

Manitoba Psychologist

THE PSYCHOLOGICAL ASSOCIATION OF MANITOBA /
L'ASSOCIATION DES PSYCHOLOGUES DU MANITOBA

P.A.M. is legally constituted by the Psychologists Registration Act (R.S.M. 1987) as the regulatory body for the practice of all branches of Psychology in Manitoba.

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P.A.M. Supervision Guidelines

*Dr. Hal Walbridge
and Registration and Membership Committee*

The Registration and Membership Committee has observed that some applicants are uncertain about what constitutes post-doctoral supervision, so we offer the following guidelines (following CPA criteria for accreditation):

1. **Individual supervision** is supervision provided to the supervisee by the supervising psychologist who is accountable for the clinical service provided to a patient/client(s).
2. **Individual supervision** consists of visual and/or verbal communication in person between the supervisor and the supervisee in which:
 - a) The supervisor observes the supervisee deliver psychological service (in the room or via one-way mirror), or
 - b) The supervisor and the supervisee review audio or video recordings of the supervisee's delivery of psychological service, or

- c) The supervisor and supervisee engage in case discussion where the supervisee reports on the delivery of psychological service to the patient/client(s).
3. **Individual supervision** can occur between the supervisor and the supervisee as the only participants or it can occur in a group format with other supervisors and supervisees present. However, when supervision occurs in such a group format, it is only counted as **individual supervision** when it involves supervisor feedback to the supervisee working with a particular patient/client (i.e., it must be equivalent to when the supervisor and supervisee are the only participants).
 4. **Group supervision** is when supervisees participate in the supervision of the psychological services delivered by *another* supervisee in a group format. *Note that group supervision counts for half credit; two hours of group supervision is equivalent to one hour of individual supervision.*
 5. **Group supervision** can also be meetings with supervisors and supervisees to review and discuss some method or technique of psychological service delivery, particular problems or disorders, or a professional or ethical issue affecting practice. *However, to qualify for group supervision, these*

discussions must be in the context of clinical work with ongoing cases.

Continuing education workshops or seminars; or staff or administrative meetings *DO NOT* count as **group supervision**. The R&M Committee will not accept these activities as **group supervision**.

6. It is the applicant's responsibility to clearly identify each supervision hour that is claimed as either **individual supervision** or **group supervision**, and to

Any supervision hour claimed must have the signed endorsement of the supervisor.

P.A.M. has developed forms for reporting individual and group supervision. The forms appear on pages 3 and 4 of this issue, and on the PAM website: <http://www.cpmc.ca/documents/Supervision%20Record%20Form.pdf>

clearly distinguish between these two types of supervision. *The applicant must also state explicitly if the group supervision hours have been adjusted or not (i.e., counted as half value of individual supervision hours).*

7. **Individual supervision** must represent at least 50% of the supervision hours claimed. For example, the 100 hours of supervision requirement for one year of supervised practice could

be met with 50 hours of **individual supervision** and 100 hours of **group supervision**, as defined above.

8. Any supervision hour claimed must have the signed endorsement of the supervisor. We recommend using the form on the PAM website: <http://www.cpmc.ca/documents/Supervision%20Record%20Form.pdf> (reprinted this issue of Manitoba Psychologist—Editor).
9. Finally, some applicants are unsure about how to count **Total Hours of Supervised Professional Experience** on the Record of Supervisions forms. These hours are the total number of hours of work activity under the supervision of the supervisor signing the form. For example, if you have one supervisor in an employment setting where you work a standard 8 hour day, or 40 hours per week, and have 3 weeks holidays, then you would claim 1960 hours (40 X 49) over one year. If you are submitting both group and individual Record of Supervision forms, report the same number of hours on both forms (don't split). However, if you are submitting multiple Record of Supervision forms because you have multiple supervisors, divide the hours proportional to what each supervisor covers.



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THE PSYCHOLOGICAL ASSOCIATION OF MANITOBA /L'ASSOCIATION DES PSYCHOLOGUES DU MANITOBA

RECORD OF SUPERVISION - INDIVIDUAL SUPERVISION ONLY

Supervisee: _____ Supervisor: _____

For period from _____ to _____

Total hours of supervised professional service during this period (see guidelines): _____

1. **Individual supervision** consists of visual and/or verbal communication in person between the supervisor and the supervisee in which:
 - a. The supervisor observes the supervisee deliver psychological service (in the room or via one-way mirror), or
 - b. The supervisor and the supervisee review audio or video recordings of the supervisee's delivery of psychological service, or
 - c. The supervisor and supervisee engage in case discussion where the supervisee reports on the delivery of psychological service to the patient/client(s).
2. **Individual supervision** can occur between the supervisor and the supervisee as the only participants or it can occur in a group format with other supervisors and supervisees present. However, when supervision occurs in such a group format, it is only counted as **individual supervision** when it involves supervisor feedback to the supervisee working with a particular patient/client (i.e., it must be equivalent to when the supervisor and supervisee are the only participants).

Date	Nature of clinical work receiving individual supervision	Hours
Total hours for this period		

Signature of Supervisee: _____ Date: _____

Signature of Supervisor: _____ Date: _____

Note: Signing this form also means that both parties have reviewed and comply with the PAM Supervision Guidelines.

THE PSYCHOLOGICAL ASSOCIATION OF MANITOBA /L'ASSOCIATION DES PSYCHOLOGUES DU MANITOBA

RECORD OF SUPERVISION – GROUP SUPERVISION ONLY

Supervisee: _____ Supervisor: _____

For period from _____ to _____

Total hours of supervised professional service during this period (see guidelines): _____

1. **Group supervision** is when supervisees participate in the supervision of the psychological services delivered by another supervisee in a group format. Note that group supervision counts for half credit; two hours of **group supervision** is equivalent to one hour of **individual supervision**.
2. **Group supervision** can also be meetings with supervisors and supervisees to review and discuss some method or technique of psychological service delivery, particular problems or disorders, or a professional or ethical issue affecting practice. However, to qualify for **group supervision**, these discussions must be in the context of clinical work with ongoing cases. Continuing education workshops or seminars; or staff or administrative meetings DO NOT count as **group supervision**. The R&M Committee will not accept these activities as **group supervision**.

Date	Nature of group supervision	Hours of group supervision
	Total Group Hours	
	Supervision Hours Claimed	
	Note: Group supervision hours claimed are calculated by dividing group supervision hours in half.	

Signature of Supervisee: _____ Date: _____

Signature of Supervisor: _____ Date: _____

Note: Signing this form also means that both parties have reviewed and comply with the PAM Supervision Guidelines.

How Close is Too Close?

Richard Steinecke

Reprinted, with permission, from Grey Areas No. 195, April, 2015.

Grey Areas has been published by the Toronto law firm Steinecke Maciura LeBlanc since July, 1992, and focuses on recent developments in professional regulation, analysis of recent studies, examination of recent cases, and scrutiny of recent legislation.

