

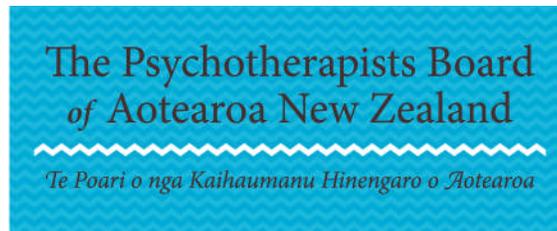
## CONTENTS

### CONSULTATION: PSYCHOTHERAPIST RECERTIFICATION

This document is seeking the views of the profession and stakeholders with regard to Psychotherapist Recertification.

The Board has allocated **8 weeks for the consultation period**. Please send your consultation responses to the Registrar on or before **Friday 12 July 2013**.

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## General Consultation Information

The Psychotherapists Board of Aotearoa New Zealand (the Board) is committed to open, transparent and consistent consultation when reviewing or developing standards, guidelines and related policies for dissemination to the public, profession and stakeholders. The Board will also consult to meet its common law obligations and obligations under section 14 of the Health Practitioners Competence Assurance Act 2003 (HPCAA).

Consultation means that the Board will seek information and or advice and will consider it when making a decision. Consultation does not mean that the Board will abrogate its responsibility to make decisions consistent with its purpose and functions under the HPCAA.

### a) Benefits of Consultation

The Board recognises that open consultation has many benefits, some of which are:

- Enables stakeholders to contribute to policy development.
- Facilitates working dialogue with internal and external stakeholders.
- Helps early identification of potential problems and issues with proposed standards, guidelines and related policies.
- Assists to make the process of developing standards, guidelines and related policies accountable.
- Increases public and stakeholder understanding of the role and functions of the Board.

### b) How the Board will consult

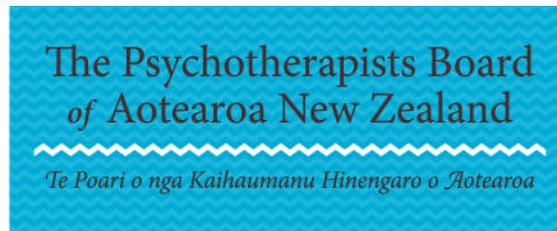
The consultation will be undertaken for a period of 8 weeks allowing sufficient time for consideration by the profession and stakeholders.

- Consultation papers will be available for downloading from the Board's website on the 'News and Events' page.
- Consultation will be promoted to the Board's practitioner and stakeholder database as well as in the Board's newsletter and through the Board's website.
- Submissions received by practitioners or stakeholders will be acknowledged on receipt.
- The Board will determine on a case-by-case basis, the appropriateness and desirability of public and stakeholder face to face consultation meetings.

### c) The Board's decision-making

The Board in its decision-making process will consider, without limitation, the following:

- All feedback received during the consultation process.
- Its primary purpose under the HPCAA i.e 'to protect the health and safety of members of the public by providing for mechanisms to ensure that health practitioners are competence and fit to practise their professions'.



## Introduction to this Consultation

The Board wishes to thank all those who provided feedback from the initial consultation on Recertification, and has carefully considered this feedback in drafting a second consultation document. This second document incorporates a number of the suggestions and includes other modifications to the original document.

Practitioners are invited to offer further feedback in response to this document.

A major change has been the Board's decision to omit the Peer Esteem section from the process in response to this feedback. This means that Recertification is now proposed to consist of two sections:

1. Self-reflection; and
2. Supervisor sign off.

The enclosed templates for practitioners to use in the recertification process incorporate some additional points as a result of the consultation with the profession.

### Auditing

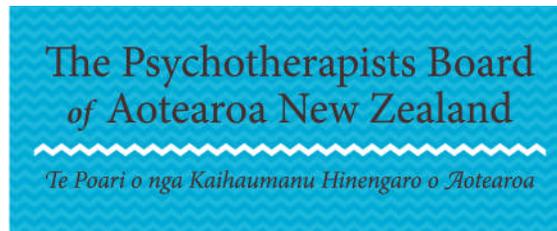
Some feedback questioned the need for auditing of the recertification process. Section 118 (d and e) of the HPCA Act requires the Board to "review and promote the competence of health practitioners" and to "recognise, accredit and set programmes to ensure the ongoing competence of health practitioners".

