

PSYCHOLOGIST

A Journal Published by The Association of Psychologists of Nova Scotia

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Fall 2010

INCOMING PRESIDENT'S REPORT



Michael Ross, Ph.D., APNS President

These are exciting and challenging times for psychologists, both locally, nationally, and beyond. I can remember, however, these remarks, or similar sounding remarks, from conferences when I was in graduate school. It seems that while the specific challenges may change (although some seem the same) there are important challenges facing our profession does not.

Some interesting recent examples the APNS is dealing with include: the proposed Provincial personal health information legislation that from our read seems to undermine health consumers' ability to trust that their personal health information is confidential and protected (members of our executive will be meeting with representatives from the Provincial

Government shortly on this matter). The entry level credential issue which the APNS has worked collaboratively with the NSBEP to ensure broad and comprehensive input from our members via a series of discussion meetings and written submissions. We are excited about the development of a new committee for early career psychologists (please contact us if you would like to be involved in this committee) that will provide an opportunity for new psychologists and recent graduates to come together and plan initiatives, share experiences, and become involved in a wide range of projects. We can also expect to hear more from the NSBEP about continuing competency requirements.

The APNS will continue to offer and expand our workshop series. We will continue our ethics workshops at various locations throughout the province as well as our outreach meetings. Please plan to attend and give us your input if we are in your area. We will also review our fee schedule this year and refine our performance appraisal process.

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Articles

EDITOR'S REMARKS ~ Debra Garland, Editor



Debra Garland has been in private practice in Dartmouth, Nova Scotia since 1997. She offers services to individuals, families, government agencies and Family Court with a focus on custody access, parental capacity and psychoeducational assessments, as well as parenting and co-parenting interventions. She is a past President of APNS and maintains memberships in CPA, AFCC and CRHSPP.

Here we are back to fall and the pace seems to be picking up exponentially! The summer was beautiful which hopefully allowed everyone some time to relax and indulge. The newsletter this quarter focuses on change – or perhaps as much as things change they remain the same. Michael Ross our President acknowledged the issues for our profession have in large part, remained constant. Myles Genest in his article spoke similarly offering a reminder for our need to consult and exert vigilance about requests related to assessments. This is an active time for our profession; discussions of registration changes, government cutbacks, the effects on how we practice, and greater prominence of private insurance in treatment, etc.

With all of this change/movement the need for a collaborative association becomes of even greater importance, hence the development of the Early Career Development Committee. We are an active association that strives to listen and respond to our members' needs and feedback; however, we can only function at our best with the input and involvement of our membership. Taking the Executive on the road for meetings was an initiative started by a past president, Bob Milks which continues today and has expanded by providing regular seminars on ethics delivered in various locations throughout the province. This began by listening and responding to our members. We are constantly seeking input from our membership from all over the province. The APNS newsletter welcomes contributions, if there is a particular topic or area of interest please forward emails to apns@apns.ca with ideas or contributions.

Finally, I would be remiss not to note our Past President Robin McGee is participating in an Olympic fight with cancer – she's truly a gold medalist and her courage and determination are inspiring. Robin has kept us posted about her journey via "Lotsa Helping Hands"; our positive thoughts are always with her.

INCOMING PRESIDENT'S REPORT (continued from page 1)

Broader challenges facing our profession include access to psychological services for Canadians and the integration of psychological services into primary health care, the promotion of psychological services to the public and employer institutions, the training and supervision of psychology students and improving the relevance of the training to the needs of society, the list could go on and on which of course it will.

Oftentimes, the challenges, local, national, or international can seem overwhelming and appear to be discouraging. I am feeling optimistic,

however, about our profession and our association. We have a good history of being able to adapt and roll with the punches, we are sound financially, we have an efficient and very competent office manager, we have creative, skillful, and dedicated psychologists on the executive, we have committed and generous committee chairs and APNS liaisons, and we have a strong and growing membership. All of which is very reassuring when we get bogged down in the nitty-gritty of the issues we must deal with.

THREATS TO THE VALIDITY OF INDEPENDENT PSYCHOLOGICAL ASSESSMENTS ~ Myles Genest, Ph.D., Genest Psychological Services, Inc.



Early this year, one of the psychologists in our practice was threatened with a lawsuit if, after the day of an assessment, she were so much as to speak on the telephone to the individual whom she had been assessing. The examinee had planned to provide the psychologist with information about medication, which he did not have at the time of the assessment. When the rehabilitation company requesting the assessment heard of this, it reacted with shrill and insistent protest, which quickly escalated into a threat of legal action by an executive with the corporation.

This was only one recent and extreme example of what seems to be a trend by insurers, agencies who act on their behalf, and lawyers to attempt to exert increased control over assessments. Judging by the requests that I have had for consultations, psychologists are very concerned about such intrusions of third parties into psychological assessments and therapy. The issues raised touch on issues of responsibility to those whom we see, to those who pay for our work, and to the law, as well as issues of confidentiality.

Who “owns” the information?

Insurers, their agents and lawyers commonly assert that they are the “clients” who are hiring the psychologist to produce an assessment, and as such, they are the only ones who are entitled to the information from the assessment. They routinely attempt to block psychologists from providing in-person feedback or reports to the person assessed, or to other individuals or agencies.

This raises the question of who “owns” the information from a psychological assessment.

Principle III of the CPA code of ethics, Integrity in Relationships, addresses issues of “Straight-forwardness / openness” in relationships. Paragraph 15 states that adherence to the principle leads psychologists to provide feedback to those whom they assess:

[Psychologists] provide suitable information about the results of assessments, evaluations, or research findings to the persons involved, if appropriate and if asked.

“Persons involved” would include at least the individual who is assessed, but could also be read to include the party who commissioned the assessment.

The further discussion of this principle in the CPA Code suggests that there may be instances in which such feedback might not be provided:

Fully open and straightforward disclosure might not be needed or desired by others and, in some circumstances, might be a risk to their dignity or well-being, or considered culturally inappropriate.

If full disclosure is not provided, the code is clear that the individual must be informed of this beforehand and that the withholding of information is not undertaken lightly:

In such circumstances, however, psychologists have a responsibility to ensure that their decision not to be fully open or straightforward is justified by higher-order values and does not invalidate any informed consent procedures.

Because the Canadian legal system, which is primarily adversarial, includes the principle of legal privilege, psychological information that is available to some parties may not be available to others, except through legal channels. In some instances it is up to the court to determine what

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information *must* and what *may not* be shared among parties, and the psychologist who is carrying out an assessment that may contribute to decisions of the courts has an obligation to adhere to normal legal process. If a party has a right to commission an assessment, it may therefore also have the right to prevent the information that issues from that assessment from being communicated even to the person who is assessed, and it is not up to the psychologist to override that privilege.

Clause 5.4 of the NSBEP's Standards also bears on the issue:

To the extent advisable and not contraindicated, a psychologist shall properly inform a person who has undergone an assessment or his/her legal representative of the conclusions, opinions and recommendations issuing from the assessment within a reasonable time.

(NSBEP Standards of Professional Conduct)

The qualifiers, "to the extent advisable and not contraindicated," obviously permit exceptions to providing feedback to the individual who was assessed. The phrase would appear to relate to the possibility that feedback may have the potential for harm, which could contra-indicate and override the responsibility for full disclosure of information in relatively rare instances.