A recurring problem for regulators, particularly for professions with fewer numbers, is to try to constitute panels to deal with complaints or discipline. Too often all available professional panel members know the practitioner or a key witness. Regulators frequently seek guidance as to which connections are too close, thus creating an appearance of bias, and which are sufficiently remote. Despite the formulation of legal tests over the years describing the boundary where an apprehension of bias begins, the decision usually amounts to a “gut feeling” as to what a court would permit.

From *Heffel v. Registered Nurses Association*, 2015 NWTSC 16, regulators can obtain a sense of where that boundary might lie. In that case, a nurse was disciplined for blocking the airway of a patient resisting emergency treatment, apparently as a means of controlling the patient. The nurse denied blocking the patient’s airway. One of the panel members knew one of the key witnesses to the incident. The relative credibility of the witness, compared to the credibility of the practitioner facing discipline was going to have to be assessed by the panel. The Court’s description of the connection is as follows:

A recurring problem for regulators, particularly for professions with fewer numbers, is to try to constitute panels to deal with complaints or discipline. Too often all available professional panel members know the practitioner or a key witness. Regulators frequently seek guidance as to which connections are too close...

The information before the Board was that [the panel member] met and worked with the witness Flood approximately ten years prior to the hearing. Although they worked at the same hospital in Yellowknife, they were not on the same unit. During the time they worked at the hospital, which appears to have lasted for a year or two, they had some mutual social engagements which included attending each other’s weddings, along with most of the other staff

and colleagues from the hospital. [The witness] Ms. Flood left the hospital 8 or 9 years prior to the hearing and from that time [the panel member] had almost no contact with her aside from what were described as very occasional, chance encounters where pleasantries were exchanged.

On cross-examination during the hearing, [the witness] Ms. Flood stated that she and [the panel member] were on each other’s Facebook pages but had never communicated on them.

The Court set out the usual test for assessing whether there was an appearance of bias:

The accepted test for reasonable apprehension of bias was stated by de Grandpré J. in *Committee for Justice and Liberty v. National Energy Board*, [1978] 1 S.C.R. 369 (at p. 394): “what would an informed person, viewing the matter realistically and practically - and having thought the matter through -

conclude. Would he think that it is more likely than not that [the decision-maker], whether consciously or unconsciously, would not decide fairly.”

The Court also repeated the now routine caution that there is a presumption of neutrality:

The cases note that there is a strong presumption of judicial impartiality and the threshold for a finding of real or apprehended bias is high, requiring that there be cogent grounds. Mere suspicion is not enough. As Vertes J.A. noted in *Werner*, the test is not whether a party to the proceeding would reasonably apprehend

bias, but whether the reasonable and informed member of the public would apprehend it (at paragraph [14]). The member of the public is one who is reasonable, not a person of “very sensitive or scrupulous conscience”.

In concluding there was no reasonable apprehension of bias, the Court reasoned as follows:

The fact that the decision-maker knows a witness involved in the proceedings is not a ground to disqualify a judge from hearing a trial on the basis of apprehension of bias....

The passage of time has been held to be an important factor in determining whether a past relationship or circumstance would give rise to a reasonable apprehension of bias in the mind of a reasonable and informed member of the public....

In this case, [the panel member] and the witness Flood knew each other and on occasion attended the same social functions eight to nine years prior to the Board of Inquiry’s hearing. Their connection in the intervening period before the hearing was limited to a few instances of brief, public encounters where pleasantries were exchanged. Even if there is any taint of bias because of their earlier association through the hospital, in my view the passage of time would operate to expunge it such that the reasonable person would reasonably think that it would not prevent [the panel member] from deciding the case fairly.

While the Appellant did not place any emphasis on the evidence that [the panel member] and the witness Ms. Flood were “friends” on the social network website Facebook, I will comment on that aspect of the relationship.... My review of cases where the issue has been dealt with indicates that while Facebook “friendship” indicates that the parties know each other, it does not, without more, establish that there is a relationship which would result in a reasonable apprehension of bias according to the accepted test. More evidence is needed.

Certainly some lawyers advising tribunals would have found concerning this relationship between a key witness and a panel member. Many panel members would have removed themselves, where feasible, in these circumstances. It is not clear from the decision whether the panel member realized who the key witness was before the hearing started. To avoid this sort of issue some regulators advise panel members of the identity of witnesses before the hearing begins.

The Heffel case deals with a number of other interesting issues including whether the reinstatement of the practitioner to her position in a labour arbitration should affect the subsequent discipline hearing on the same series of events.

Ψ



Have you Written a Professional Will?

Under the Regulated Health Professions Act (218.4 (1)), when a College or Association has reason to believe that a Member's health care records are abandoned, or at risk of being abandoned, it becomes responsible for ensuring that those records are promptly secured and protected. Should a Member become incapacitated or die without a Professional Will in place, the College (P.A.M. or a future College of Manitoba Psychologists) will be obliged to take custody of the records by appointing a P.A.M. Member to take charge of them, or apply to the court for appointment of a custodian, or take possession of the records itself. The administrative and financial challenges are obvious. How much better to prevent all of this, and put a Professional Will in place now?

MANITOBA HAS AN APOLOGY ACT – LEARN MORE ABOUT IT!

THE IMPORTANCE AND IMPACT OF AN APOLOGY

An Information Sheet from the Manitoba Institute for Patient Safety and the Manitoba Alliance of Health Regulatory Colleges

Patients^a and their families expect to be told when something has happened that has harmed them or had the potential to harm them. Patients have a right to know this information. Informing them honestly and fully is the right thing to do.

Disclosing and apologizing go hand in hand.

After advising a patient of a harmful event, including a critical incident^b, it is natural to follow with a sincere and honest expression of regret (an apology).

Why patients need to hear an apology.

An apology, given sincerely, can help lessen the emotional impact of the harm, be therapeutic for the patient and health professional as well as lead to healing, regaining trust, and a greater possibility of reconciliation^{2,3}. Apologizing – demonstrating our humanity and the concern we feel makes it possible for the patient and family to forgive.

By apologizing am I admitting liability?

No. An apology can't be admitted as evidence of fault or legal liability. The majority of Canadian Provinces and Territories, including Manitoba⁴, have enacted apology legislation which prohibits apologies from being used in court.

Why do we have Apology Legislation?

A significant number of patients want a sincere apology for what has happened to them. Health professionals may be afraid that apologizing to a patient will create legal liability, or will negatively affect their malpractice insurance coverage. This is not the case in Manitoba. The Apology Act allays these fears and concerns. Allowing health professionals to apologize freely, without creating liability, provides an opportunity to begin making amends.

Why apologizing can also heal the practitioners involved.

After a patient is harmed, health professionals often feel fear, remorse, guilt, shame, self-anger and depression for

what has happened. They "are the second victims, devastated by having been the unwitting instrument that seriously harmed another"⁵. Apologizing, expressing remorse, and a desire to make amends, can lead to forgiveness and healing for health professionals as well.

