		
Make good	16,031	16,716
	<u>16,031</u>	<u>16,716</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	2014 \$	2013 \$
Carrying amount at the beginning of financial year	16,716	27,755
Increase/(Decrease) in provisions recognised due to re-allocation of opening balances at beginning of year	1,632	(1,913)
Decrease in provisions recognised	(2,995)	(9,846)
Unwinding/change in discount rate	678	720
<b>Carrying Amount at the End of Financial Year</b>	<b>16,031</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 2014, 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 2014.

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

# Psychology Council of New South Wales

## Notes to the Financial Statements

### 14. COMMITMENTS FOR EXPENDITURE

#### a. Capital Commitments

Aggregate capital expenditure contracted (2014) for the acquisition of duress alarm upgrade equipment at Level 6, 477 Pitt Street office for at balance date and not provided for.

	2014	2013
	\$	\$
Not later than one year	640	
Later than one year and not later than five years	-	-
<b>Total (including GST)</b>	<b>640</b>	<b>-</b>

#### b. Operating Lease Commitments

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

	2014	2013
	\$	\$
Not later than one year	92,775	96,996
Later than one year and not later than five years	139,710	251,684
<b>Total (including GST)</b>	<b>232,485</b>	<b>348,680</b>

### 15. RELATED PARTY TRANSACTIONS

The Council has only one related party, being the HPCA, an executive agency of the MOH.

The Council's accounts are managed by the MOH. 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

The Health Professional Councils Authority received advice from the Ministry of Health and the Ministry's independent tax advisors to the effect that payments made to Council and Hearing members attract a pay as you go (PAYG) withholding tax obligation and superannuation guarantee levy payments. As a result of that advice, the Health Professional Councils Authority had undertaken an audit of the financial records.

The impact of the superannuation back pay adjustments and administration fees has been included in the annual accounts as well as an estimate of the nominal interest as at 30 June 2014. However, the nominal interest component cannot be finally determined until the voluntary disclosure of the superannuation guarantee charge statements by the Health Professional Councils Authority on behalf of the Council are submitted and agreed to by the Australian Taxation Office for all the affected Council and Hearing members.

The variation between the accrued estimated nominal interest and the final agreed amount are considered to be immaterial.

There are no material contingent assets as at 30 June 2014.

# Psychology Council of New South Wales

## Notes to the Financial Statements

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

	2014 \$	2013 \$
Net result	194,583	206,286
Depreciation and amortisation	47,229	26,665
Allowance for impairment	-	462
Increase/(Decrease) in receivables	(3,059)	24,032
Increase/(Decrease) in fees in advance	24,417	20,422
Increase/(Decrease) in payables	33,359	(116,506)
Increase/(Decrease) in provisions	(684)	(4,705)
Net gain/(loss) on sale of plant and equipment	1,899	(7,814)
<b>Net Cash used on Operating Activities</b>	<b>297,744</b>	<b>148,842</b>

### 18. FINANCIAL INSTRUMENTS

The Council's principal financial instruments are outlined below. These financial instruments arise directly from the entity's operations or are required to finance the Council's operations. 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 Class	Note	Category	Carrying Amount 2014 \$	Carrying Amount 2013 \$
Cash and Cash Equivalents	7	N/A	2,246,303	1,956,778
Receivables <sup>1</sup>	8	Loans and receivables (measured at amortised cost)	10,570	26,172
Financial Liabilities Class	Note	Category	Carrying Amount 2014 \$	Carrying Amount 2013 \$
Payables <sup>2</sup>	11	Financial liabilities (measured at amortised cost)	158,844	125,487

#### 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).
3. There are no financial instruments accounted for at fair value.

## 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.

#### **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.

#### **e. Interest Rate Risk**

The Council has minimal exposure to interest rate risk from its holdings in interest bearing financial assets. The Council does not account for any fixed rate financial instruments at fair value through profit or loss or as available-for-sale. A reasonably possible change of +/- 1% is used, consistent with current trends in interest rates. The basis will be reviewed annually and amended where there is a structural change in the level of interest rate volatility.