The APA code of ethics (2002) is, as usual, more direct and prescriptive. It clearly provides for



some situations in which direct feedback may not be provided to the person assessed, including in "forensic evaluations". But, consistent with the Canadian Code's

requirement that such withholding be part of the informed consent, it also says that we have to explain this beforehand:

9.10 Explaining Assessment Results

Regardless of whether the scoring and interpretation are done by psychologists, by employees or assistants, or by automated or other outside services, psychologists take reasonable steps to ensure that explanations of results are given to the individual or designated representative unless the nature of the relationship precludes provision of an explanation of results (such as in some organizational consulting, preemployment or security screenings, and forensic evaluations), and this fact has been clearly explained to the person being assessed in advance. (APA, 2002)

Note that "forensic" applies broadly to all evaluations in which the courts may be involved, both criminal, as well as civil, such as assessments related to contested disability claims.

Following the principles from the codes and standards, psychologists have a responsibility to provide information about the findings of an assessment to the individual who is assessed, but that responsibility may be superceded by a higher-order responsibility to protect the individual, should the feedback be deemed potential harmful. Secondly, that responsibility may be set aside in instances in which a third party has commissioned the assessment and requires that feedback *not* be provided to the individual who was assessed.

There is, however, a complication with respect to the latter situation. Federal legislation, in the form of the *Personal Information Protection and Electronic Documents Act*, usually referred to by its acronym, PIPEDA, applies to health records that are collected by private practitioners. The following sections are from Schedule 1 of the Act:

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THREATS TO THE VALIDITY OF INDEPENDENT PSYCHOLOGICAL ASSESSMENTS (continued from Page 4)



4.9 Principle 9 — Individual Access
Upon request, an individual shall be informed of the existence, use, and disclosure of his or her personal information and shall be given access to that information. An individual shall be able

to challenge the accuracy and completeness of the information and have it amended as appropriate....

4.9.4

An organization shall respond to an individual’s request within a reasonable time and at minimal or no cost to the individual. The requested information shall be provided or made available in a form that is generally understandable. For example, if the organization uses abbreviations or codes to record information, an explanation shall be provided.¹

Except in some carefully prescribed circumstances, there is no provision in this legislation for a health professional to refrain from providing full disclosure. It is likely the force of this legislation that led the College of Physicians and Surgeons of Nova Scotia to provide the following direction for its members:

9.4 Third Party Reports

Patients should be informed of the purpose of the examination and the way it will be conducted. The patient must be advised in advance that the prepared report will be disclosed to the third party requesting the report as well as to the patient if so requested by the patient....

In terms of patient access to medical records, reports prepared or records relating to

examinations conducted at the request of a third party are considered the same as any other medical records. The physician must allow the patient access to these reports if requested, subject to the same conditions applicable to other medical records. This does not apply to situations where the physician has no patient contact and offers an opinion based on pre-existing records.

(Guidelines for Medical Record-Keeping, 2008)

This guideline appears to be simply an acknowledgment of the legal requirement that is provided by PIPEDA. As far as I am aware, psychologists do not yet have a formal statement to this effect from their regulatory body.

Thus, it would seem that when we act as requested by insurers, lawyers, and other agencies who inform us that we must not release information about the assessment to the individual who is assessed, we may be open to challenge under our privacy legislation. It may also be, however, that in individual cases there are other laws governing release that would take precedence over PIPEDA. The privacy act does allow for exceptions to disclosure in the case of solicitor-client privilege, or information generated in the course of a formal dispute-resolution process, or “when required by law.” Some assessments may fall under these exceptions. It would be helpful to psychologists if our regulatory board were to clarify these circumstances for us.

Influencing outcomes

Rehabilitation agencies who are hired by insurers to co-ordinate assessments and treatments of insured individuals commonly ask for electronic copies of reports, ask for us to provide our reports on their letterhead, and sometimes attempt to

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¹ A useful guide to PIPEDA can be found on the website of the Office of the Privacy Commissioner of Canada, at http://www.priv.gc.ca/information/guide_e.cfm#010

THREATS TO THE VALIDITY OF INDEPENDENT PSYCHOLOGICAL ASSESSMENTS (continued from Page 5)

influence, if not dictate, how our findings are worded or what conclusions we draw. In one instance in our practice, an agency composed a letter over the psychologist's name and provided it to her with a request for her signature. In another, an agency attempted to prevent me from referring to a current, published reference work in my report and insisted that I refer to a prior and outdated edition because the law under which the assessment was requested requires use of the outdated resource, even though its particulars have been acknowledged by the professional community as inappropriate.

That such intrusive practices should be attempted may be surprising, but at least they are fairly readily recognized and can easily be successfully countered.

Less obvious influences have the potential for more harm simply because the threats they pose may not immediately be evident. For example, lawyers who commission assessments on behalf of either plaintiffs or defendants in personal injury cases sometimes request that the psychologist communicate with them "after you have examined the plaintiff and before you prepare your report." The intention is to obtain a preview of the assessment's results, with a view to discontinuing the process, precluding the completion of a report if it is deemed not to be in the client's interest or to advance the client's cause. I have had lawyers who make this request appear quite puzzled when I have declined their invitation for a telephone consultation after I see the client and before I have completed my report.

If, following a discussion between the psychologist and counsel, there is a possibility that the assessment process will be terminated, then the assessment is not truly independent, but is partly contingent upon the lawyer. In such an instance,

the lawyer is maintaining the option of not having an opinion expressed, if the opinion looks likely to be of one sort rather than another. In other words, counsel wants to retain the possibility that only certain opinions may be expressed; others may be filtered out. Thus, the ultimate opinion is not truly independent.



Lawyers will argue that they do not wish to interfere with the process nor to determine the outcome of the assessment, but that if it is clear that the assessment is not going to assist their client's case, they do not wish to spend the funds required to complete the work involved in producing a report. This is exactly the problem for the psychologist. The lawyer is saying I will not interfere with the production of a report, as long as it is of use to my client, which means that all other possible outcomes are excluded.

Lawyers will also argue that other professionals, including specialist physicians, routinely engage in this pre-report consultation with them concerning their "independent assessments." It may be that psychologists are more acutely attuned to subtle influence than are some other professionals, which is why our standards of practice are relatively uncompromising.

A similar problem prevails when the lawyers request that the psychologist examine the existing medical records, and then consult with a lawyer before proceeding with the remainder of the assessment. It is legitimate for a lawyer to hire a psychologist as a consultant, to offer advice to

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THREATS TO THE VALIDITY OF INDEPENDENT PSYCHOLOGICAL ASSESSMENTS (continued from Page 6)

counsel concerning the psychological aspects of a case, including assisting the lawyer in preparing for cross-examination of an expert witness, or helping to decide how to proceed in light of the psychological dimensions that are evident from the documents filed in a case. If a psychologist undertakes this consulting role, however, he or she may not then proceed to act as an independent assessor. The independence is lost by having consulted, and if an assessment is required, it needs to be carried out by someone else.

Similarly, psychologists ought not to cross from playing the role of an independent assessor to offering partisan opinions or advice.

