

Newsletter of the New Zealand College of Clinical Psychologists
THE SPECIALIST ORGANISATION FOR CLINICAL PSYCHOLOGISTS

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Koia ko Ngahuru rauroha rau ki te whenua

'Tis Autumn when leaves are spread across the land

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Presi-Rap

Covid-19 Psychological Implications and Implications for Clinical Psychology *Malcolm Stewart, President NZCCP*

World-wide, the last two months have been extraordinary in many ways. To those of you who have lost loved ones to Covid-19, in New Zealand or overseas, our heartfelt aroha. To those who have suffered the anguish of health challenges for yourself or others close to you, or have financial challenges and uncertainty arising from Covid-19, our heartfelt aroha. To those impacted by awareness of the suffering and fear of countless unknown people around the world, our heartfelt manāki. To those who have worked to alleviate the suffering of others at this time through your work, your family, or your communities, our heartfelt gratitude.

These few months have changed clinical psychological practice perhaps more than any comparable time period in the history of psychology. Rapid adoption of technology such as online video conferencing and new ways of working has allowed many psychologists to keep plying their trade and supporting their clients in ways that, at this scale, might have seemed impossible just a few months ago. It is difficult to imagine that, in the absence of such an event, such huge changes could have been accomplished so quickly.

To assist members to adapt in safe, effective, and sustainable ways, the College has worked with the NZ Psychologists Board and the NZ Psychological Society to provide consistent and reliable information to help members manage this transition. This information is available at www.psychologistsboard.org.nz/questions-about-covid19 with answers to Frequently Asked Questions (FAQ) downloadable from that page. Additional information is available on the NZCCP website at www.nzccp.co.nz/covid-19-information-and-resources/ (see below for more information).

Some of the changes in psychological practice we have seen may be temporary stopgap measures that can happily be put aside when restrictions end. Yet, as disruptive events do, Covid-19 has shone a light on different ways of practice that may be worth maintaining into the future. For instance, colleagues from an inpatient setting have told me that starting to use telepsychology as a result of Covid-19 has improved their follow-up rates for clients from distant areas after discharge home, improving the quality of care for vulnerable people. As we look ahead, it is worth thinking about how our practice has changed, and what of the change we want to incorporate into our ongoing practice.

But thinking beyond psychological practice, the disruptive effects of the pandemic may, along with the losses and negatives, engender or create opportunities for many positive environmental, social, economic, and other changes at a national and international level. For instance, cleaner air in many parts of the world has led some to characterise the pandemic as "Earth's way of drawing a deep breath" against the choking effect of humanity. If many of the behavioural changes undertaken by individuals and society to manage Covid-19 were sustained or developed (while ensuring we improve equity) then it could help us towards solving some of the world's most pressing problems, such as climate change. As psychologists – experts in attitude and behaviour change, it seems important for us to consider how we can contribute to this process as individuals and as a profession.

COVID-19: Information and resources

The NZCCP wishes you and your loved ones all the best for the challenges of the COVID-19 virus pandemic, the periods of self-isolation, and the disruption to "psychological business as usual." We are receptive to doing what we can to support members through this difficult time, so please be in touch. Please go to the NZCCP COVID-19 information and resources webpage for some links and resources that may be helpful.

<u>MPS</u> has made allowances for the situation and "reassure that should you need to do a remote consultation with a patient whom you would ordinarily see face-to-face, your membership with Medical Protection will enable you to request assistance for matters that could arise from such consultations during this time."

ACC has approved Telehealth for additional service types for the duration of the COVID-19 response in the treatment of ACC's clients accessing Integrated Services for Sensitive Claims, Psychological Services, and Clinical Psychiatric Services. Individual waivers to use Telehealth for these services will not be required for the duration of the COVID-19 response. For further information regarding ACC requirements please refer to the website.

There are a number of NZ based resources available at <u>NZCCP COVID-19</u>: <u>Information and resources webpage</u> that may assist people to learn more about online therapy and other aspects of practising during the pandemic.

There is also a lot of useful discussion and suggestions on the ${\tt NZCCP\ Private\ Practitioners\ Facebook\ group}$ site and at ${\tt TeletherapyNZ\ }$

Telepsychology Pearls of Wisdom

For many of us, assessment and therapy by telepsychology is a new thing. This document contains tips that have been gleaned from personal experience, relevant literature, and discussion with practitioners about how to make telepsychology as safe, effective, and sustainable as possible.