### **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 2014.

**End of Audited Financial Statements**

# Appendix

## Members of Tribunals and Panels 2013/2014

### Tribunals

Presiding members	Ms Mary Brennan Ms Diane Robinson	
Professional members	Dr Megan Brock Ms Margaret Crowley Mr Peter Champion Mr John Haigh Dr Judith Kennedy Mr Brian Sheridan	Ms Elisabeth Shaw Dr Janina Szyndler Dr Lizabeth Tong Associate Professor William Warren Ms Kristin Young
Lay members	Dr Noel Greenaway Ms Jacqueline Milne	Ms Frances Taylor Ms Leanne Wrightson

### Assessment Committee

Term of appointment: 6 June 2011 to 30 June 2015

Chair (Practitioner)	Associate Professor Chris Willcox
Member(Practitioner)	Dr Lizabeth 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 Lizabeth Tong Associate Professor Chris Willcox
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Registered medical practitioners	Dr Michael Diamond Dr Mary-Anne Friend
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### Performance Review Panel

Professional members	Professor Alexander Blaszczyński Dr Jill Duffield
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Lay member	Ms Barbara Armitage OAM
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## Legislative Changes

### Health Practitioner Regulation National Law

The NSW Parliament passed the *Civil and Administrative Legislation (Repeal and Amendment) Act 2013*. The *Civil and Administrative Legislation (Repeal and Amendment) Act* commenced on 1 January 2014 and is one part of the suite of legislation that established the Civil and Administrative Tribunal of New South Wales (NCAT).

The *Civil and Administrative Legislation (Repeal and Amendment) Act* amended the *Health Practitioner Regulation National Law (NSW)* (the Law) to abolish each of the 14 separate health practitioner Tribunals and to incorporate their functions within the Health Practitioner Division List of the Occupational Division of NCAT. NCAT is now the Responsible Tribunal as defined in section 5 of the Law.

Extensive consequential amendments were required to Part 8 of the Law along with minor consequential amendments to Part 5A of the Law and to the *Health Practitioner Regulation (New South Wales) Regulation 2010*.



## Government Information (Public Access) Act 2009 (GIPA) Statistics 2013/2014

**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	1	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	1	0	0	0	0	0	0
Access applications (other than personal information applications)	1	0	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 (section 41 of the Act)	0
Application is for excluded information of the agency (section 43 of the Act)	0
Application contravenes restraint order (section 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 the 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 section 14 of the 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 section 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 section 54 of the Act)	0

## Digital Information Security Annual Attestation Statement for the 2013/2014 financial year

I, Associate Professor Caroline Hunt, President of the Psychology Council of New South Wales, am of the opinion that the Psychology Council had an Information Security Management System in place during the financial year being reported on which is materially consistent with the Core Requirements set out in the *Digital Information Security Policy for the NSW Public Sector* with the following exceptions:

### Core Requirement 1 - Information Security Management System

Policy PD2013\_033, *Electronic Information Security Policy - NSW Health* applies to the Psychology Council. Agreement has been received that at its next update the Policy will be amended in view of the changes in NSW since 1 July 2010 following the enactment of the *Health Practitioner Regulation National Law (NSW)* and the commencement of the National Registration and Accreditation Scheme.

The Health Professional Councils Authority's *ICT Strategic Plan*, to be finalised in 2014/2015, will implement the Ministry of Health Policy Directive PD2013\_033 for the Psychology Council.

### Core Requirement 2 - Compliance with Minimum Controls

Full adoption of DFS C2013-5 *Information Classification and Labelling Guidelines* will be completed in 2014/2015.

An information security review is planned for 2015/2016 as a prelude to seeking ISO 27001 Certification.

### Core Requirement 3 - Compliance by Shared Service Provider

The Health Professional Councils Authority provided its Digital Information Security Annual Attestation for the 2013/2014 Financial Year to the ICT Board on 30 June 2014.