While Recertification is the primary programme by means of which the Board promotes the ongoing competence of practitioners, the conducting of an audit is seen by the Board as the only way in which it can ensure that each practitioner is actively involved in meaningful self-reflection on their clinical practice, and in identifying issues for further professional development.

Practitioners who are required to undergo an audit will be asked to submit their recertification documents to the Board. All other practitioners should retain their recertification documents with their practice records.

Selection of practitioners for auditing will be random, and is likely to be required of all practitioners at least once in every five years. Initially the Board proposes to audit practitioners in the Interim Scope of Practice while the staffing and logistic requirements of auditing are being established. The Board will advise practitioners of developments in this respect.

Auditing will require practitioners being audited to forward their completed recertification documents to the Registrar. The Board proposes to appoint a Professional Advisor to undertake the auditing task and report back to the Board. The auditor will be asked to advise the Board that each audited practitioner has or has not engaged effectively in the recertification process. This will involve the auditor viewing all of the submitted recertification documents and ascertaining whether the practitioner has satisfactorily met the requirements as determined by the



recertification guidelines. This information will then be forwarded to the Registrar. If a practitioner is deemed not to have satisfactorily completed their recertification process, they will be contacted by the Registrar to discuss this.

### **Clinical Notes and Records**

Some practitioners have (in their consultation feedback) expressed a concern that auditing may involve a requirement for clinical notes to be forwarded. The Board wishes to clarify that practitioners will not be asked to submit clinical notes as part of an auditing or recertification process. It is envisaged that the only circumstances in which a practitioner may be asked to submit clinical notes to the Board would be during an investigation arising from a notification of concern about a practitioner's competency, conduct, or fitness to practise.

### **Role of Supervisor**

The Board understands clinical supervision to be a central component of psychotherapists' professional development. It is acknowledged that practitioners may choose to use peers or additional supervisors to assist in their Self-Reflection.

The practitioner's primary clinical supervisor is asked to sign an attestation which confirms that the practitioner's professional development has been discussed in supervision, and that they believe, to the best of their knowledge, that the practitioner understands and adheres to the Board's Clinical Competencies, Cultural Competencies, and Ethical Standards.

### **APC Renewal**

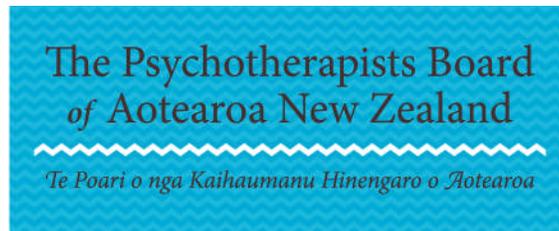
Practitioners will be required to submit their APC renewal form, together with an attestation from their supervisor that they (the practitioner) have completed a process of Self-Reflection. Templates for this are not yet finalised.

## **Practitioner Self-Reflection**

All practitioners will be expected to engage in Self-Reflection of their current level of competency. Self-Reflection should be aimed at identifying areas of growth, development, and improvement. Psychotherapists' core competencies (as listed on the Board's website) should be used as a basis for this Self-Reflection.

Practitioners are required to complete the template provided, relating to the core clinical competencies, cultural competency, and ethical and legal practice, as noted on the left-hand column of the template.

The template should be completed in such a way as to indicate that the core clinical competencies, cultural competencies, and ethical and legal practice issues have been reviewed and considered. However, it is expected that particular emphasis will be given to those seen as

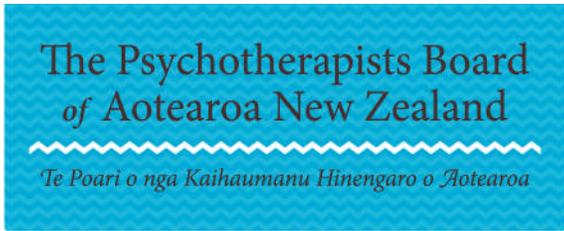


most focal to the practitioner's continuing professional development needs. The reasons for the choice of focal issues should be indicated.

Practitioners should record these areas of development, their intended developmental plan, and review their progress throughout the year. The Board regards the Self-Reflection document as a "living document" which may be changed in response to new understandings.

Continuing professional development activities, such as attendance at a course of study, attendance and presentations at conferences, attendance at workshops, reading material or other media, additional supervision, peer group discussion, clinical presentations to peers or colleagues, or personal psychotherapy, may be incorporated into the Self-Reflection as appropriate. In such cases there should be adequate specificity; for example authors, titles, dates, etc.