How to apologize / What you can do.

Talk with your team about who will apologize and how the apology should occur. The words "I'm sorry" should be part of any apology². Apologize as soon as possible. Be compassionate, honest and sincere in your apology. An apology will not be as easy to accept if the patient feels you are forced to apologize or are not genuine in your apology^{2,3,6}. The following may take place over several meetings. These are guidelines. Check your organizational policies for further information.

- Acknowledge that something (e.g. a critical incident) has happened.
- Explain the facts of what has happened without accepting or assigning blame.
- Explain how the incident will affect the health of the patient.
- Make a genuine apology for the incident that shows remorse, humility and compassion. Consider using words like "I feel badly for what happened." "We are sorry." "We know that what happened has caused you unnecessary pain/anguish/health complications...."
- Explain what can happen to help remedy the situation.
- Document the conversation with the patient and family.
- If possible, explain what will change so this same situation is less likely to happen to other patients in the future. People usually want to know that some good may come about as a result of the situation that has caused them emotional or physical pain.
- Once the event has been reviewed, follow-up with the patient to see how they are doing and advise them on what progress has taken place to reduce the likelihood that it does not happen again to others.

^aThe term "patient" includes any recipient of care by a health professional in any setting

^bA critical incident¹ is an unintended event that occurs when health services are provided to an individual that result in serious and undesired effects such as death, disability, injury, harm, an unplanned admission to hospital, or an extension of care in hospital. The unintended event is not as a result of the patient's illness or the risk in treating the illness, but from the healthcare provided.

Under Manitoba's Apology Legislation⁴...

- apologizing does not create legal liability
- an apology does not void, impair or affect your malpractice or liability insurance coverage
- an apology is not admissible in court, including "a tribunal, an arbitrator and any other person who is acting in a judicial or quasi-judicial capacity"⁴ such as disciplinary and grievance hearings, and civil litigation
- it does not apply to criminal offences, such as sexual or physical assault, which fall under federal jurisdiction

Where can I get reliable, confidential advice about apologizing?

Review your regional health authority or health facility policies and procedures or consult the regulatory body governing your profession. You may also consult your professional insurer or protective association.

References

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Download MIPS' resource "*The Facts about Critical Incidents and their Disclosure: Frequently Asked Questions for Healthcare Providers*" at www.mips.ca



**MANITOBA INSTITUTE
FOR PATIENT SAFETY**

www.mips.ca www.safetoask.ca

The Manitoba Institute for Patient Safety promotes, coordinates and facilitates activities that have a positive impact on patient safety throughout Manitoba.

MEMBERS

Manitoba Alliance of Health Regulatory Colleges

College of Audiologists and Speech-Language Pathologists of Manitoba

College of Dental Hygienists of Manitoba

College of Dietitians of Manitoba

College of Licensed Practical Nurses of Manitoba

College of Medical Laboratory Technologists of Manitoba

College of Midwives of Manitoba

College of Occupational Therapists of Manitoba

College of Pharmacists of Manitoba

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College of Podiatrists of Manitoba

College of Registered Nurses of Manitoba

College of Registered Psychiatric Nurses of Manitoba

Denturist Association of Manitoba

Manitoba Association of Optometrists

Manitoba Association of Registered Respiratory Therapists

Manitoba Chiropractors Association

Manitoba Dental Association

Manitoba Naturopathic Association

Psychological Association of Manitoba

The College of Physicians and Surgeons of Manitoba

The Opticians of Manitoba



Protecting your right to safe and ethical care.

Special Section: 2015 ANNUAL GENERAL MEETING

P.A.M.'s 2015 AGM was Wednesday, April 22, 2015 at the Best Western Plus in Winnipeg. The Manitoba Psychological Society and Manitoba Association of School Psychologists brought greetings. After the business meeting and dinner, Ms. Laurie Thompson, Executive Director of the Manitoba Institute for Patient Safety, spoke to Members about Apologies Legislation in Manitoba, which allows Regulated Health Professionals to communicate sorrow or regret to patients and families. She spoke about the power of an apology for healing and resolving disputes (see pp. 7-8). Reports to the AGM continue to page 19.

President's Report

John L. Arnett, Ph.D., C. Psych.

I want like to express my thanks and appreciation to the many PAM volunteers who make it possible for psychology to be a self-regulating health profession in the Province of Manitoba. This includes my colleagues on PAM Executive Council and the psychologists and public members who serve on PAM's nine Committees and Subcommittees. I also want to express my appreciation to our Registrar, Dr. Alan Slusky, for his ongoing dedication

and work in initiating and implementing many of the changes in the way PAM functions that have added considerably to the efficiency and smooth operation of the organization. PAM is very fortunate to be supported by an outstanding legal team. Mr. Ted Bock from Aikins, McAulay & Thorvaldson LLP provides legal excellent advice to PAM Executive Council and Mr. Blair Graham from Thompson, Dorfman, & Sweatman LLP has for many years contributed greatly to the work of the Complaints Committee. Mr. Graham has also agreed to develop an educational module to assist investigators acting on behalf of

the Complaints Committee in investigating complaints. PAM has been very fortunate to have been able to recruit Ms. Doreen Phimister to serve as the Assistant to the Complaints Committee and to retain Ms. Shirley Nicholson as bookkeeper to the Association.

I would like to acknowledge the longstanding contributions of Dr. Bruce Tefft who recently left the Complaints Committee after many years of outstanding service. I also want to thank Mr. Herb Thompson, a public member of the Complaints Committee, for his years of dedicated service to the

Committee before retiring. I also would like to express my appreciation to Drs. Valerie Holms, Richard Howes, and Mr. Glen Matsumoto for agreeing to join the Complaints Committee. I would also like to express my sincere appreciation to Dr. Naomi Berger who recently stepped down as Chair the Examinations Committee and who, with the assistance of the other members of the Examinations Committee, developed a structured oral examination process for ensuring uniformity in the oral examination component of the registration process. I would also like to thank Dr. Anne-Marie Brown DeGagne for agreeing to take over as Chair of the Examinations Committee. I would also like to acknowledge and thank Drs. Andrea Kilgour and Gail Robertson for their contributions to the Registration and Membership Committee and wish them all the best in their future endeavors.