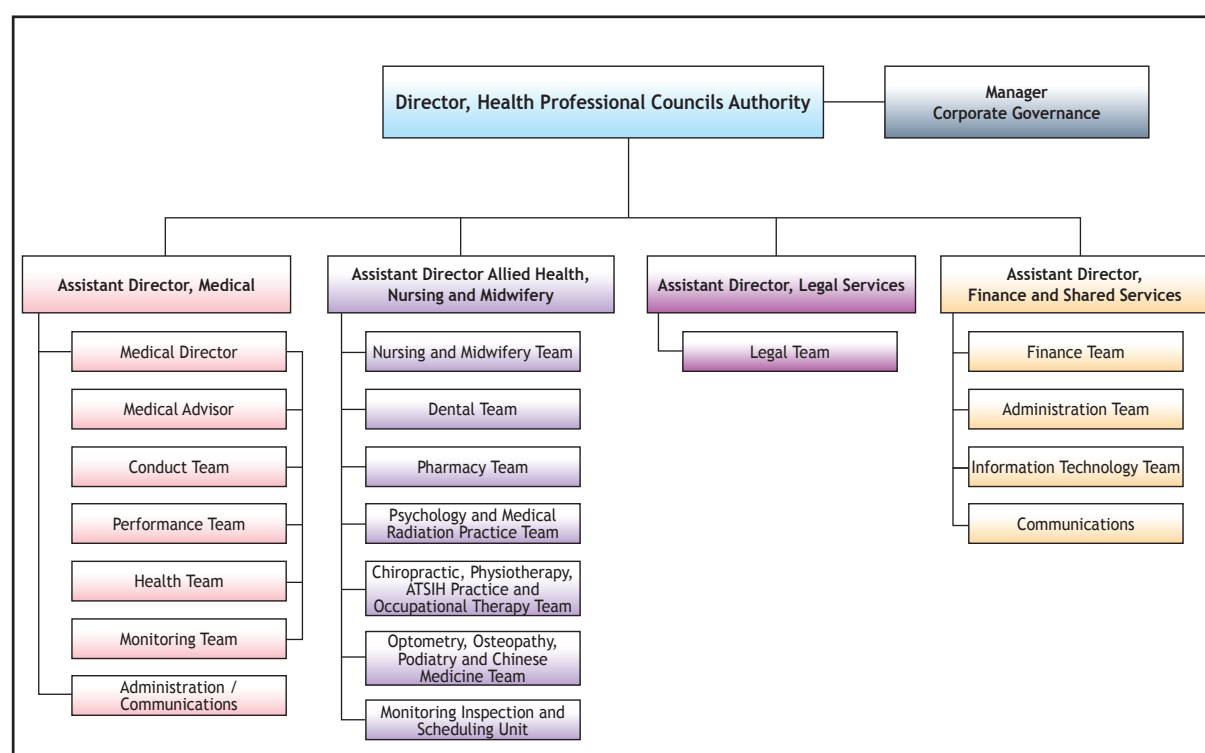
### Core Requirement 4 - Certified Compliance with AS/NZS ISO/IEC 27001

Compliance for ISO 27001 Certification is to be sought in 2015/2016.

## Public Interest Disclosure Statistics July 2013 - June 2014

	Made by public officials performing their day to day functions	Under a statutory or other legal obligation	All other PIDs
Number of public officials who made PIDs	0	0	0
Number of PIDs received	0	0	0
Of PIDs received, number primarily about:			
Corrupt conduct	0	0	0
Maladministration	0	0	0
Serious and substantial waste	0	0	0
Government information contravention	0	0	0
Number of PIDs finalised	0	0	0

## HPCA Organisation Chart as at 30 June 2014



## Workforce diversity statistics

### Trends in the Representation of Workforce Diversity Groups

Workforce Diversity Group	Benchmark/Target	2012	2013	2014
Women	50%	N/A	N/A	85.1%
Aboriginal People and Torres Strait Islanders	2.60%	N/A	N/A	0.0%
People whose First Language Spoken as a Child was not English	19.00%	N/A	N/A	2.3%
People with a Disability	N/A	N/A	N/A	0.0%
People with a Disability Requiring Work-Related Adjustment	1.50%	N/A	N/A	0.0%