There are several ethical principles and guidelines that are relevant to these issues. Offering a psychological opinion on the basis solely of available records may violate the APA Ethical Principles of Psychologists and Code Of Conduct (2002):

9. Assessment / 9.01 Bases for Assessments

(a) Psychologists base the opinions contained in their recommendations, reports, and diagnostic or evaluative statements, including forensic testimony, on information and techniques sufficient to substantiate their findings. (See also Standard 2.04, Bases for Scientific and Professional Judgments.)

(b) Except as noted in 9.01c, psychologists provide opinions of the psychological characteristics of individuals only after they have conducted an examination of the individuals adequate to support their statements or conclusions. When, despite reasonable efforts, such an examination is not practical, psychologists document the efforts they made and the result of those efforts, clarify the

probable impact of their limited information on the reliability and validity of their opinions, and appropriately limit the nature and extent of their conclusions or recommendations.

Although the Code does allow for a record review or consultation, the result of such is generally not considered appropriately to be an opinion concerning the individual's psychological functioning or characteristics, but an opinion concerning the records themselves (adequacy of assessment procedures, etc.).²

One of the authorities in this work also describes the subtle influence that offering a preliminary opinion can have by removing the “independence” from an independent assessment. Following are some comments by Kirk Heilbrun (co-author of Foundations of forensic mental health assessment, 2009):

The request for a “preliminary” opinion following a few hours of document review is troubling for obvious reasons. I routinely decline to give “preliminary” opinions even after I have seen the individual, until everything is scored, all records reviewed, all collaterals contacted, and everything is thought through.... Perhaps the best way to describe my objection to preliminary opinions are that they constitute (as the attorney is well aware) the camel’s nose in the tent. It’s much harder to conclude that the news is mostly bad for an attorney if you have indicated, even on a preliminary basis, that it is (or may be) good. Even more, once you have committed yourself (even preliminarily), I believe you are no longer impartial in your evaluation of findings. Instead, you are inclined to look for what supports the preliminary opinion and to deemphasize what does not. It’s a subtle but insidious process. (Personal communication.)

² The Canadian Code governs Canadian psychologists' decision-making in instances of ethical dilemmas, and we are also subject to the APA Code in terms of guidance and minimum standards of practice that would be expected by a court.

³ Lees-Haley, P. (1997). Attorneys influence expert evidence in forensic psychological and neuropsychological cases. *Assessment*, 4, 321-324.

THREATS TO THE VALIDITY OF INDEPENDENT PSYCHOLOGICAL ASSESSMENTS (continued from Page 7)

Maintaining independence.

In 1997, Paul Lees-Haley wrote an article entitled, *Attorneys influence expert evidence in forensic psychological and neuropsychological cases*³, in which he warned about “a growing threat to the validity of psychological and neuropsychological evaluations in forensic matters” (p. 321). His purpose in writing, he said was “to alert psychologists and neuropsychologists of a serious threats to validity in forensic cases. To the extent that our data are colored by an unseen hand, our conclusions may be speculative, or worse, misleading” (p. 324). Lees-Haley did not see clear solutions, but said that his goal was to draw attention to the problem and encourage further enquiry. He also noted that although in seminars throughout the US and Canada, attorneys were studying how psychologists collect data and formulate opinions, “almost none of the continuing education programs of psychologists are teaching us how attorneys are applying this information in their role as a zealous advocate.”

Maintaining independence in conducting an assessment is difficult. There are many threats to its integrity. Other parties who have a vested interest in the outcome of the assessment may present ostensibly harmless requests to the psychologist. Our best defence against violating our own principles is to hesitate before agreeing to any requests, to consult with knowledgeable colleagues, and to maintain whatever protocol is required to remain unbiased in fact and in appearance. Lees-Haley’s call for psychologists’ attention to these difficulties is as relevant now as it was in 1997.



APNS’ 10 MOST ASKED QUESTIONS (from Psychologists)

- ? Can you tell me what jobs are available for psychologists in Nova Scotia.
- ? Is it possible to advertise a position on your website?
- ? Do you have any suggestions as to how I might find a Supervisor?
- ? Do you have any suggestions of how I might find an intern placement in Nova Scotia?
- ? Do you have EPPP study materials available and how do I access them?
- ? I have an ethical dilemma; can you suggest someone who might be available to discuss this?
- ? What is the current fee structure in Nova Scotia?
- ? I would like to refer my client to another psychologist; can you provide some names?
- ? What is available for continuing education opportunities?
- ? How do I get listed on the website Private Practice Directory?

APNS ANNUAL GENERAL MEETING ~ May 28, 2010

The APNS Annual General Meeting was held in conjunction with a workshop on the Application of CHC Theory to Psycho Educational Assessments presented by Dan Stephenson. The workshop attracted an enthusiastic audience of psychologists. The workshop was held in the Dalhousie University Club with the AGM held at noon hour on the same day. The AGM attracted over 30 people who heard reports from the outgoing President Robin McGee (in absentia) and incoming President, Michael Ross. Lesley Hartman presented the Treasurer's Report and Gordon Butler presented the report on the annual financial review. Thanks to all who participated.

In addition to the regular business meeting, The APNS President's Award was presented to the **Kings Early Years Screening for School Program (KEYSS)** which was accepted by Sarah Crisp, Executive Director of Valley Child Development and KEYSS Coordinator RaeAnne Bekkers. (see full description on page 14)

The Executive also presented the Brian Dufton and the Gerald Gordon Awards.

The **Gerald Gordon Memorial Prize** was established in 1987 to recognize the considerable contribution that Dr. Gerald Gordon made to APNS as well as to the creation of the Nova Scotia Board of



Examiners in Psychology. This award reflects his belief in the importance of encouraging promising students to consider a career in psychology. The recipient receives a \$250.00 award toward books in the student's area of interest, as well as a one-year student membership to APNS. The **Gerald Gordon Prize** was awarded to Catherine Hilchey, of Dalhousie University.

The **Brian Dufton Memorial Prize** was established in 2006 to recognize the contribution made by Dr. Brian Dufton. Among his many accomplishments as a clinician, author/reviewer and instructor, Dr. Dufton's



sense of humor, love of music and spirituality touched many. The recipient of the award receives \$500.00 to help support the student's education, as well as a one-

year membership to APNS. The **Brian Dufton Graduate Prize** was awarded to Natasha Scott of Saint Mary's University.

Thanks to all the universities and professors who participated in the Dufton and Gordon Awards. Thanks also Louise Stringer-Warren, Debra Garland and Robin McGee who reviewed nominees.



Reports

TREASURER'S ANNUAL REPORT: FINANCIALS AND BUDGET 2010-2011

On March 31, 2009, total liabilities and equities equaled \$83,580.20. On March 31, 2010, total liabilities and equities equaled \$92,755.55. This includes a GIC and Business Savings account that equals \$64,976.95. This reflects the extra \$10,000. that was added to the Business Savings account from this past year's budget by the previous executive.

Our business savings account continues to offer us maximum flexibility with a competitive rate of interest. Given that interest rates in general are still very low, the Executive decided to transfer a further \$5000.00 to this account from the current year's budget. This will allow us to withdraw the funds at any time and therefore take advantage of locked-in investments when interest rates increase. In September 2010, our GIC at TD bank, worth \$37,255.50 will mature. We will determine at that time whether interest rates are high enough to warrant another locked-in investment. We continue to work towards our \$100,000 reserve fund goal.