As you know, the work of PAM Executive Council and the various PAM Committees is conducted by Manitoba psychologists and public members who volunteer their time and effort in serving the Association. I want to acknowledge these individuals and express my sincere appreciation and that of the Association for the significant contributions that they make on the PAM Committees and Subcommittees:

- **Registration and Membership Committee** [Drs. Donna Chubaty (Chair), William Davis, Lesley Ritchie, Kent Somers, Hal Wallbridge, and Graham Watson]
- **Complaints Committee** [Drs. Michael Stambrook (Chair), Neil Arnason (Public member), Geri Brousseau, Daryl Gill, Ms. Sandra Hayhow (Psychological Associate Independent Practice), Drs. Valerie Holms, Richard Howes, Linda Rhodes, Greg Tkachuk, Ms. Val Stanowski (Public

- Member), and Mr. Glen Matsumoto (Public Member]
- **Inquiry Committee** [Drs. James Newton (Chair), Neil Craton (Public Member), James Ediger, Lois Edmond, Diane Hiebert-Murphy, Mr. Ian Hughes (Public Member), Drs. Lesley Koven, Linda Trigg, Michelle Warren, and Dr. George Webster (Public member)]
- **Examinations Committee** [Drs. Anne-Marie Brown DeGagne (Chair), Michael Burdz, James Ediger, and Carey Mintz]
- **Publications Committee** [Drs. Neal Anderson (Chair), Morry A. Schwartz, and Alan Slusky]
- **Standards Committee** [Drs. Neal Anderson (Chair) and Gary Shady]
 - **Continuing Education Subcommittee of Standards** [Drs. Jane Bow (Chair) and Don Stewart]
 - **Jurisprudence Subcommittee of Standards** [Drs. Hal Wallbridge (Chair), Lesley Graff, and Alan Slusky]
 - **Legislative Review Committee** [Drs. John Arnett (*ex-officio*), Alan Slusky, and Michael Stambrook]

It's useful to reflect on the wide range of activities that are required to perform PAM's regulatory function. These functions include but not limited to the following:

- Executive Council's ongoing work in setting policy and monitoring the operation of the Association as a whole
- Maintaining the PAM central office
- Ensuring PAM's financial integrity
- Formulating and revising as necessary the Code of Conduct and ethical standards

- Providing information and responding to questions from the general public
- Attending to complaints from the general public and from PAM members
- Reviewing Appeals made by individuals of decisions rendered by the Complaints Committee
- Arranging for Inquiry Committee meetings as required
- Informing and maintaining contact with PAM members
- Responding to questions and concerns of PAM members
- Keeping PAM members informed through publishing Newsletters
- Attending to Standards issues, particularly with regard to reported violations of the *Psychologists Registration Act*
- Maintaining communication with government and other psychology regulatory organizations
- Attending and participating in meetings of the regulated health professions
- Attending meetings with government and providing information to government
- Attending to legislative issues regarding the regulation of psychology
- Processing membership registration and re-registration applications
- Providing oversight and policy guidance to the P.A.M. Committees
- Recruiting and filling vacancies on the various Committees
- Planning for Psychology's inclusion in Manitoba's *Regulated Health Professions Act (RHPA)*
- Attending and representing PAM at meetings of the Association of State and Provincial Psychology Boards (ASPPB)
- Attending and participating in meetings of the Association of Canadian Psychology Regulatory

Organizations (ACPRO) regarding psychology regulation in Canada

As I reported last year, PAM and the Manitoba Association of School Psychologists (MASP) reached agreement on the criteria regarding the registration of school psychologists within PAM. As we sought to implement the agreement in advance of psychology being brought under the *Regulated Health Professions Act (RHPA)* we ran into legal roadblocks. Two basic problems were identified by Mr. Ted Bock, PAM Council's lawyer. First, the *Psychologists Registration Act* states in Section 9(2) that the qualifications for registration as a "psychologist" with PAM require that an applicant "has received from an educational institution approved by the council a **doctoral degree** (bold type is mine) based on a program of studies the content of which was primarily psychological". Since many school psychologists have master's degrees but not doctoral degrees, these individuals could only currently be registered as **Psychological Associates** but not as **Psychologists** with PAM. Since PAM and MASP agreed that for school psychologists the minimum educational degree requirement is the master's degree, this approach to regulation is not acceptable. Second, section 11(2) of the *Psychologists Registration Act* provides for an exemption for school psychologists from registration with PAM as well as conferring the privilege of using the title psychologist to "a person employed as a psychologist by a board of a school district or division", thus effectively placing school psychologists beyond PAM's statutory authority. School psychologists are legally qualified to practice as school psychologists under the *Education Administration Act*. Both of these hurdles can be overcome when psychology comes under the *RHPA* and thus both MASP and PAM are now trying to find a way to encourage government to bring psychology under the *RHPA* as soon as possible.

On January 1, 2015 PAM introduced the Association of State and Provincial

Psychology Boards (ASPPB) PLUS System (Psychology Licensure Universal System) that permits applicants for PAM registration to complete their applications for registration online as an alternative to the traditional paper method. This system has significant potential benefits by permitting applicants to bank their education and training documents with ASPPB for future use should they choose to move to another jurisdiction and seek registration or licensure in the new jurisdiction. ASPPB verifies and certifies all primary source documents and claims that are made by applicants which is a significant advantage if supervisors are no longer able to be located or contacted in the future when an applicant seeks to move to a new location. While ASPPB gathers and verifies the documentation, and banks the data for future access if the applicant so chooses, the decisions regarding registration continue to be made by the individual regulatory boards in the Provinces or States where the applicant is seeking registration or licensure. Because applicant documentation and information is stored on servers located in the United States and thus is subject to the disclosure provisions in the *U.S. Patriot Act*, PAM spent considerable time reviewing the potential risks to applicants associated with using this system. Council concluded that the benefits to applicants of using the PLUS System far outweighed the risks of doing so and thus PAM has made it available as an option to applicants, although its use is not mandatory. Whether an applicant uses the traditional paper method or the PLUS system, the cost of a registration application will remain the same. For those who choose the traditional paper application process they will be charged the current fee of \$300. For those who elect the PLUS system, they will also pay \$300, with \$200 going to ASPPB and \$100 being allocated to PAM (reflecting the diminished workload to PAM with ASPPB doing the document verification and collation).

PAM, in collaboration with Mr. Blair Graham from TDS Law, will soon develop a training module for Complaints Committee investigators. Although not all complaints made to the Complaints Committee require the appointment of an investigator, some of the more involved and complex cases do. And since most investigators to date have been psychologists who have never received training in how to approach a complaints investigation, many potential investigators are naturally reluctant to accept such a challenge. Also, in the absence of training, variations in the investigative approaches are to be expected among investigators. Thus Council recognized the need to provide training for investigators in order to increase the willingness of psychologists to accept the challenge of being an investigator and to standardize the investigative process as much as possible in the interests of fairness and due process. Council considered sending a small number of individuals to a commercially available investigative training program that was being organized in Winnipeg. However, concern arose that since individuals trained in such a program would only rarely be asked to conduct an investigation, what was learned in the commercial program might not be sufficiently retained years later when the individual was asked to conduct an investigation. Also, because complaints may arise in different areas of psychological practice, it was difficult to know which areas of practice from which to choose the attendees. In addition, it was felt that a locally produced training module would be able to better reflect local investigative customs, practices, and laws and be available on an ongoing basis for investigators to refresh their skills just prior to conducting an investigation. Council recognizes that conducting investigations of complaints is an ongoing process and thus continues to explore all options with regard to investigations such as hiring professional investigators (e.g. retired police officers,

lawyers, etc.), funding psychologist investigators to do the work, etc.