Telepsychology is the practice of psychology using any form of distance communication technology such as internet-based tools (e.g., Zoom), videoconferencing, or telephone, as an alternative to in-person interactions. This document mostly relates to use of distance technology by psychologists to undertake direct psychological assessment and therapy.

An important document to inform the practice of telepsychology is the NZ Psychologists Board Guideline on *The Practice of Telepsychology*, which can be found at http://www.psychologistsboard.org.nz/best-practice-documents-and-guidelines2 Please use this guideline to inform your telepsychology practice. A fundamental principle is that all services delivered by telepsychology should be consistent with the standards of care delivered during inperson care.

If you are aware of other "Pearls of Wisdom" that could be added to this document, please write them out in a format similar to that used in this document and send them to Caroline at office@nzccp.co.nz

Self-Care with Telepsychology

1. Doing telepsychology often takes more energy than face-to-face interactions.

This may be partly due to it being harder for both psychologist and client to pick up on the more subtle non-verbal and other cues when working remotely, which means that as a therapist you need to be attending even more closely than usual to "read" the whole person, and also need to somewhat amplify your responses (e.g. stronger facial expressions, "not-so-minimal encouragers") to maintain the client's sense that you are actively engaged. There may also be additional work to be done after a session that would normally be done during the session (e.g., sending out resources or preparing a summary of the session), adding to the workload.

• **Suggestion:** If you find yourself feeling more tired than usual while doing therapy or other psychological activities on-line you may want to consider spacing out your appointments a little, doing slightly shorter appointments, or seeing fewer people in a day/session.

2. Setting up your environment

Ensuring that the environment in which you do your telepsychology is as optimal as possible is important for the quality and sustainability of this work.

• Suggestions:

- Ensure you work from a space that is private and free from noise and other distractions.
- A larger screen, such as a desktop computer or similar, will reduce strain and will also increase your ability to detect non-verbal cues. Using tablets, small laptops, or smartphones may make it more difficult.
- o Headphones can offer better sound quality and more privacy.
- Given that you will be sitting for some time, ensure that your space is ergonomically suitable for you.
- Think about what is visible in your background avoid anything that compromises your privacy or is too distracting.

Setting Up for Telepsychology

1. Informed Consent. Separate informed consent for use of telepsychology is required. See page 10 of the NZ Psychologists Board Guideline for indications of what clients should be informed of prior to receiving telepsychology services. While a signed consent form is desirable, this is not essential if specific situations make it difficult to achieve. Verbal consent should be documented in the notes if a written consent form is not obtained.

2. If Possible, Face-to-Face First. Some relevant literature suggests that even if the intention is to work with a client via telepsychology in following sessions, it is often ideal to have an in-person session first, and occasional in-person meetings if the work is long-term. This can be important due to the limitations caused by the loss of access to the full range of non-verbal information through telepsychology, and the impacts this may have on the quality of work possible. If the above is not possible, careful consideration of the suitability (e.g., due to the clients' condition and situation) for telepsychology approaches should be undertaken before a client is taken on.

3. Help your client set up their environment

Advising your client how to set up to make the session as useful as possible may also be very worthwhile. This could include advice such as the following:

• Suggestions:

- Make sure where you are sitting for the session is private and comfortable.
- Ask others to stay away (and out of earshot) from you while you are in the session.
- o Having headphones can offer better sound and more privacy.
- o Turn off your phone and remove any other distractions you can.
- Have some time available before and after the session so you can prepare for the session and wind down or think about the session afterwards
- Have a pen and paper handy so you can make a note of important points and/or any practice-at-home activities you are asked to do.

Undertaking Telepsychology

1. Look at the camera

Our natural tendency is to look at the image of the person we are talking to rather than look at the camera, and this can come across as not maintaining eye contact, conveying a lack of connection.

- **Suggestion:** Position the image of the person on your screen as close to the camera as you can so that maintaining eye contact is as easy as possible. If it is hard to maintain eye contact, consider moving the camera to a better location (if you can). Try to maintain eye contact similarly to how you would in a face-to-face interaction.
- 2. Many people find silence in an online interaction harder to sustain than when inperson.