Membership has remained consistent and has generated revenue of \$67,490. in 2009-2010. Indeed, as of March 31st, we received \$4,195. more in membership fees than

by March 31st 2009. This reflects both late registrations from last year, more early renewals this year as well as a slight increase in registrations for this year.

Revenue from CE workshops is down this year by \$2363.08. This reflects increased expenditures with regards to branding the APNS CE and its new brochures, as well as increased mail-out costs.

Furthermore, more revenue from the workshops will be coming in during this current year to offset this. The Executive participated in a brainstorming session to expand the mailing list for CE workshops. It is hoped that these investments will pay off in terms of generating income over the long term by expanding the audience for CE workshops beyond the Psychology community. We will look at revenue in the next year and determine whether we need to make our approach more cost-effective. The CE committee continues to generate many ideas for appealing future CE workshops. There are five workshops planned for this current fiscal year. Income generated through the Private Practice Directory has increased slightly over last year, with revenues at \$14,455.

Submitted by: Lesley Hartman, M.A.

		Budget 09-10	Actuals Mar. 31, 2010	Budget 10-11
INCOME				
Administration				
Membership Fees	\$	64,000.00	\$ 67,490.00	\$ 68,000.00
Interest Earned	\$	2,500.00	\$ 2,422.17	\$ 2,000.00
Total Administration	\$	66,500.00	\$ 69,912.17	\$ 70,000.00
TOTAL ADMIN	\$	68,500.00	\$ 69,912.17	\$ 70,000.00
Member Services				
CE Workshop	\$	12,000.00	\$ 17,160.00	\$ 25,000.00
Total CE	\$	12,000.00	\$ 17,160.00	\$ 25,000.00
Publications				
	N.S. Psychologist Ads	\$ 750.00	\$ 200.00	\$ 250.00
	Private Practice Dir.	\$ 13,000.00	\$ 14,455.00	\$ 14,500.00
Total Publications	\$	13,750.00	\$ 14,655.00	\$ 14,750.00
TOTAL MEMBER SERVICES	\$	25,750.00	\$ 31,815.00	\$ 39,750.00
Advertising - Web Ads	\$	1,200.00	\$ 975.00	\$ 1,000.00
Promotion - Sponsor	\$	.00	\$.00	\$.00
Total Ad & Promotions	\$	1,200.00	\$ 975.00	\$ 1,000.00
Other	\$.00	\$ -165.16	\$.00
TOTAL INCOME	\$	93,450.00	\$ 102,537.01	\$ 110,750.00

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ANNUAL FINANCIALS AND BUDGET (continued from page 10)

EXPENSES					
Administration					
AGM Meeting	\$	300.00	\$	.00	\$.00
Total AGM	\$	300.00	\$	.00	\$.00
Office Expenses	\$	500.00	\$	1,063.97	\$ 750.00
Office Supplies	\$	1,000.00	\$	612.20	\$ 750.00
Office Copying/Printing	\$	500.00	\$	733.74	\$ 700.00
Executive Travel	\$	1,750.00	\$	1,829.26	\$ 2,000.00
Phone	\$	1,200.00	\$	1,203.99	\$ 1,200.00
Office Rent	\$	4,300.00	\$	4,214.28	\$ 4,300.00
Miscellaneous	\$	.00	\$	.00	\$.00
Amortization	\$	200.00	\$	418.17	\$ 500.00
Website/Internet	\$	400.00	\$	709.67	\$ 700.00
Postage/Delivery	\$	4,200.00	\$	4,809.96	\$ 4,800.00
Total Office	\$	14,050.00	\$	15,595.24	\$ 15,700.00
Committees/Reps					
APA Rep (Coun/Adv)	\$	200.00	\$	-	\$ 1,500.00
APA SLConfrence	\$	1,500.00	\$	2,040.43	\$ 600.00
APA BOPN (PHWA)	\$	250.00	\$	250.00	\$ 250.00
APA Early Career Psych	\$	.00	\$	.00	\$ 2,000.00
APA Pub Educ Rep	\$	250.00	\$	.00	\$ 250.00
Advocacy Committee	\$	200.00	\$	.00	\$ 200.00
CE Committee	\$	200.00	\$	.00	\$ 200.00
Elections	\$	200.00	\$	69.98	\$ 200.00
Executive	\$	500.00	\$	422.21	\$ 500.00
Post Trauma	\$	200.00	\$	-	\$ 200.00
Membership	\$	200.00	\$	-	\$ 200.00
Archivist	\$	100.00	\$	-	\$ 100.00
InterestGroups/RgReps	\$	200.00	\$	-	\$ 200.00
NSP Editorial	\$	50.00	\$	-	\$ 50.00
Total Committees/Reps	\$	4,050.00	\$	2,782.62	\$ 6,050.00
Financial Reporting	\$	1,100.00	\$	2,186.55	\$ 2,000.00
Bank/Finance Charges	\$	1,700.00	\$	2,567.29	\$ 2,500.00
Total Financial	\$	2,700.00	\$	4,753.84	\$ 4,500.00
Licenses, Insur, Fees	\$	1,650.00	\$	1,720.00	\$ 1,720.00
Reg Joint Stock	\$	28.50	\$	28.03	\$ 28.03
Total Licenses, Insurance & Fees	\$	1,678.50	\$	1,748.03	\$ 1,748.03
Staffing Wages	\$	41,000.00	\$	40,246.82	\$ 41,000.00
Staff Benefits	\$	.00	\$	.00	\$ 750.00
Staff Training	\$	500.00	\$	.00	\$ 200.00
Total Staffing	\$	41,500.00	\$	40,246.82	\$ 41,950.00
Memberships APA	\$	150.00	\$	241.63	\$ 250.00
Membership CPAP CPAP/CRHSPP	\$	1,600.00	\$	1,672.00	\$ 1,672.00
Total Affiliations	\$	1,750.00	\$	1,913.63	\$ 1,922.00
Donations/Benevolent	\$	350.00	\$	.00	\$ 250.00
President's Award	\$	.00	\$	.00	\$ 200.00
Student Scholarships	\$	750.00	\$	750.00	\$ 750.00
Total Awards/Grants	\$	1,100.00	\$	750.00	\$ 1,200.00
TOTAL ADMIN	\$	67,128.50	\$	67,790.18	\$ 73,520.03

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Reports

ANNUAL FINANCIALS AND BUDGET (continued from page 11)

	Budget 09-10	Actuals March 31, 2010	Budget 10-11
Member Services			
CE Workshops	\$ 9,000.00	\$ 9,380.12	\$ 20,000.00
EPPP materials	\$ 300.00	\$ 300.00	\$ 300.00
Total CE	\$ 9,300.00	\$ 9,680.12	\$ 20,300.00
Advocacy Projects	\$ 500.00	\$.00	\$ 500.00
CPAP Advoc'y Training	\$ 1,000.00	\$ 466.32	\$ 750.00
Psych Mo /Outreach	\$ 2,000.00	\$ 6,328.00	\$ 3,200.00
Total Advocacy	\$ 3,500.00	\$ 6,794.32	\$ 4,450.00
Publications - NSP	\$ 2,500.00	\$ 3,983.68	\$ 3,500.00
PPD	\$ 2,300.00	\$ 2,389.33	\$ 2,400.00
Total Publications	\$ 4,800.00	\$ 6,373.01	\$ 5,900.00
TOTAL MEMBER SERVICES	\$ 17,600.00	\$ 22,847.45	\$ 30,650.00
Promotions/Outreach	\$ 6,000.00	\$ 1,071.48	\$ 4,000.00
Advertising	\$ 1,500.00	\$ 1,647.54	\$ 1,500.00
Total Promotions	\$ 7,500.00	\$ 2,719.02	\$ 5,500.00
TOTAL EXPENSES	\$ 92,228.50	\$ 93,356.65	\$ 109,670.03
NET Surplus or Loss < in brackets>	\$ 1,221.50	\$ 9,180.36	\$ 1,079.97
Forward to Reserve fund	\$ 5,000.00	\$ 5,000.00	\$

2009-2010 AUDITORS REPORT

We checked the records of receipts and expenses for the period April 1, 2009 to March 31, 2010 for completeness.