Council has been advised that, once again, some PAM members are being pressured to release copyrighted raw test protocols in violation of the conditions that they agreed to when they purchased the tests from the publishers or distributors. Releasing raw test protocols, of course, entails the risk that test questions and materials would likely be entered into the public domain, thus limiting their future utility. This is a situation that arises from time to time and creates a major dilemma and significant discomfort for the psychologists involved. PAM continues to advise that copyrighted raw test materials should only be released under a specific court order, unless they are to be released to a qualified practitioner. However, the legal opinion that PAM has obtained in this matter suggests that the authority to refuse to release the test materials is debatable. In some Provinces there is specific language in legislation that specifically protects psychologists from being compelled to release raw test protocols. Thus, PAM is considering the possibility of requesting that government add provisions to this effect to the next regularly scheduled review / revision of Manitoba's *Personal Health Information Act (PHIA)*. Council's lawyer has recommended that PAM make a submission to government explaining in detail what we would want and why it's necessary from psychology's perspective.

As you know, Council has been actively seeking dedicated office space for PAM for some time now and this process has turned out to be much more difficult than originally anticipated. We have worked with two different brokers and, given our fairly small size among health regulators and our modest space requirements, we likely have not been the most potentially profitable group to work for from the brokers' perspectives. We are now exploring sharing space with another health discipline in which we would share some common spaces (e.g. boardroom and reception area). The

challenge remains to find high quality and accessible space that is of sufficient size to meet our current and intermediate future requirements at a cost that won't drive dues increases for members.

Because PAM's expenditures have continued to be well controlled and our reserve fund is sufficient for the Association to continue to function effectively even in the event of future unexpected and substantial financial demands, Council was again able to modestly reduce the membership dues for next year by approximately five percent. This reduction is consistent with Council's view that membership dues should be set such that the income generated is sufficient to support the necessary activities of the Association and to ensure that PAM is able to continue to function for a sustained period of time in the event of unusual and unexpected financial circumstances.

Overall, this has been a very productive and successful year for PAM and we look forward to the next year with considerable enthusiasm and optimism.

Treasurer's Report for Fiscal Year 2014

Jennifer Laforce, Ph.D., C.Psych.

It is my privilege to report to PAM membership on the sound fiscal status of the association. We had a large surplus in the 2013 fiscal year. It is my privilege to report to PAM membership on the sound fiscal status of the association. Our total expenditures for 2014 were just over \$176 000. We had a surplus this year of just under \$44 000, largely reflecting the fact that PAM did not secure independent office space in 2014, which was a significant budgeted expense.

We continue to closely monitor costs related to complaints and legal matters, which remains our largest expense and also can fluctuate greatly year-to-year as it

chiefly depends on the specificities of the complaints being heard and investigated that year. This year our costs exceeded the budgeted amount for both Legal to Council and Complaints Committee Costs; however, our *overall* Legal and Complaints costs remained under budget given the lack of legal expenses for the Inquiry Committee.

Given we had a surplus this year and the fact that we now have a savings of two years operating expenses, PAM council voted to modestly decrease all membership fees by roughly 5%.

The 2014 budget is presented in the document entitled, *PAM Financial Statement 2014 and Budget 2015*, posted on the PAM website along with the *PAM Profit & Loss Report 2014* (also reprinted this issue of *Manitoba Psychologist*—Editor). The *Balance Sheet for 2014* has not been posted but is available upon request to those members who wish to review it.

The 2015 Budget contains only modest revisions from 2014. Aside from minor increases to cover the rising cost of expenses the following adjustments were made:

1. Both the *Legal to Council and Complaints Committee Costs* budget lines were increased slightly for 2015.
2. Budget lines pertaining to new office space were reorganized so what was called *Capital Expenses* now falls under the *Space rental/storage* line. The overall amount was reduced for 2015 given space is unlikely to be secured in the first half of the year.

Drs. Jackie Walker and John Walker once again served as lay auditors to our association's 2014 books, in accordance with our bylaws. Please see their Lay Auditors' Report to the membership. On PAM Council's behalf, I take this opportunity to thank them for their service.

PAM Financial Statement 2014 and Budget 2015

	Budget 2014	Actual 2014	Budget 2015
<u>INCOME</u>			
<i>membership--late fees</i>	-	625	-
<i>membership--dues</i>	197,370.00	198,817.50	193,615.00
<i>exam fees</i>	4,000.00	8000	6,000.00
<i>application fees</i>	4,000.00	4400	4,000.00
<i>interest</i>	6,000.00	8276.12	8,000.00
<u>TOTAL INCOME</u>	211,370.00	220,118.62	211,615.00
<u>EXPENSES</u>			
Liability Insurance	1,600.00	2,106.00	2,200.00
Meetings	6,000.00	4,513.00	6,000.00
PAM Dues	2,800.00	2,405.18	2,800.00
Office expenses	16,000.00	16,437.86	18,000.00
Registrar	44,000.00	44,060.00	44,000.00
Space rental/ storage*	22,500.00	7,102.60	25,000.00
Capital expenses*	10,000.00	0.00	n/a
TOTAL OFFICE COSTS	92,500.00	67,600.46	87,000.00
Legal to Council	7,000.00	11,638.35	10,000.00
Legal to Inquiry	27,000.00	0.00	27,000.00
Complaints Committee Costs	65,000.00	84,015.13	68,000.00
TOTAL LEGAL/COMPLAINTS	99,000.00	95,653.48	105,000.00
Travel (ASPPB, ACPRO)	8,000.00	4,003.71	8,000.00
<u>TOTAL EXPENSES</u>	209,900.00	176,281.83	211,000.00
Surplus (Deficit)	1,470.00	43,836.79	615.00

* these were two separate budget lines in 2014 but will be combined for 2015
(i.e., Space rental/ Storage/ Capital expenses)

Dr. John R. Walker
 106 – 200 Goulet St.
 Winnipeg, Manitoba R2H 0R8
 Phone (204) 992-2821

March 8, 2015

Lay Auditors' Report

To the Members of the
 Psychological Association of Manitoba

We have audited the statement of financial position of the Psychological Association of Manitoba as of December 31, 2014 and the statements of operations and net assets for the year then ended. These financial statements are the responsibility of the Association's management. Our responsibility as lay auditors is to express an opinion on these financial statements based on our audit.

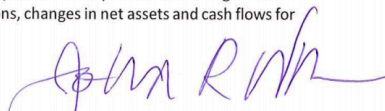
In conducting our audit we reviewed the financial statements and Treasurer's reports. We examined the evidence supporting the amounts and disclosures in the financial statements considering the documents on file used for bookkeeping. We also reviewed the minutes of the Council concerning issues related to the Treasurer's reports and financial decisions. In our opinion the Treasurer's reports, the documentation concerning decisions, and the minutes of Council suggest a prudent use of Association funds and careful attention to financial decisions. The Council has taken measures to control expenditures while continuing to provide a high quality of service to members and the public. There is a healthy amount in reserve to cover unanticipated expenses particularly in the legal area. We note that Council is planning for increased office expenses in the future and has considered reducing member fees.