This can lead the psychologist to feel compelled to talk more than they might normally do, and more than is helpful for the situation.

• **Suggestion:** Ensure that you are listening and talking in the optimal amounts and work to avoid talking more than is helpful as a way of dealing with uncomfortable silences.

3. Sit further back.

If you are close to the device you are using the person will only see your face and will not see any hand gestures or other body language you convey. Particularly in one-on-one sessions, and particularly when the client is using a large screen, the "talking head" presentation can be a bit overwhelming for the client.

• **Suggestion:** Sitting further back from the camera allows the person to see more of your body language and can at times make the interaction feel more relaxed.

4. Turn off the picture of yourself.

Some people find it helpful to turn off the picture of yourself because for some it is quite distracting, taking your attention away from the client.

5. Use of minimal encouragers

"Hmmm" and other small verbal fillers/encouragers often don't work well with telepsychology because (due to the audio delay often experienced) they cause us to risk "talking over" each other and interrupting the flow of the interaction.

• **Suggestion:** It is often better to use visual encourages such as nods, smiles, etc., as appropriate.

6. Risk assessment

Be aware that with the reduced access to non-verbal information that comes with telepsychology, risk assessment is more difficult that it can be in in-person settings.

- **Suggestion:** This can be partly compensated for by being more pro-active in risk assessment that you might normally be, e.g.,
 - Being particularly responsive to any verbal risk indicators and more explicit than usual in safety checking, and/or
 - Being particularly thorough about establishing safety plans early in treatment for people with whom you are working using telepsychology.

7. Do what you can to protect client information security

All types of telepsychology tools have their limitations regarding security, but some more than others. The NZ Telehealth Forum and Resource Centre recommends not using most consumer social media apps including FaceTime, WhatsApp, Facebook Messenger, Snapchat & Skype unless there is no alternative. Zoom and Doxy.me are amongst apps that they suggest have more evidence for suitability for telehealth use.

- Many systems will have ways of making them more secure from at least some risks. For instance, if using Zoom, the four following strategies can be used to increase call security:
 - Use a "Generate Automatically" meeting link rather than your "Personal Meeting ID". This establishes a new link for each meeting so someone who has connected with you on Zoom before can't use that link again and try to "piggyback" on your current meeting. The choice between "Generate Automatically" or "Personal Meeting ID" link is provided on the Meeting Scheduling page.
 - Add a Password. This will also help prevent any unwanted guests at your meeting.
 The choice to use a password, and space for specifying the password, is on the Meeting Scheduling page.
 - Use the Waiting Room function. This prevents guests from entering the meeting without the host (person who set up the meeting) being aware of their presence. The host is notified of the presence of a new guest in the waiting room and has the choice to admit them to the meeting or not. This function is chosen during the meeting creation by opening the Advanced Options tab at the bottom of the Meeting Scheduling page, checking the 'Enable waiting room' setting, and then clicking on the 'Save' button.
 - Lock the Meeting when all intended guests are present. This stops anyone else from joining the meeting. This is done by clicking on the 'Manage Participants' button on the Zoom toolbar, selecting 'More' at the bottom of the Participants panel, then selecting the 'Lock Meeting' option.

8. Protecting your privacy and professional information

Using telepsychology may expose you to some potential risk to your privacy and professional information you hold.

Suggestions:

- o If you are using Screen Share (where you show what is on your computer screen to your client) make sure that there is no other information (e.g., about you or about other clients) on your screen that you would not want the client to see. Remember that clients could use the screen capture function on their computer to make a permanent record of what you show them when screen-sharing.
- o If you are using a mobile device and move around while on a telepsychology session, be mindful not to offer views that might compromise your privacy or the privacy of anyone else in your space. This could involve turning your camera off while moving around.

9. Engaging significant others

One of the potential benefits of telepsychology is that it often allows contact with family/whanau members/significant others who cannot or do not attend in-person sessions.

• **Suggestion:** If appropriate for the work you are doing, be prepared (with your clients agreement) to utilise this potential advantage.

10. Keeping boundaries

It has been suggested that as the client is in a less formal environment (e.g., their home) some may also regard the relationship with the therapist as less formal. This may present as less clarity about the boundaries of the professional relationship or less follow-through on issues such as practice at home of work from the sessions.