We then randomly selected 4 months (April, May and December, 2009, February, 2010) for detailed examination:

We checked that monthly cheque and credit card deposits were correctly accounted for in the monthly bank statements and that the deposits were correctly entered into the appropriate categories in the accounts ledger.

We checked that payments had appropriate receipts or other documentation and were correctly entered into the appropriate categories in the accounts ledger.

We examined payments for appropriateness to the activities of the Association.

We encountered one small accounting error in the ledger for April, 2009 (a \$7.20 bank charge was recorded as \$7.25).

We suggested that a different accounting procedure be used to record a cheque (expense) that had become lost and was cancelled (i.e., we suggested that the cheque be entered into

the ledger and then corrected when the cheque is cancelled.). We suggested that the auditors be provided with a documentation outlining rent charges and the details of automatic bank payments (e.g., monthly payments to Eastlink).

We sought clarification of payments made to CRA for staff EI, CPP and Income Tax. To improve clarity we asked that changes to the accounts ledger be considered that would reflect the cheques that are actually issued, rather than the net results of the payments.

Generally, we found that the accounts were in order and payments and receipts were well documented and with comments that were helpful to the auditors. It was helpful for the auditors to have the monthly ledger statements.

Respectfully Submitted

Gordon Butler, Ph.D.

James Peake

2010 APNS PRESIDENT'S AWARD: KINGS EARLY YEARS SCREENING FOR SCHOOL PROGRAM

The Association of Psychologists of Nova Scotia is pleased to announce that its 2010 President's Award will go to the Kings Early Years Screening for School Program (KEYSS), the David in the "David-and-Goliath" struggle against hardship for children.

KEYSS eases the transition into school for children and families. The main focus is on building relationships between families, schools, and community agencies before the child begins school. KEYSS also helps identify any developmental issues a child may have so that intervention and support can be given prior to school entry.

"With only a shoestring budget, KEYSS has been able to screen over 650 preschoolers in the past five years," says APNS President Dr. Robin McGee. "The benefit to the children, the families, the schools, and the community has been incalculable."

The program began in Kings County in 2006 when Valley Child Development provided an opportunity for Kings County parents to bring their three or four year old children to a free preschool screening program. Kings County Children's Foundation has faithfully funded this project over the years.

"I am very pleased by the response to the clinics by both families and service providers," says RaeAnne Bekkers, KEYSS Coordinator. "I would like to take this opportunity to thank all those professionals and service providers who donate their time to make KEYSS so valuable to families in Kings County."

The clinics provide parents with valuable information on preschool behaviours, reading and school readiness, healthy living and physical



Sarah Crisp, (left) Executive Director of Valley Child Development and KEYSS Coordinator RaeAnne Bekkers accept the President's Award from Dr. Michael Ross, incoming APNS President, on behalf of Dr. Robin McGee.

activity. KEYSS clinics also have professionals available to assess a child in the areas of development, hearing and speech.

Information on a variety of programs and services available to preschoolers is offered at all the clinics as well. See:
<http://www.earlyyearsscreeningforschool.ca/>

The KEYSS program started in 2006. With seed money granted by the Kings County Children's Foundation, a foundation funded by an estate, it modeled itself on another early intervention program in Hants County, KEYSS went into the fight against the forces compromising the development of preschool children. KEYSS launched a developmental screening program for young preschool children from the catchment area of 8 Kings County schools in the Annapolis Valley Regional School Board. Appealing to the goodwill of community partners, it sought the

continued on page 14

Reports

KINGS EARLY YEARS SCREENING FOR SCHOOL PROGRAM

(continued from page 13)

coordinated resources of many agencies such as Nova Scotia Hearing and Speech and Child and Youth Mental Health.

The APNS President's Award honours non-psychologists (individuals or organizations) who have made valuable contributions to the community in a health and wellness setting or through other activities that touch and benefit the greater community. It is awarded at the discretion of the APNS President, Robin McGee

Previous award winners have included entertainer and TV personality Mary Walsh; King's View

Academy, a Halifax-based co-educational school; Dr. Elsie Blake, Program Administrator for the counseling and support component of the compensation program for claimants of institutional abuse; Dr. John Butt, former Chief Medical Examiner for Nova Scotia; Anne Derrick, lawyer; and Costas Halavrezos, CBC Radio Noon Host.



Welcomes its Latest Members as of August 31//10

**Giselle Ellefsen, M.Sc.
Kelly Ann Hicks, M.Sc.
Catherine Hilchey, B.A.
Colin Pottie, Ph.D.
Patricia Spens, M.Sc.
Laura Walden, M.Sc.**

We would like to thank the membership for supporting APNS in its efforts to promote the interests of Nova Scotia psychologists through advocacy, continuing education and the support of special interests in the field.

APNS CONTINUING EDUCATION WORKSHOPS 2010—2011



October 29, 2010

Being a Brain-Wise Therapist: the Neurobiology of Attachment, Dr. Bonnie Badenoch

9 am - 4:30 pm, Halifax, Dalhousie University Club
<http://www.apns.ca/events.html> to download registration

In this workshop, we will have a conversation about the interpersonal neurobiology of attachment, beginning with some basic brain science and going on to gently explore our own attachment history as a window into understanding the landscape of the human brain and mind. On this foundation, we can begin to bring the brain into the counseling room with clients of all ages and diagnoses, in practical ways that foster hope and strengthen emotional balance for both client and therapist. We will use self-reflection and counseling room stories to make this learning more concrete. At the end of the day, you may find that one of the most surprising outcomes of encountering this deep science is a remarkable increase in compassion for self and others.

Learning Objectives

- Understand and be able to talk about the basic structure of the brain, and its relationship to the mind.
- Describe the development of the social brain, including formation of implicit, explicit, & autobiographical memories.
- Understand the neurobiological correlates of 4 attachment patterns, and be able to identify these patterns in ourselves and our clients.
- Acquire at least three practical techniques for bringing the brain into the counseling room.

Targeted Audience

- All clinicians and mental health practitioners in psychology, social work, counselling and psychiatry
- Anyone who is caring for others and would benefit from a better understanding of what's going on in the brain, mind, and relationships (physicians, nurses, caregivers)
- Educators have found this material useful, too, since they are often working with students who have damaged attachments that affect their work and school relationships
 - One of the best things about this material is that it is another way of understanding what it is to be a human

February 25, 2011

Trauma-Focused Cognitive Behavior Therapy for Children with Complex PTSD and Multiple Negative Life Events, Dr. Vicky Wolfe

Halifax, venue t.b.a.