## Trends in the Distribution of Workforce Diversity Groups

Workforce Diversity Group	Benchmark/Target	2012	2013	2014
Women	100	N/A	N/A	N/A
Aboriginal People and Torres Strait Islanders	100	N/A	N/A	N/A
People whose First Language Spoken as a Child was not English	100	N/A	N/A	N/A
People with a Disability	100	N/A	N/A	N/A
People with a Disability Requiring Work-Related Adjustment	100	N/A	N/A	N/A

Note 1: A Distribution Index of 100 indicates that the centre of the distribution of the Workforce Diversity group across salary levels is equivalent to that of other staff. Values less than 100 mean that the Workforce Diversity group tends to be more concentrated at lower salary levels than is the case for other staff. The more pronounced this tendency is, the lower the index will be. In some cases the index may be more than 100, indicating that the Workforce Diversity group is less concentrated at lower salary levels.

Note 2: The Distribution Index is not calculated where Workforce Diversity group or non-Workforce Diversity group numbers are less than 20.

## Payments Performance

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	1,832,116	6,704	-	-	-
December	1,137,594	2,880	-	-	-
March	1,327,468	4,705	2,316	2,494	-
June	1,585,322	11,586	68	2,658	-
<b>Small business suppliers</b>					
September	636,714	5,204	-	-	-
December	178,388	2,400	-	-	-
March	399,398	2,720	2,316	2,494	-
June	291,675	9,455	68	2,376	-

Measure	Sept	Dec	Mar	June
<b>All suppliers</b>				
Number of accounts due for payment	203	121	210	133
Number of accounts paid on time	195	117	205	121
% of accounts paid on time (based on number of accounts)	96.1	96.7	97.6	91
\$ amount of accounts due for payment	1,838,819	1,140,474	1,336,982	1,599,633
\$ amount of accounts paid on time	1,832,116	1,137,594	1,327,468	1,585,322
% of accounts paid on time (based on \$)	99.6	99.7	99.3	99.1
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	173	101	181	101
Number of accounts paid on time	167	97	177	92
% of accounts paid on time (based on number of accounts)	97	96	98	91
\$ amount of accounts due for payment	641,918	180,788	406,927	303,574
\$ amount of accounts paid on time	636,714	178,388	399,398	291,675
% of accounts paid on time (based on \$)	99	99	98	96
Number of payments for interest on overdue accounts	0	0	0	0
Interest paid on overdue accounts	0	0	0	0

# 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 practise 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 Complaint

A 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 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 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

A notification 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 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 practitioner's 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 relate to determining if the practitioner has a health issue that impacts on practice and the support of the practitioner in managing the health issues to remain in practice
- Performance: the matters primarily relate to determining if the practitioner has a performance issue that impacts on practice and the support of the practitioner in managing the performance 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 practitioners] or a Professional Standards Committee (PSC) [only for medical, nursing and midwifery practitioners]
- Tribunal: the matter has been referred to or is being heard by the Tribunal
- Appeal/Court: appeals against the decisions of an adjudication 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 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.

## Abbreviations

AABS  
Australian Accounting Standards Board

AHPRA  
Australian Health Practitioner  
Regulation Agency

ARC  
Australian Research Council

ATO  
Australian Taxation Office

AustLII  
Australasian Legal Information Institute

CAP  
Council appointed practitioner

CPI  
Consumer Price Index

DP  
Director of Proceedings

DPP  
Director of Public Prosecutions

FTE  
Full-time Equivalent

GIPA Act  
*Government Information (Public Access)  
Act 2009*

GST  
Goods and Services Tax

HCCC  
Health Care Complaints Commission

HPCA  
Health Professional Councils Authority

IAB  
Internal Audit Bureau

IRP  
Impaired Registrants Panel

MaCS  
Monitoring and Complaints System

MOH  
Ministry of Health

NB  
National Board

NCAT  
NSW Civil and Administrative Tribunal

NRAS  
National Registration and Accreditation  
Scheme

PA  
Performance Assessment

PRP  
Performance Review Panel

SLA  
Service level agreement

The Law  
*Health Practitioner Regulation National  
Law (NSW) No 86a*

TRIM  
Total Records Information Management - the  
document management system used by the  
HPCA

WRAPP  
Waste Reduction and Purchasing Policy

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