• **Suggestions:** Be sure to clarify and maintain the boundaries that would be maintained in in-person work. Some additional effort may be required to ensure this. Be clear about requests for practice at home and other suggestions and expectations. Request the person to write these down and/or send a note outlining these as appropriate.

11. Providing post-session summaries

It is often worth providing a summary of the major points from the session to the client at the end of the therapy. These can be emailed, possibly along with other resources that consolidate or extend the session content. This is often valuable in in-person therapy, but can be even more so in telepsychology due to the possibility of a different level of focus by clients in the telepsychology environment.

NZCCP Membership News

Newly approved NZCCP members

The National Executive would like to welcome the following new members who have joined the College since the last ShrinkRAP.

Full Members

Michelle Berry, Hawkes Bay John Davison, Auckland Fernanda de Lacerda Mottin, Wellington Kathryn Gilchrist, Waikato Rebecca Herald, Auckland Margo Neame, Canterbury Melanie Prinsloo, Auckland

As a Full Member, each may now use the acronym MNZCCP.

The National Executive congratulates these people on attaining their new membership status. Check out the NZCCP website for a wide range of membership resources and membership benefits including:

Member Resources

Including, for example, <u>free access to ProQuest's Health Research Premium Collection</u> <u>Central</u>, the world's most varied collection of health sciences literature.

Professional development events

Job vacancies

Grants and Scholarships

As usual, the calibre and range of applications was extremely high this year. We congratulate the 2020 award winners, while at the same time commiserating with those who missed out, and we would like to say that, as always, it was a close call.

NZCCP is delighted to announce the following award recipients:

The **Research/Study Award** goes to Canterbury member **Leigh Anderson** to help pay for expenses to fund participation in the *Executive Ready Programme* run by *Women & Leadership Australia*.

The inaugural **Emerging Leaders Development Grant** has been shared between **Paul Wynands** to go towards his two 2020 MBA papers: Economic Uncertainty and Organisational Agility & Societies in Smart Cities, and **Nic Ward** to attend the Clinical Leadership in Healthcare workshop.

The four NZCCP Travel Grants have been awarded to Zara Godinovich, Jessica Reed, Ben Sedley, and Octavia Wilson.

The **NZCCP President's Award** was given to **Kate Hebenton**, who is enrolled in the Doctoral Programme of Clinical Psychology at the Doctor of Clinical Psychology Massey University (Albany Campus).

The final three Susan Selway Scholarships went to Leigh Anderson, Joanna Vallance and Octavia Wilson.

The College heartily congratulates all award recipients.

NZCCP 31st Annual General Meeting

Thank you for your patience and understanding regarding the postponement of this year's AGM as a result of the postponement of the 2020 Conference. The NZCCP 31st AGM will be convened by Zoom within the next few months. A date will be finalised at the next Council meeting (scheduled for 6 June) and you will be sent an invitation shortly thereafter.

Membership Renewal time

It's almost time for membership renewal for 2020/2021 period.

Renewing your membership is very straightforward:

- You will be emailed a membership renewal notice with an e-invoice in the first week of lune
- Please follow the link in the email to renew your membership with NZCCP (and MPS if relevant)
- Please pay your membership subscription fees promptly

Thank you - your continuing support of the College is greatly appreciated.

COVID-19: Monetary relief offer for NZCCP members

The College is aware that some members have suffered a considerable loss in their income as a result of the disruption to their work due to the Covid-19 Lockdown.

In recognition of this, we wish to offer a 50% discount in the 2020-21 NZCCP membership fees to any member who:

1. Has experienced a drop in their income of 30% or more in the COVID-19 Level 2-4 period (from the end of March 2020 to the end of June 2020) due to disruption to their work as a clinical psychologist,

AND

2. Wishes to request this discount.

We hope this will help, in a small way, to alleviate any hardship created by this event.

A high-trust approach will be used with applying for this discount. Members who wish to request the discount will be asked to attest that their income derived from clinical psychological activities decreased by at least 30% during the stated period due to disruption caused by Covid-19. No financial records or other proof will be required.

Please note that this discount will apply to the NZCCP membership fee, and will not apply to the MPS fee.

Please let Caroline know if you have any questions or if you need any help, office@nzccp.co.nz.