Youth with histories of trauma, abuse, and neglect often present with complex mental health needs. Although symptoms of posttraumatic stress disorder may be evident, they often have additional trauma-related mental health concerns related to coping, affect regulation, interpersonal trust, and dissociative processes. This workshop will review the fundamentals of Trauma-Focused Cognitive Behaviour Therapy, as well as adaptations relevant to Complex PTSD. Case examples will be used to demonstrate various aspects of these therapeutic methods.

Oct. 24, 2011

Motivational Interviewing

Dr. Henny Westra

Ethics for Psychologists

The regional Ethics workshops were so popular last year that we intend to hold more on a regular basis across the province. Watch for more information.

Tentative Workshops 2011-2014

- t.b.a. Workshop/Discussion on Parental Capacity Assessment**
- 2011 May — Addiction Empowerment**
Dr. Charlotte Kasl
- 2012 Spring — Behaviour Therapy for TIC**
Dr. Douglas Woods
- 2012 Fall— Executive Functioning in Children**
Dr. Peg Dawson
- 2013 May — Acceptance & Commitment Therapy, 2-day get-a-way with Dr. John P. Forsyth**
- 2013 Fall — Chronic Insomnia**
Dr. Charles Morin
- 2014 Attachment & Aggression**
Dr. John Neufeld

These are just some of the topics we have been researching. If you have any comments on these or would like to suggest other topics or speakers please contact the APNS office at apns@apns.ca

Reports

WHY SHOULD I REGISTER WITH THE REGISTER? WHAT THE CANADIAN REGISTER OFFERS PSYCHOLOGISTS - Myles Genest, Ph.D. V.P. CRHSPP

I first applied to be listed on the Canadian Register of Health Service Providers in Psychology (CRHSPP) in 1987. For me, the process was frustrating and time-consuming. I had to have supervision-hours certified by former supervisors, had to secure and copy records and transcripts (I had thought I was done with all that!), and I had to complete a lengthy application form. It has turned that it was time and effort well spent.

In the early 1980s, psychological organizations were told repeatedly by private and public sector decision-makers that the licensing of psychologists was not credible because psychologists who were not trained to provide health services were routinely registered / licensed. How could an agency know whether it was securing someone qualified to offer health services?

The message was clear: Until the profession either eliminated such provisions or created a credible, national, readily accessible vehicle to identify appropriately qualified health service psychologists, there was no prospect for enhanced funding. The credibility and funding of all psychological practice was in jeopardy. This was a high-priority, national issue for organized professional psychology in Canada.

In 1985, at the initiative of Canadian psychological associations and regulatory boards, the CRHSPP was formed, a national credentialing body for health-service psychologists, which could address the concerns about the governance of psychological practice in Canada.

The federal government was sufficiently convinced of the legitimacy of the CRHSPP credential that it then used CRHSPP registration to determine whether or not a psychologist was eligible for exemption from charging GST on services. The Register grew quickly: My registration number, a

scant two years after CRHSPP was formed, was 3069.

What does the Register do?

1. It credentials psychologists who provide health services. Because the Register maintains a national standard, its criteria for listing may differ somewhat from those of the regulator in a particular jurisdiction. (And because it has to certify a credential, applicants have to provide sufficient information for their qualifications to be vetted).
2. CRHSPP publishes the Register of all psychologists who meet its standards. This Register is provided to third-party payers, and is made available to groups and individuals who request it.
3. CRHSPP maintains a website with searchable listings from the Register. Members of the public, third-party payers, and other psychologists all use the site to help identify health-service psychologists in particular areas of the country, and with particular expertise.
4. Many psychologists believe that the public has insufficient access to psychological services. CRHSPP objectives include promoting that access, through promoting better funding and increased awareness of what psychology has to offer.
5. In a recent survey of CRHSPP registrants and potential registrants, psychologists said that they would value more continuing education opportunities, and in particular, web-based opportunities. The Register has sponsored a variety of CE workshops, and plans to expand that to the on-line environment.

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WHY SHOULD I REGISTER WITH THE REGISTER? (continued from page 16)

6. I found it striking that in that survey, many psychologists said that they believed that we have insufficient presence and credibility in this country. Psychologists said that there is a vacuum in terms of helping the public and decision-makers to understand what psychologists do, how what we do differs from that of other professionals, and how people can access psychological services. As a credentialing organization, CRHSPP cannot lobby on behalf of psychologists. Nevertheless, the Register plans to become more active in educating the public and third-party payers about the value of psychological services and the distinctions between psychologists and other health professionals. In this respect, the Register continues to expand its “advocacy” role.

Like most of my colleagues who were surveyed, I applied to be listed on the Register because I recognized the value of having a credential that was recognized nationally, and I wanted to be part of an organization that could represent and promote the value of psychological services in Canada. Confirmation of exemption from the GST was also important.

All health-service psychologists in the country are now eligible for the GST-exemption. I have, nonetheless, remained with the Register and joined its Board because I continue to believe that it is important to have a national credential, and to promote the national credential to the public, politicians, insurers, and others. CRHSPP can also serve as a forum for psychologists to communicate with each other (e.g., it has recently launched a primary-care listserve), to access continuing educational opportunities, and to receive other benefits.

Until now, Master’s-level psychologists, who are eligible to practice in their jurisdictions, have been

able apply for listing on the Register. Last year, the bylaws were amended so that *Master’s-level registration will end on January 31, 2011*. This means that Nova Scotian, Master’s-level psychologists must have applied before February 1, 2011, in order to gain admission to the Register. As of February 1, 2011 only doctoral-level psychologists will be eligible to join CRHSPP. Of course, once you are on the Register, you may remain a CRHSPP Registrant as long as you are in good standing.

Please go to www.crhspp.ca for information and to download a Membership Application. If you have any questions about the Register, I would be pleased to hear from you (myles.genest@genestpsychology.com). As for my complaint about the onerous application process, part of the problem was that I had not been terribly organized about keeping records, so that I was tracking down information that was not right at hand. My impression is that psychologists trained in the last couple of decades have been more systematic about that, and I expect it would be less trouble now. Nonetheless, if you want a credential, there is no way past having to provide evidence that you deserve it.

CRHSPP is in the process of a major renewal. Its website, initiatives, and benefits are all under development by the current Board. Expect to see and hear more of us. I hope you’ll join us and be part of it.

GOOD NEWS! Since I wrote the first draft of this piece, CRHSPP reached an agreement with our U.S. counterpart, the National Register, which will permit all CRHSPP Registrants unlimited access to the National Register’s continuing education website. In addition to access to their online CE articles, this will provide our Registrants with access to their exams and free CE credits. This service will commence later this year.



CANADIAN REGISTER OF HEALTH SERVICE PROVIDERS IN PSYCHOLOGY
RÉPERTOIRE CANADIEN DES PSYCHOLOGUES OFFRANT DES SERVICES DE SANTÉ

CRHSPP MASTER'S LEVEL ELIGIBILITY GRANDPARENTING PERIOD ENDING

The Canadian Register of Health Service Providers in Psychology (CRHSPP) was officially formed in 1985 following deliberations by the Council of Provincial Associations of Psychology (CPAP) and its member bodies. At that time, eligibility clauses were approved that included grandparent provisions for Psychologists with a Master's degree recognized as psychologists for autonomous practice in their respective provinces. The grandparent provisions were extended beyond an initial 15-year period in light of matters being addressed by the profession nationally.