Some practitioners may feel that the template does not allow for an adequate representation of their style of professional development. They are invited to supplement the completed template with additional notes or other illustrative means relevant to their Self-Reflection. For example, describing the process they have undertaken to gain insight, or describing what helped them become aware of the areas of continuing professional development that needed attending to, or how their insight is being integrated into practice. Please note that completion of the Board's template is mandatory, but any additional material is optional.

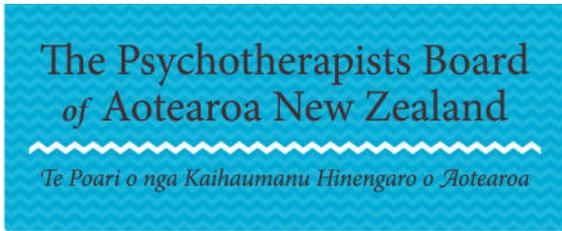


**Template 1: Self-Reflection**

**Note: The Psychotherapist Core Competencies can be found on the Board’s website.**

Practitioners Name:	Registration Number:
Scope of Practice:	
Supervisor’s Name:	

Area of Competence	Self-reflection	Identified areas for further development	Development plan	Review of progress
Core Clinical Competencies				
Cultural Competence				
Ethical and Legal practice				



**Template 2: Supervisor Attestation**

**Supervisor's Name:** .....

**Supervisee's Name:** .....

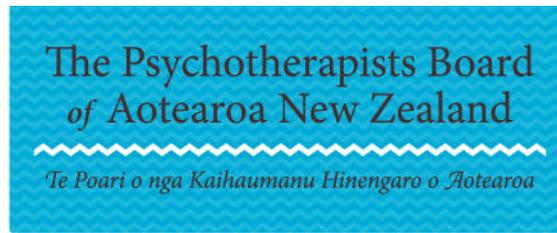
- I am a registered psychotherapist with a current APC.
- I am registered under the HPCAA with a current APC and have been approved by the Board as having suitable psychotherapy training, knowledge, skill, and/or professional development.

- I have sighted and discussed my supervisee's areas for growth, development and/or improvement.
- I am satisfied to the best of my knowledge, that the continuing professional development activities my supervisor has outlined are appropriate for maintaining competence in his/her scope, practice area, and level of experience.
- I can confirm that my supervisee has attended and participated in regular supervision and that to the best of my knowledge he/she understands and adheres to the Board's Core Clinical Competencies, Cultural Competencies, and Ethical Standards.

I would like to make the additional comments (optional):

**Signed by** \_\_\_\_\_ **(Supervisor)**

**Date** \_\_\_\_\_



## Consultation on Recertification May 2013

**Please clearly state who you are responding on behalf of:**

**Individual:** I am responding on behalf of

Name:

**Group/Association:** I am responding on behalf of

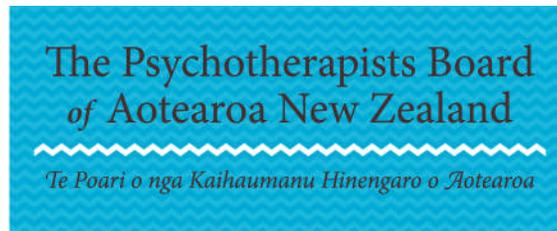
Name:

The number of people I am responding on behalf of is

Number:

If you wish to comment, please make sure all submissions are with the Board on or before **Friday 12 July 2013**

Comments should be emailed to [registrar@pbanz.org.nz](mailto:registrar@pbanz.org.nz) **Please provide responses in Microsoft Word format** or posted to PO Box 10-787, The Terrace, Wellington, New Zealand



## **Appendix 1: Background (from previous consultation document 2012)**

### **Psychotherapist Recertification**

Recertification is necessary to show maintained practitioner competence.

Under Section 41 of the Health Practitioners Competence Assurance Act 2003 (the Act) the Board is required to ensure that practitioners maintain their competence. In order to do this the Board can set programmes, assessments and training to assist practitioners in maintaining their competence.

The Board's aim is to develop a recertification programme that:

- assures the Board that practitioners are maintaining their competence;
- assures public safety is maintained; and
- suits the needs of the profession.