Journal NZCCP

As there is a new editorial team, we thought that we would try to reflect this stage of our journey with this Journal's theme, which is "**New Beginnings and looking forward**", something that we are currently experiencing, trying to find the next step forward on this new journey.

However the Editorial committee has since decided to postpone production of and add to the theme for the mid-year Journal NZCCP.

The COVID-19 Pandemic has affected society in New Zealand and worldwide in many ways, and has led to significant changes in the practice of clinical psychology and how we experience our work as clinical psychologists.

For our upcoming journal we would like to record (while it is still fresh) your reflections of this time - what you have experienced, what you have learned, what changes you hope to maintain, and what changes you will be glad to leave behind (and why), and any other COVID-19 related topics seen through a clinical psychology lens.

Articles may be short (even a few paragraphs) or longer, experiential or data driven, and about (for instance) psychological practice, personal experience, or reflections on COVID-19's impact on society, now and into the future.

We would very much appreciate you writing about your reflections and learning.

Everybody will have their story to tell, and all stories may help with preparation for any similar events in the future, so please be prepared to share. Material can be published anonymously if you prefer.

Here are some types of submissions:

- case studies
- accounts of your experiences
- empirical research
- poems
- opinion pieces
- reviews of talks you have attended or books you've read
- an opinion about a piece we have previously published.

All articles/opinions are peer reviewed.

Please also let us know if there are any other clinical psychologists you think we should approach

The deadline has been extended to 15 June to allow us time for peer reviewing and changes, and please note that this is somewhat flexible.

We are very much looking forward to receiving your wonderful submissions (which can be submitted online here: http://www.nzccp.co.nz/about-the-college/publications-and-resources/journal-nzccp-article-submission/)!

Thank you for your help, Wade, Liesje, and Caroline

New CPD videos now available at Psychotherapy.Net

In conjunction with the Australian Clinical Psychology Association (ACPA) we have signed up for another 12 month subscription to Psychotherapy.Net's <u>free access to 25 video recordings/year of the work of master therapists and different therapeutic approaches, for ongoing Continuing Professional Development.</u>

There is a <u>new selection of 25 video recordings of Master Therapists</u> which demonstrate and/or discuss their work, providing training in specific approaches. These recordings have been selected specifically to enhance knowledge and skills in clinical psychology for NZCCP members.

Our Clever Authors

Auckland based NZCCP member Dr Sarah Bell-Booth has written and designed 'My Coping Skills Journal', illustrated by Jay Allen

'My Coping Skills Journal' is a comprehensive, evidence-based guide for adults (young adults included) to improve mood and reduce stress and anxiety. This practical A5-sized journal has over 100 pages of cognitive behavioural (CBT) and dialectical behavioural (DBT) worksheets. Each page is beautifully illustrated and includes a concise description of the coping strategy followed by an exercise so it can be applied to individual situations. It can be used as a self-help tool or can be worked through with the guidance of a psychologist.

Specifically, My Coping Skills Journal focuses on topics such as understanding triggers, validating emotions, challenging unhelpful thoughts and managing uncertainty. It also teaches relaxation and mindfulness strategies to control unpleasant physiological sensations. Furthermore, it helps to increase helpful behaviours while facilitating positive aspects of well-being such as resilience. In addition, it focuses on ways to assertively communicate needs and build a support team to improve the quality of relationships and mental health in general.

My Coping Skills Journal is a useful mental health resource for members of the community and their families. Clinical psychologists and other healthcare workers have also been ordering multiple copies to share with their clients in session.

Books are available now via the website www.drsarahbellbooth.com

ACC/NZCCP/NZPsS liaison meeting, 30 March 2020

Issues Discussed:

Supporting NZCCP and NZPsS members to find answers to their ACC-related questions and concerns

We have discussed at length that the current quarterly meetings are not the best way for members to find answers to their ACC-related questions. In particular it means that answers are not timely, and the minutes of the meeting do not seem to be an effective way of communicating this information given that questions are often repeated each quarter.

We identified the efforts that ACC has made to make it easier for members to get answers to their questions or to find the right person/team to raise their concerns with. These have included posting information on the website; provider and supplier newsletters providing information and outlining who to go to for what; regularly posting similar "go to" information in the newsletters of the College and Society via the minutes of these meetings; supplier training days; a provider help line; two psychology advisor helplines, Engagement and Performance Managers; and providing live links to relevant website pages.