At a Special Meeting of Members on November 28, 2009, members unanimously ratified a Bylaw amendment proposed by the Board of Directors to end the grandparent Master's level eligibility provisions for admission to CRHSPP, effective **January 31, 2011**.

The practical effect of the Bylaw amendment is that all psychologists who are chartered / licensed / registered with their provincial / territorial regulatory body on the basis of a Master's degree are eligible to apply for membership in CRHSPP until January 31, 2011. For greater certainty, the deadline for the receipt of these membership applications to CRHSPP will be midnight on January 31, 2011. As of February 1st 2011, only doctoral level psychologists will be eligible to join CRHSPP.

NOTE: All current CRHSPP Registrants who hold a Master's degree, and all Master's level psychologists who apply for membership to CRHSPP by midnight, January 31, 2011 and who are approved thereafter, may remain CRHSPP Registrants retaining their rights and privileges for as long as they are in good standing.

Please go to www.crhspp.ca to download a Membership Application. Please note that the application process includes a thorough initial review, evaluation by the Admission Committee, verification of good standing with the applicant's regulatory body, and approval by the Board. All potentially eligible Master's level psychologists are encouraged strongly to apply as soon as possible.

CRHSPP is the only national credentialing organization of health service psychologists in Canada. It offers national recognition and membership benefits including an Online Searchable Directory updated monthly, and an annual CD-ROM Directory sent to all Registrants and a broad range of government agencies and private bodies such as insurance companies for use in processing claims for psychological health services. Being a CRHSPP member provides you with access to CRHSPP-sponsored CE at reduced rates.

NSBEP NOTES from Allan R. Wilson Ph.D.

Concerns Regarding a Change to the Doctoral Level

The Board is aware the possibility of a change to the doctoral level for entry to practice psychology in Nova Scotia is a source of concern and uncertainty for some registrants. In particular, the Board has learned that there are two rumours circulating that are needlessly adding to these worries.

The first rumour is that the Board plans to remove from the Registers those who are currently registered at the Masters level, if the entry level changes to the doctoral level. I can assure you that psychologists registered with NSBEP will remain on the Registers if the Board decides to make such a change. Any change in entry level would apply to new applications only, with a suitable transition period.

The second rumour is that psychologists registered at the Masters level with NSBEP will no longer be

able to use the title “Psychologist”, if the entry level changes to the doctoral level. Again, I can assure you that this is not the case. Individuals registered at the Masters level with NSBEP would continue to use the title “Psychologist”, if the Board decided to make such a change.

The Entry Level Committee, Chaired by Maureen Gorman, has considered the questions and concerns raised to date by the psychologists who have written or spoken to those involved with this process. The next step for the Committee is to continue to organize and summarize the information it has collected. The Board expects to receive a report and recommendations from this Committee in the early fall.

Allan R. Wilson, Ph.D.
Registrar

WATCH FOR...

Information session on the PHIA (Personal Health Information Act) expected to be presented at this Fall’s sitting of the Legislature.

APNS is planning to present an information session for the membership on this topic with a speaker from the NS Dept of Health. As soon as details are confirmed we will circulate the information.

APNS urges **all** Psychologists to attend this session on the proposed Personal Health Information Act (PHIA) which is likely to be introduced in the legislature this Fall. This Act will impact Psychologists and our clients in profound ways. The PHIA seeks to lower the minimum standard of consent for the sharing of health records across a wide domain of health providers and opens the door to numerous potential negative implications for our clients and the practice of Psychology. This session will allow us the opportunity to be informed and hopefully to brainstorm ways to mitigate the detrimental impacts of this Act on our clients and on the provision of Psychological services.

Acknowledgements

Congratulations to the following who have recently become Registered Psychologists*

Denise Bernier, Ph.D.
Jason Chatman, Ph.D.
Jacqueline Cohen, Ph.D.
Heather Durdle, Ph.D.
Giselle Ellefsen, M.Sc.
Joelle Dionne, M.A.Ps.

Kelly Hicks, M.Sc.
Jamie MacDougall, Ph.D.
Kimberly O'Connor, M.Ed.
Colin Pottie, Ph.D.
Anita Scott, M.Sc.
Simon Sherry, Ph.D.

Elaine Stoffer, Ph.D.
Shelley West, M.Sc.
Aimee Yazbek, Ph.D.
Natasha Yorke, M.A.S.P.

Congratulations to the following who have recently become Candidates*

Stillman Jacquard, Ph.D.
Naomi Stright, M.Sc.
Laura Walden, M.Sc.

This information provided by NSBEP as of August 2010

Congratulations to Christine Chambers ...

IWK Psychologist/Researcher Christine T. Chambers, PhD, received the Ulf Lindblom Young Investigator Award for Clinical Science at the 13th World Congress on Pain held in Montreal at the end of August. Dr. Chambers received the international award in recognition of her achievements related to childhood pain research, which focus on the role of the family in pediatric pain management and pain assessment in children.

The Ulf Lindblom Young Investigator Award for Clinical Science, an award of the International Association for the Study of Pain (IASP), honours an individual under the age of 40 who has achieved a level of independence as a scholar in the field and made significant contributions to clinical pain research.

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Advertisements and Announcements

Introduction to the WIAT®—III CDN

Thursday, November 18, 2010

9:00 am to 12:00 pm

IWK Health Centre, O.A. Smith Auditorium, Children's Building, Rm # KAUD, Halifax, NS

Presented by: Michael Charron, H.B.Sc.

The new **WIAT—III** thoroughly assesses key areas of achievement and targets interventions with result-specific goal statements. Suitable for use in various educational and clinical settings, including schools, clinics, private practices, and residential treatment facilities, this latest edition is designed to improve the diagnostic power and sensitivity of subtests, and provide maximally informative scores, skills analysis, and meaningful comparisons between achievement and ability.

To register or for more information, please visit the **Events/Workshops** section on our website at **PsychCorp.ca**.

www.PsychCorp.ca 1-866-335-8418



The APNS membership years runs from September 1 to August 31.

Enclosed with this mailing is a membership renewal form.

If you have not yet renewed your membership, please complete the form and return it to the APNS office ASAP.

***The APNS member renewal form is also available on our website at:
<http://www/apns.ca/memerbship.html>***

Opportunity for Skilled Psychologist

Thriving private practice looking for skilled Psychologist interested in part-time psychotherapy work with adults and/or children and youth.

Daytime or evening appointments are possible. Competitive fee structure.

Please send CV to:
Lesley Hartman and Associates
3845 Joseph Howe Dr. Suite 209
Halifax, N.S. B3L 4H9

or call Lesley at 401-4802.