The budget proposed for 2015 year is realistic given the experience in 2014.

In our opinion, these financial statements present fairly the financial position of the organization as at December 31, 2014 and the results of its operations, changes in net assets and cash flows for the year ending in December 31, 2014.

Sincerely,

 Jacqueline Walker, Ph.D., C.Psych.
 Member
 Psychological Association of Manitoba


 John R. Walker, Ph.D., C.Psych.
 Member
 Psychological Association of Manitoba

Registration and Membership Committee

Donna Chubaty, Ph.D., C.Psych.,
 Chair

PAM's Registration & Membership Committee consists of Dr. Bill Davis, Dr. Kent Somers, Dr. Hal Wallbridge, Dr. Graham Watson, Dr. Lesley Ritchie, and myself as Chair. Dr. Gail Robertson resigned her position on the committee in the spring of 2014. The Registration & Membership Committee meets monthly and reviews new applications as well as requests from existing PAM Members to expand areas of competency. Of particular note, in 2014, Dr. Hal Wallbridge took on the project of

formalizing guidelines for post-doctoral supervision based on CPA standards, and updated forms utilized by candidates to log supervision hours. PAM has adopted these supervision guidelines and corresponding forms, and they are available on the PAM website. (The supervision guidelines and forms also appear in this issue of *Manitoba Psychologist*, pp. 3 - 4 — Editor.)

I am pleased to announce the new registrants for the 2014-2015 membership year:

C.Psych.

Dr. Tiffany Lippens
 Dr. Carole Marion
 Dr. Kristen Young
 Dr. Robin Westmacott
 Dr. David Hill

Dr. Kirsten Wirth
 Dr. Phoenix Gillis
 Dr. Jessie Sandhu
 Dr. Bobbi Walling
 Dr. Sarah Chaulk
 Dr. Colleen Murphy
 Dr. Christopher Tysiaczny
 Dr. Stuart Toews
 Dr. Jennifer Volk
 Dr. David Podnar

C. Psych. (Candidate)

Ms. Karen O' Brien
 Dr. Lillian Saltel
 Ms. May Lee
 Ms. Natasha Ali
 Ms. Carly Chand
 Ms. Lauren Chance
 Dr. Brigitte Sabourin
 Dr. Ronak Patel

Dr. Lisa Dreger
 Ms. Alexis Faller
 Dr. Brad Zacharias
 Dr. Claire Milgrom
 Ms. Kathryn Williamson
 Ms. Allisha Patterson

P.A. (Candidate)

Ms. Claudia Riddell
 Ms. Stephanie Sinclair

P.A. (IP)

Ms. Kristin Rinn

Complaints Committee

Michael Stambrook, Ph.D., C. Psych., Chair

The work of the Complaints Committee fulfills one of the major functions of the regulatory mandate of the Psychological Association of Manitoba (PAM) in monitoring and investigating the

professional practice of Psychologists and Psychological Providers based on Complaints that PAM receives. Information on the Complaints Process is available in electronic and brochure form. Complaints are received in writing by the Registrar of PAM, Dr. Slusky, and can be made by any member of the public and, by Psychological Practitioners.

The Complaints Committee of the Psychological Association of Manitoba is currently composed of the following PAM members: Drs. Geri Brousseau, Daryl Gill, Richard Howes, Valerie Holms, Linda Rhodes and, Ms. Sandra Hayhow, with myself as Chair, and Public Representatives, Dr. Neil Arnason, Mr. Glenn Matsumoto, and Ms. Val Stanowski.

Mr. Blair Graham, Q.C. of Thompson Dorfman Sweatman LLP, is the legal counsel to the Committee, and Ms. Doreen Phimister, Administrative Assistant/Complaints Coordinator,

provides administrative and organizational support to the Committee.

Drs. Bruce Tefft and Gregg Tkachuk and Mr. Herb Thompson retired from the Committee in 2014, and on behalf of the Committee and PAM, I offer them thanks for their dedicated, thoughtful contributions and their commitment to the regulation of Psychology in Manitoba. In September 2014, Drs. Richard Howes and Valerie Holms became Psychologist Committee members and a new Public Representative, Mr. Glenn Matsumoto, was appointed.

Thank you all for your contributions in ensuring that the Committee's work is efficient, is consistent with the parameters of the Committee's legal and legislative framework, and considers all professional practice, administrative, and legal issues.



As I have indicated previously, all Committee members need to review very lengthy and complex professional practice, ethical, and competency issues, and do so with care, diligence, thoughtfulness, and clear thinking. Their volunteer commitment to the professional practice of Psychology in Manitoba is noteworthy here, and on behalf of PAM, I thank the Committee members for their very meaningful contribution.

As part of the investigation and review of Complaints, Psychologists play an important role as Investigators, Consultants, Experts, and remediation Supervisors, and I would like to acknowledge and thank the following Psychologists who have assisted the Complaints Committee in the Committee's adjudication of complaints and complaints follow-up in 2014: Dr. Matthew Decter, Dr. Lawrence Ellerby, Dr. Dell Ducharme, Dr. Leonard Greenwood, Dr. Garry Hawryluk, Dr. David Kolton, Dr. Corey Mackenzie, Dr. Lesley Ritchie, and Dr. Kent Somers.

Over and above the review of the detailed Complaint documentation, the Complaints Committee met 11 times during 2014, and continues to use a "Case Management Model" to manage each Complaint through its process. The Committee reviewed significant documentation and reports between meetings, and followed up with Investigators, Experts, Psychologists, remediation Supervisors, and Complainants.

The Committee remains keenly aware of the costs of its operation and has worked on cost efficiencies and on recommending cost-recovery as appropriate. I have spoken to this issue previously and, we continue to work on implementing this in our recommendations for disposition of complaints.

As per By-law 1, decisions that the Complaints Committee can consider and make are as follows:

- (a) direct that the matter be referred, in whole or in part, to the Inquiry Committee;
- (b) direct that the matter not be referred to the Inquiry Committee;
- (c) accept the voluntary surrender of the member's registration;
- (d) censure the member if:
 - i) at least one member of the committee has met with the member and the member has agreed to accept the censure, and
 - ii) the committee has determined that no action is to be taken against the member other than the censure;
- (e) refer the matter to mediation if the committee determines that the complaint is strictly a matter of concern to the complainant and the member, and both parties agree to mediation;
- (f) enter into an agreement with the member that provides for one or more of the following:
 - i) assessing the member's capacity or fitness to practise psychology,
 - ii) counselling or treatment of the member,
 - iii) monitoring or supervising the member's practice of psychology,
 - iv) requiring the member to complete a specified course of studies by way of remedial training,
 - v) placing conditions on the member's right to practise psychology; or
- (g) take any other action that it considers appropriate in the circumstances and that is not inconsistent with or contrary to the Act or the regulations or by-laws under the Act.