We discussed strengthening some of these channels and other possibilities such as regular webinars and "chat lines".

We agreed that in the meantime ACC would develop a separate newsletter for providers that would provide the relevant contacts and links and that we would minute these in the current meeting minutes.

ACC has developed the following table to assist members in establishing where to look and who to ask for information:

ask for information:	-	
What is the nature of the concern or question	Broadly speaking where should I go	Relevant Link/number/email
I have a specific question about a specific client e.g., can I have additional continuity sessions?, Can I have travel approved?, Can I see this client more often?, Can I have an additional DNA?; Can we get a psychiatric assessment/medication review?/ Are there any medical notes of existing notes/reports held by ACC?	Case owner or recovery partner (you should know who this is following the welcome conversation and letter)	Emails all have the format firstname.surname@acc.co.nz
I have not been happy with the advice I have been given from the case owner and need to talk to someone else.	Generally this should be escalated to the manager of the staff member whose advice you are unhappy with-you will likely need to ask the staff member who their manager is.	Emails all have the format firstname.surname@acc.co.nz
I have a general contractual questions that are not specific to a particular client e.g., Why can't ACC allow more DNA's than they do currently?; When will report templates be changed?; Why is the admin fee set the way that it is?	These questions can usually be answered by the teams who manage the contracts or you can be pointed in the right direction by the Engagement and Performance Managers.	https://www.acc.co.nz/for-providers/provide-services/provider-relationship-team/
I have questions about invoices and payments.	Provider Helpline	0800 222 070 providerhelp@acc.co.nz
I have a complaint about ACC staff; other providers; suppliers.	Complaints about other providers should be made directly to the provider, their supplier or their professional body; Complaints about suppliers should be made to the supplier and/or the Engagement and Performance Manager. Complaints about ACC staff should be made to the staff member's manager.	https://www.acc.co.nz/for- providers/provide- services/provider-relationship- team/ Emails all have the format firstname.surname@acc.co.nz
I have questions comments about wider dissatisfactions-responsiveness of case owners, inconsistent responses from case owners/psychology advisors.	These can be made to the Engagement and Performance Manager who will be able to redirect you if necessary.	https://www.acc.co.nz/for- providers/provide- services/provider-relationship- team/
This act is a criminal offence but is it counted as a schedule 3 event? I have questions about the	ACC's website has a central	http://www.legislation.govt.nz/act/public/2001/0049/latest/DLM100693.htmlhttps://www.acc.co.nz/for-

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new case management process-Why is ACC changing how it manages claims?; What does this mean for me and my client?; Who do I contact to give feedback or express concerns?	hub for information about the new case management model. This link includes a 15 page question and answer guide	providers/treatment- recovery/how-we-support- clients-throughout-their- recovery/
I am looking for information- Where can I find out more about Training for Independence?; Where can I find the Massey Guidelines for Sexual Abuse and Mental Injury?; Does ACC have any research on symptom validity?; Who can provide services on the neuropsychological assessment services contract?	ACC's website has a central hub for forms, publications, documents, guides, reports, research and contracts. You can also order some resources.	www.acc.co.nz/resources
I have a question about a Psychology Advisors review of my report/request for additional services.	Specific Psychology Advisor	Emails all have the format firstname.surname@acc.co.nz
I have clinical questions around specific or more general issues e.g., Would these events constitute schedule 3 events?, Would it be appropriate for me to use a different assessor in this situation even though I am contracted as an assessor?, I'm struggling to tease out the effects of historic abuse overseas and more recent but very severe abuse in NZ-does my formulation make sense for ACC?	Psychology Advisors helpline	09 354 8425 (Sensitive Claims) 09 354 8426 (Physical Injury Claims)
I have specific concerns related to my interaction with ACC Psychology Advisor's which have not been able to be resolved directly with the individual Psychology Advisor.	Psychology Advisor-Team Managers	Jamie Macniven 09 354 8308 Jamie.Macniven@acc.co.nz Penny Kokot Louw 09 354 8315 Penny.KokotLouw@acc.co.nz

Transition to new case management model: The time frames for the start of some of the roll out have been extended a little due to COVID-19 but it is still planned that the transition will be completed in October 2020. ACC has had feedback from some clients and providers that they prefer the new way of working and in particular being able to get quick responses to some issues and being able to choose how much or how little contact they have with ACC once they are settled into therapy.