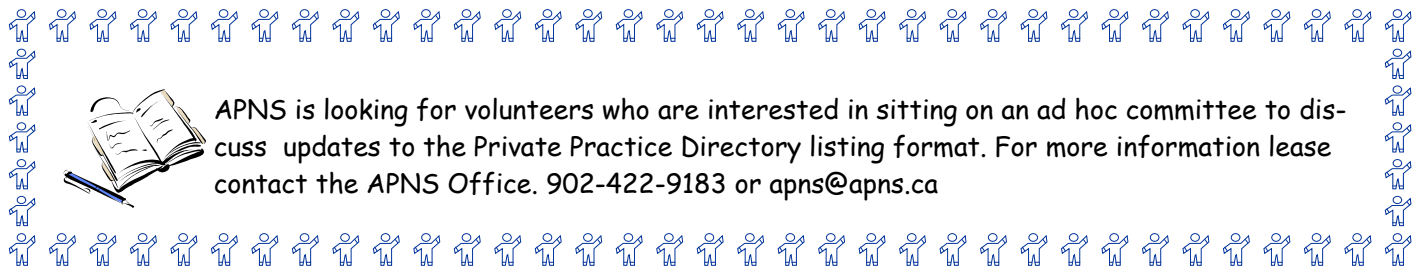
Private Practice - Associate Position

Laurie Tracey at Breakthrough Co-op is looking for an associate to cover her maternity leave with the potential of continuing the position upon her return. The maternity position offers full-time and flexible hours for six months and any continued work thereafter is subject to negotiation.

- The associate will be either a Candidate or Registered Psychologist and be registered with the Nova Scotia Board of Examiners in Psychology.
- The associate will provide counselling services to adolescents, adults, and potentially couples.
- The associate will have administration and case management skills.

The practice provides a supportive environment and weekly clinical meetings with other Breakthrough practitioners. This position is ideal for any individual who has interest in working in a private practice setting. Applicants should forward their CV and cover letter to:

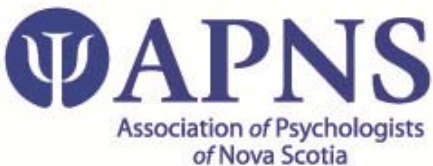
Laurie Tracey at Breakthrough Co-op
108- 3845 Joseph Howe Drive , Halifax, NS B3L 4H9
ltracey@breakthrough.ns.ca
Fax: 902-454-4986



APNS is looking for volunteers who are interested in sitting on an ad hoc committee to discuss updates to the Private Practice Directory listing format. For more information please contact the APNS Office. 902-422-9183 or apns@apns.ca

Early Career Psychologists

APNS is looking for Early Career Psychologists or Psychology students who would be interested in participating in an APNS Early Career Development Committee / Interest Group. The primary goal of the committee would be to provide support and mentorship to early career Psychologists. Initial activities of this committee would involve brainstorming and discussion of key objectives, research into theoretical models of career development and how other professions provide guidance to new members early in their career. We are also interested in hearing from more experienced Psychologists who would be interested in being mentors to the committee. Please contact the APNS office - apns@apns.ca - if you are interested.



Committees & Representatives

Please contact the chair or APNS office for further information or to communicate changes to the list of committees & representatives.

EXECUTIVE

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 Past President: Robin McGee
 President Elect: Lynne Robinson
 Secretary: Chimène Jewer
 Treasurer: Lesley Hartman
 Member at Large: Joanne Mills
 Student Representative:
 Sonya Stevens/Natasha Scott

OFFICE MANAGER

Susan Marsh

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Council of Provincial Associations in Psychology (CPAP) Rep: Dean Perry

Business of Practice Network: David Mensink/Arla Day

Federal Advocacy Coordinator: David Pilon

Public Education Campaign Coordinator: Dean Perry

APA Council of Representatives: Charles Hayes

Archivist: Maria Angelopoulos

Regional Reps:

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 Eileen Donahoe, Kentville
 Julie MacDonald, Sydney
 Richard Krane, HRM
Contact the APNS Office for more info on how to contact your regional rep.

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 Carolyn Scott
 Erin Trudel-Best

Elections:

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 David Mensink
 Debra Garland
 Louise Stringer-Warren

Membership:

Open

Publications:

Debra Garland, Editor

Post Trauma Services:

Gilles Chiasson (Chair)
 Charles Hayes
 Janice Howes (Disaster Response Co-ordinator)

Child & Adolescent Psychology Interest Group (CAP-I)

is comprised of psychologists who work with children and adolescents and their families. Meetings are bi-monthly during the academic year to share information on topics of interest and to provide an opportunity to get to know our colleagues who work in a range of settings (schools, hospitals, universities, private practices, forensic settings, etc).

Testing Interest Group

various

Advertising Rates

Non-Member Print Advertising Rates

"Nova Scotia Psychologist:"

Businesses

Full Page	\$500.00
3/4 Page	\$400.00
1/2 Page	\$300.00
1/4 Page	\$250.00
Business Card	\$200.00

Consecutive Editions: 1st ad - regular rate, 2nd & more - 10% discount per issue; ie. \$500, \$450, \$400, \$360, to a minimum rate of \$300 for a full page ad

Other Professionals: (physicians, lawyers, etc.)

Full Page	\$400.00
3/4 Page	\$300.00
1/2 Page	\$250.00
1/4 Page	\$150.00

Consecutive Editions: 1st ad - regular rate, 2nd & more - 10% discount per issue; i.e., \$400, \$360, \$320, \$290, to a minimum rate of \$250 for a full page ad

Businesses & Professionals

Event / Workshop	\$100.00
Job Postings	\$75.00

Inserts \$175.00 plus additional mailing costs by weight (if applicable - no additional cost for single sheet.

Mail-Outs \$175.00 plus mailing costs by weight x # of members

Mass Stand-alone E-Mail \$300.00

Monthly Member E-mail \$25

Not-for-profit (incl. schools / hospitals)

Full Page	\$125.00
3/4 Page	\$100.00
1/2 Page	\$75.00
1/4 Page	\$50.00
Business card	\$35.00

Inserts \$50.00 plus additional mailing costs by weight (if applicable - no additional cost for single sheet .

Mail-Outs \$150.00 plus mailing costs by weight x # of members

Mass Stand-alone E-Mail \$200.00

Monthly Member E-mail \$15

Non-Member Website Ad Rates

Businesses & Professionals

Event / Workshop	\$100.00	per 45 days
Job Postings	\$75.00	per 30 days

Not-for-profit (incl. schools / hospitals)

Event / Workshop	\$50.00	per 45 days
Job Postings	\$50.00	per 30 days

APNS Member Print Ad Rates

"Nova Scotia Psychologist"

Full Page	\$90.00
3/4 Page	\$75.00
1/2 Page	\$50.00
1/4 Page	\$30.00
Business Card	\$25.00
Event / Workshop	\$25.00
Job Postings	\$25.00

Inserts \$25.00 for single sheet paper, additional costs as per weight as relates to postage cost

Mail-Outs \$100.00 plus mailing costs by weight x # of members

Mass E-Mail \$150.00

Monthly Member E-mail free

APNS Member Website Ad Rates

Event / Workshop	\$25.00	per 30 days
Job Postings	\$25.00	per 60 days

Publication Information

The Nova Scotia Psychologist is published three times each year by the Association of Psychologists of Nova Scotia. Its purpose is to foster communication within the psychology community. Submission of articles is encouraged, as well as letters to the Editor. The Editor reserves the right to select and edit manuscripts and letters submitted for publication. Publication does not necessarily imply endorsement by APNS or by the Editorial Board of The Nova Scotia Psychologist.

Subscriptions are free to all members and Affiliates of the Association. Others may subscribe for \$25 per year. The Nova Scotia Psychologist accepts advertising of direct interest to the psychology community. Advertisers should write to the address below. Non-profit organizations may be permitted free announcements, subject to space availability.



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