The Complaint Summary table is an outline of the complaints received and complaint outcomes in 2014 and with a comparison to previous years.

Of the 16 complaints carried forward from 2013, 10 have been closed, and 6 are

in various stages of completion. Of the 6 new complaints in 2014, 3 have been dismissed, and 3 are in various stages of completion. Of the 13 complaints closed in 2014, 12 were dismissed; a number with comments to the Psychologist, one with a supervision requirement, and one resulted in a Censure. A number of Complaints have been put in an Inactive category, as the Psychologist is no longer practicing.

The Committee has provided comments for the Psychologist to consider in situations where the Complaint situation and the Psychologist's practice did not reach the level of being unprofessional, or of unethical conduct.

Psychological Assessment in contested venue situations, particularly custody/ access assessments and in insurance-based independent assessments, continues to be an area where many Complaints are generated as has been the case previously. Complaint issues relate to assessments in highly specialized practice areas, fees charged, office practices, boundary issues, supervision of credentialed and un-credentialed Psychological Providers, inter-professional communication, report timeliness, bias on assessment and in Court testimony, possible fraud, and possible impairment in functioning.

There continues to be an increased trend for Complaints to be accompanied by a significant volume of written material, and careful review of this material does require time, energy, and consideration of many issues.

The Complaints Committee heavily relies on the members of PAM to facilitate and assist the complaints process. This comment is directed to the member Psychologists who have had complaints against them and who have responded in a timely manner with information, and to the Investigators, Experts, and Consultants whom the Committee relies on to fulfill its regulatory duty.

Complaint Summary

	2014	2013	2012	2011	2010
Carried Forward (from previous year)	16	12	8	9	11
New Complaints	6	10	10	6	7
Total Reviewed	22	22	18	15	18
Outcome of Committee Review					
Closed	13	6	6	7	9
Carried Forward	9	16	12	8	9

During the current reporting period no hearing panels were convened. During this period the Committee lost the services of Dr. Diane Hiebert-Murphy who has now joined Council. Both on behalf of the members of the Inquiry Committee and personally I would like to thank Dr. Hiebert-Murphy for her ongoing support of the work of the Inquiry Committee over the past several years. All of the members of the Inquiry Committee are volunteers and as such freely contribute many hours to the demanding work of participating on panels when asked to do so. On behalf of the Association, I thank each of them for their ongoing and valuable contribution of time, commitment and expertise.

I continue to urge all PAM members to consider the request that they may receive at times to function as Investigators, Experts, Consultants to the Committee, or as remediation Supervisors, as participating in these roles in the regulation of the Profession is vital to the Committee's operation, and in fulfilling our obligation to the public.

Inquiry Committee

James H. Newton, Ph.D.,
C.Psych. Chair

As I have reported previously, the task of the Inquiry Committee is to serve as a three (3) person panel in those instances in which the Complaints Committee recommends charges be laid against a member and that a hearing be held.

Standards Committee

Neal D. Anderson, Ph.D.,
C.Psych., Chair

A central task of the P.A.M. Standards Committee is looking into situations where a non-Psychologist appears to have contravened C.C.S.M. c. P190 The Psychologists Registration Act

Identify Yourself...

as a P.A.M. Registrant in all professional materials (reports, correspondence, advertisements, etc.).

P.A. (S.P.)

C.Psych. (Candidate)

P.A. (Candidate)

P.A. (I.P.)

C.Psych.

By including these letters after your name, you communicate your regulatory standing to members of the public and to other psychologists. You say that you've met P.A.M.'s rigorous professional entry requirements and that you participate in ongoing improvement of your knowledge and skills. You acknowledge that you are required by law to deliver professional services competently and ethically, and that you're accountable to the public, through P.A.M.,

(Manitoba), which states that the professional designation “C.Psych.” may only be used in Manitoba by persons duly Registered with the Psychological Association of Manitoba. The Act provides that it is an offense for any person not registered under the Act to refer to him/herself as a psychologist or to describe the services he/she provides using the words “psychological”, “psychologist” or “psychology.” In other words, for a person to hold himself or herself out as a Psychologist in Manitoba—or failing to correct others who have incorrectly identified them as a Psychologist—is likely to contravene the Act. Standards has occasionally been asked to look into situations where a person Registered as a Psychologist in another jurisdiction offers Psychological services in Manitoba; a good example of this is a person Registered in another jurisdiction providing services to someone in Manitoba via Telepsychology without also being Registered in Manitoba.

As we have become aware of organizations or individuals presenting themselves or their services in contravention of Section 11(1) of the Act, we’ve continued our practice of first seeking to educate the relevant parties through letters and follow-up conversation. To the best of our knowledge, during the past year, these educative efforts seem to have corrected problems, as (non-Psychologist) clinicians have made appropriate adjustments to the ways in which they operate.

Certain types of issues seem to be raised most commonly with Standards. For example, instances of non-Psychologists presenting themselves to the public as “Sports Psychologists” continue to come to our attention occasionally, although the discussions last year between P.A.M. Standards and the Sport Medicine and Science Council of Manitoba (SMSCM) have continued to be helpful. That is, beyond acknowledging that it had at one time unintentionally acted in

contravention of Section 11(1) of the Psychologists Registration Act and bringing itself into compliance, the SMSCM also took our concerns to the Canadian Sport Psychology Association, which in turn began to educate its Members about differences between Psychology, as a regulated health profession, and Mental Performance and Life Enhancement. It is good to be able to refer people doing this kind of work back to the SMSCM and the CSPA and know that either body will underline our advice.

There have also been further examples of clinicians authorized to use the title “Psychologist” within an exempt settings (such as a school or university or hospital) but who seem to have used the title outside of the exempt setting, in contravention of the Act. During the past year, Standards has contacted three clinicians currently or formerly employed by School Divisions who were known to have sought and accepted work as a Psychologist outside of that exempt setting. It seems that, here too, people we’ve needed to contact have made appropriate adjustments to their practices after hearing from us. In one case, a clinician was working as School Psychologist with a School Division was also working as an Supervised Associate in the private practice of a Registrant: here, the matter was resolved by the practice clarifying and highlighting the nature of the supervisory relationship (between Registered Psychologist and clinician outside of the exempt setting) on a website and committing to provide correct information to the public in the Associate’s day-to-day work.

Our thanks go out to the P.A.M. members and certain members of the public who have brought situations like these to our attention.

Subcommittees of Standards have continued to do important work. The Continuing Education Committee, led by Dr. Jane Bow, has completed another year’s audit of CE claims (approximately

ten percent of the P.A.M. membership) and reported her findings to Council. Dr. Bow’s work with the CE Audit and with CE otherwise is very important to P.A.M. Another Standards Subcommittee, the Jurisprudence Examination Review Subcommittee, now completed its task of reviewing and revising this exam, and the new exam is now in use.