ISSC changes to contract: ACC is trying to be pragmatic given the impact of COVID-19 and the fact that there are a number of ACC contracts due to expire this year. The detailed work on this is not yet completed but it is planned that ACC will roll over the ISSC contract for existing suppliers. ACC is working on communications to the sector and it is planned that there will be a series of webinars where questions can be addressed.

Telehealth under COVID-19: ACC has removed the need for prior approvals for telehealth from all mental health services until further notice, in response to COVID-19. This is not expected to be a permanent change, with any more permanent changes requiring bigger contract changes. The use of telehealth for assessments will not be pushed by ACC and continuity sessions and Wellbeing sessions will be available if the provider considers this more clinically appropriate. It is expected that providers will use clinical judgement and the guidelines/advice of their professional bodies/registering authority/indemnity insurer when determining what services can and should be safely undertaken via telehealth given the client's presentation and circumstances. There was differing opinions within the professional associations membership as to whether it was ever appropriate to complete an assessment via telehealth and ACC endorsed their request that the professional bodies develop guidelines about when this was and was not appropriate. For more information about telehealth and/or ACC'S response to COVID-19 please visit the ACC website: https://www.acc.co.nz/covid-19/providers

Interface of ACC and Family Court processes: Members noted that there have been a number of complaints to professional bodies arising from members failing to fully recognize the authority of the Family Court and the associated legislation. These have included failure to recognize the Guardianship Act and its requirements. ACC endorsed the request that the professional bodies remind members to carefully consider their responsibilities under any and all legislation that applies to the particular client groups that they are seeing, and that it is a professional requirement to be aware of the legislation and their associated responsibilities.

Next meeting: 29th June 2020

Support for home phone users in a power cut - Certifying role proposed under 111 contact code

A message from the Commerce Commission

The psychology profession has been identified as 'a person of standing in the community' under the Commerce Commission's proposed 111 contact code. A person of standing will be able to certify applications for extra support to home phone customers from their telecommunications providers.

The Commerce Commission, New Zealand's telecommunications regulator, is consulting on new rules that providers must follow to support their customers on new phone technologies, like fibre and fixed wireless, in the event of a power cut. This is called the 111 contact code.

Home phone customers who have no other way of contacting 111 emergency services in a power cut can apply for free extra support from their home phone provider.

It is proposed that a 'person of standing' certifies a declaration that the applicant is 'at particular risk of requiring the 111 emergency service'. This could be for a health condition, disability or for safety reasons.

A list of persons of standing is on page six of the <u>draft 111 contact code</u>. An example of the declaration a person of standing might be asked to certify can be found from page 17 of the code.

Certifying role proposed under 111 contact code

The Commerce Commission is seeking <u>feedback</u> on their <u>draft 111 contact code</u>.

Under the code home phone customers on new technology who consider themselves as being at a greater risk of needing to call 111, may qualify for extra support at no cost.

The code proposes that certain professions and community leaders are deemed 'persons of standing' and can certify applications from home phone customers to their providers for extra support.

The code also requires telecommunications providers regularly remind their customers that new technologies will not work in a power cut, how to protect themselves and what further support is available.

This short <u>overview</u> of the proposed code also suggests ways consumers can protect themselves. <u>Feedback</u> on the 111 Contact Code is due by 5pm, Wednesday 17 July 2020 and can be provided either by completing the <u>online survey or by making a submission</u>.

The Commission acknowledges that some interested parties may face a range of challenges during New Zealand's COVID-19 response. This may impact their ability to submit in a meaningful way within these timeframes. If you would like to make a submission but face difficulties in doing so within the timeframe, please ensure that you register your interest with the Commission at regulation.branch@comcom.govt.nz so that we can work with you to accommodate your needs where possible.

The Commission is also considering hosting a virtual forum on the 111 contact code. To register your interest in taking part in a virtual forum or if you would like any more information about the code please contact charlotte.ansell@comcom.govt.nz.



National Education Training Timetable

The NZ College of Clinical Psychologists aims to encourage and facilitate continuing education opportunities for members, by providing nationally coordinated events to a high standard. Our goal is to coordinate training opportunities between branches with the goal of facilitating training in all regions. Please **consult the**College website for further information and links (http://www.nzccp.co.nz/events/event-calendar/)

TRAINING TIMETABLE

NZCCP Events		
LOCATION	MONTH	PRESENTER/ CONTENT
Christchurch	NEW DATES: 25-28 March 2020	NZCCP 31st National Conference "Tui, tui, tui, tuia"

LOCATION	MONITH	DDECENTED / CONTENT
LOCATION	MONTH	PRESENTER/ CONTENT
Webinars	July, August	DBTNZ webinar training series
Wellington	Sep, Nov	ACT workshops
Auckland	17-23 October	MTI NZ Intensive
Auckland	October	<u>Trauma Education presented by Dr Leah Giarratano</u>
Wellington	29 October	National Trauma Symposium
Auckland	7-10 November	ANZ ACBS conference 2020
Bay of Islands	18-20 March 2020	Annual Scientific Meeting of the New Zealand Pain Society



Trauma Education

presented by Dr Leah Giarratano

Leah is a doctoral-level clinical psychologist and author with 24 years of clinical and teaching expertise in CBT and traumatology

Two highly regarded CPD activities for all mental health professionals: 14 hours for each activity Both workshops are endorsed by the AASW, ACA and ACMHN – level 2.

PLAN OR ACT NOW TO SAVE ON THE FEE

Clinical skills for treating post-traumatic stress disorder

Treating PTSD: Day 1 - 2

This two-day program presents a highly practical and interactive workshop (casebased) for treating traumatised clients; the content is applicable to both adult and adolescent populations. The techniques are cognitive behavioural, evidence-based, and will be immediately useful and effective for your clinical practice. In order to attend Treating Complex Trauma (Day 3-4), participants must have first completed this 'Treating PTSD' program.

13 - 14 October 2020, Perth CBD

20 - 21 October 2020, Brisbane CBD

27 - 28 October 2020, Auckland CBD

10 - 11 November 2020, Sydney CBD

17 - 18 November 2020, Adelaide CBD

24 - 25 November 2020, Melbourne CBD

Also available via two-day livestream or as an online package with three months access

Clinical skills for treating complex traumatisation

Treating Complex Trauma: Day 3 - 4

This two-day program focuses upon phasebased treatment for survivors of child abuse and neglect. This workshop completes Leah's four-day trauma- focused training. Applicable to both adult and adolescent populations, incorporating practical, current experiential techniques showing promising results with this population; drawn from Emotion focused therapy for trauma, Metacognitive therapy, Schema therapy, Attachment pathology treatment, Acceptance and Commitment Therapy, Cognitive Behaviour Therapy, and Dialectical Behaviour Therapy.

15 - 16 October 2020, Perth CBD

22 - 23 October 2020, Brisbane CBD

29 - 30 October 2020, Auckland CBD

12 - 13 November 2020, Sydney CBD

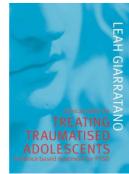
19 - 20 November 2020, Adelaide CBD

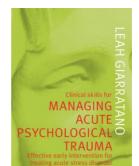
26 - 27 November 2020, Melbourne CBD

Also available via two-day livestream or as an online package with three months

RAUMATISATION







* Program fee for NZ residents. Please note that fee and payment is in Australian Dollars (AUD)

Early Bird Fee \$600 AUD each (Day 1-2 or Day 3-4) when you pay more than four months prior Normal Fee \$680 AUD each (Day 1-2 or Day 3-4) when you pay less than four months prior Pairs Fee \$1,170 AUD or \$1,270 AUD as above when you pay for Days 1-4 in one transaction. * Register directly on our website for Auckland but please contact us to obtain these fees if you participate online or attend in Australia. These fees only apply to NZ residents.

Your fee includes program materials, lunches, morning and afternoon teas on all workshop days.

You must have first completed Day 1-2 to attend Day 3-4. For Days 1-4, if you wish to attend different locations, please email us your location preferences, name, address, mobile and any dietary requests for catering and you will receive a reservation invoice with the discounted fee and payment instructions.

Please visit www.talominbooks.com for further details

Direct your enquiries to Joshua George, mail@talominbooks.com

Note that attendee withdrawals and transfers attract a processing fee of \$77 AUD. No withdrawals are allowed in the ten days prior to the workshop; however, positions are transferable to anyone you nominate.