This is my fourth and final report to an AGM as Chair of P.A.M.’s Standards Committee. I want to express my appreciation for the work of the following my colleagues for their work on Standards or one of its Subcommittees: Drs. Jane Bow, Don Stewart, Hal Wallbridge, Lesley Graff, Andrea Kilgour, Gary Shady, and Alan Slusky. I also want to thank P.A.M. for giving me the opportunity to serve in this capacity.

Examinations Committee

Anne-Marie Brown-DeGagne,
Ph.D., C. Psych., Chair

The Examinations Committee of the Psychological Association of Manitoba is charged with organizing, implementing and reporting the results of oral examinations of candidates seeking registration to practice psychology independently in Manitoba. In addition, the Examinations Committee organizes, implements and reports on oral interviews for psychologists registered to practice independently in other jurisdictions, who are now seeking to be registered in Manitoba under the terms of the Agreements on Internal Trade. Two Thousand and Fourteen was a busy year for the examinations committee, with thirteen oral examinations taking place. Moving forward into 2015, one exam and one interview have already been administered, with seven set up to occur in the spring. Sincere thanks are extended to the following volunteer oral examiners, who generously gave of their time and

expertise to support the work of this committee: Drs. Liz Adkins, Paula Battle, Anastasia Barbopoulos, Michael Burdz, Meera Chohan, Karen Dyck, Lawrence Ellerby, Ali El-Khatib, Gary Fisher, Alan Gutkin, Diane Hiebert-Murphy, David Hill, Valerie Holms, Richard Howes, Solange Lavack, Amanda Lints-Martindale, Bob McIlwraith, Carey Mintz, Bailey Rayter, Lynn Ryan, Valdine Scott, Gary Shady, Richard Shore, Kent Somers, Vicki Stubbings, Leslie Thorne, Norah Vincent and Kirsten Wirth.

The Examinations Committee is fortunate to have a strong and committed roster of volunteer oral examiners. However, to alleviate the demand on these individuals, additions to the examiners' roster are always welcomed. Interested psychologists are encouraged to contact me for details.

Special recognition is also due to the members of the Examinations Committee. Committee members devoted considerable time and energy toward developing, piloting and implementing a scoring rubric, to be used in evaluating the performance of examinees. Thanks are extended to Drs. Naomi Berger, Michael Burdz, James Ediger and Carey Mintz, who worked tirelessly on this project. The scoring rubric has now been adopted for general use in the oral examination process and feedback to date has been very positive.

Finally, warmest appreciation goes to Dr. Naomi Berger who served as Chair of the Examinations Committee between 2007 and 2014. She organized over 70 exams, often chairing or participating as one of the panel members. Thank you, Naomi! Your dedication, organizational skills and willingness to share your years of knowledge and experience are much appreciated.

Publications Committee

Neal D. Anderson, Ph.D.,
C.Psych. Chair

Since last AGM, the Association has published two more issues of *Manitoba Psychologist* (ISSN0711-1533) as Volume 31, No. 1 (Summer, 2014) and No. 2 (Winter 2014-2015). The Summer issue provided coverage of the 2014 AGM along with a feature about the coming move from "Continuing Education" to "Continuing Competence" for Manitoba Psychologists under RHPA and within the profession more broadly, along with general information for Members. In 31:2, we presented articles about Apologies Legislation in Manitoba, Encryption of Electronic Patient Records, considerations

for self-regulating bodies with respect to registering applicants with disabilities.

P.A.M. plans to publish another two issues of *Manitoba Psychologist* this coming year. The purpose of the newsletter will remain that of providing information about regulatory issues both for the psychological community and the wider public, consistent with P.A.M.'s central responsibility for protecting the public. Content will continue to focus on membership, standards, complaints, continuing education/ continuing competence, and other regulation-related matters. As we have for several years now, we'll post new issues on our website and notify members and interested non-members that we've done so. We'll continue to keep back-issues on the P.A.M. website as well.

This is my seventh report to the P.A.M. AGM as Chair of the Publications Committee and, as it happens, also my last. I want to thank my colleagues on Publications, Dr. Alan Slusky and Dr. Morry A.J. Schwartz for all of their efforts, and also to express my gratitude to the Association for allowing me to serve through these past years.



registrar [ˌrɛdʒɪˈstrɑː ˈrɛdʒɪˌstrɑː]

n

1. chief administrative official responsible for maintaining legal registers of, and appropriate information about, P.A.M. Members
2. person responsible for providing information as required by the Provincial Minister
3. first point of contact for members of the public seeking information about psychology in Manitoba, or who are concerned about the actions of a P.A.M. member

Dr. Alan Slusky, C.Psych., Registrar
Psychological Association of Manitoba
162 - 2025 Corydon Ave., #253

Committees

THE PSYCHOLOGICAL ASSOCIATION OF MANITOBA /
L'ASSOCIATION DES PSYCHOLOGUES DU MANITOBA

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Grace Tan-Harland, Ph.D., C.Psych. (Vice-President)
Jennifer Laforce, Ph.D., C.Psych. (Treasurer)
Donna Chubaty, Ph.D., C.Psych. (Member-at-Large)
Dianne Hiebert-Murphy, Ph.D., C.Psych. (Member-at-Large)
Andy Lubowsko, Ph.D., C. Psych. (Member-at-Large)
Morry A. J. Schwartz, Ph.D., C.Psych.
(Member-at-Large)

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Leslie Ritchie, Ph.D., C. Psych.
Kent Somers, Ph.D., C. Psych.
Hal Wallbridge, Ph.D., C. Psych.
Graham Watson, Ph.D., C. Psych.

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Daryl Gill, Ph.D., C.Psych.
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Richard Howes, Ph.D., C.Psych.
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Dr. Neil Arnason (Public Member)
Mr. Glenn Matsumoto (Public Member)
Ms Val Stanowski (Public Member)

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Examinations Committee

Naomi Berger, Ph.D., C.Psych. (Chair)

Publications Committee

Vacant (Chair)
Morry A. J. Schwartz, Ph.D., C.Psych.
Alan Slusky, Ph.D., C.Psych.

Standards Committee

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Gary Shady, Ph.D., C.Psych.

Continuing Education (Sub-Committee of Standards)

Jane Bow, Ph.D., C.Psych. (Chair)
Don Stewart, Ph.D., C.Psych.

Jurisprudence Examination (Sub-committee of Standards)

Hal Wallbridge, Ph.D., C.Psych. (Chair)
Lesley Graff, Ph.D., C.Psych.
Alan Slusky, Ph.D., C.Psych.

Legislative Review Committee

Diane Hiebert-Murphy, Ph.D., C. Psych. (Chair)
John Arnett, Ph.D., C.Psych. (ex-officio)
Alan Slusky, Ph.D., C.Psych.
Michael Stambrook, Ph.D., C.Psych.

Nomination Committee

James Newton, Ph.D., C. Psych.

Registrar

Alan Slusky, Ph.D., C.Psych.
— As of April 29, 2015