### **Background**

In March 2011 an information paper and questionnaire on recertification (appendix 2) was sent to the profession to:

- Explain what a recertification programme is in terms of the Act and how it works;
- Describe the range of activities associated with recertification programmes;
- Describe what other Board's and Councils expect of practitioners they regulate
- Seek feedback on:
  - the type of education and professional development activities practitioners are currently engaged in;
  - the type of recertification programme the profession would prefer; and
  - how recertification could be audited by the Board.

### **Information Paper, Feedback**

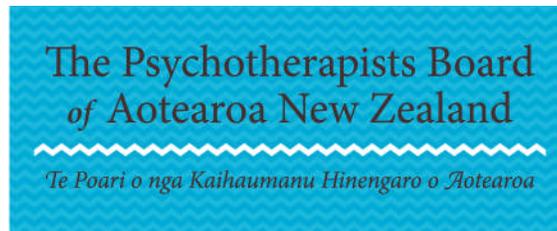
Feedback from the profession supported a self-reflective high-trust model similar to that of the Psychologists Board. Many identified the integral role that psychotherapist clinical supervision plays in maintaining competence, and the belief that the supervisory relationship aids in maintained self-reflection, both on clinical practice and areas that may need further development.

### **The Psychotherapists Board met with The Psychologists Board**

To better understand the Psychologists Board's recertification programme, the Psychotherapists Board's Recertification Committee met with the Psychologists Board CEO, Registrar, Professional Advisor and Professional Standards Coordinator.

During this meeting the Psychotherapists Board's Recertification Committee looked at how the Psychologists Board;

- developed and structured their programme,
- introduced the programme to the profession,
- piloted the programme and the auditing process.



The Psychologist Board representatives also provided a working example of their recertification process.

This meeting enabled the Psychotherapists Board's Recertification Committee to understand the potential pros and cons of the psychologist's model for psychotherapists.

**Remind me; what is the Psychologists Board self-reflective model?**

The Psychologist Board has a self-reflective model linked to Psychologist Core Competencies.

This is a structured model setting guidelines for practitioners to follow.

There are two parts to the Psychologist Recertification Programme:

**Part 1** The practitioner undertakes a self-reflective review of their practice in relation to nine core competency sets, they document their self-reflection in relation to each competency, and go on to identify strengths, weaknesses and areas of interest for further development. They complete this part of the self-reflective process by identifying their learning objectives.

**Part 2** Using the information from Part 1 the practitioner develops what might be regarded as a professional development plan, identified by the Psychologist Board as "Learning Objectives and their Progression." The practitioner identifies their learning objectives from their original reflection of practise and the professional development activities they intend to undertake to achieve the learning objective. Prior to applying for their APC renewal the practitioner records their personal reflection of their progress in relation to each of the learning objectives.

This reflective process is undertaken annually and both parts of the process accompany the practitioners APC renewal application.

**Psychologist Auditing:** a percentage of practitioners are audited each year. Every practitioner is likely to be audited every five years. Auditing requires the practitioner to produce evidence as to how they have met the learning objectives.

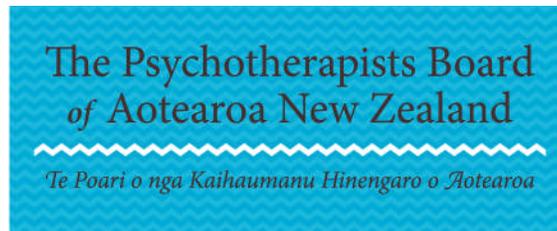
**Proposed Psychotherapist Recertification Model**

Following the profession's response to the Board's information paper and questionnaire on recertification, the Board has now developed this consultation document for consideration.

This consultation proposes that the Board continues to operate in a high trust manner unless proof provides a reason for change. The Board's proposed high trust recertification model now out for consultation would involve:

1. Self-reflection;
2. Supervisor sign off; and
3. Peer esteem.

The Board sees benefit in practitioners working with their supervisors to identify areas of growth, development and improvement. The Board is mindful that the supervisor/supervisee relationship needs to be open, honest and transparent so that supervisees feel safe to bring all issues related



to their psychotherapy practice to supervision without fear of being viewed as incompetent. Furthermore, the Board does not intend that the overall onus of a supervisee's competence should be placed entirely with supervisors. However, it seems sensible to build on the reflective process that takes place during supervision.

In this consultation document the Board is proposing that supervisors aid their supervisees with their ongoing self-reflection and professional development.

(Note: the Board is aware that some supervisors are already working in this manner)

### **How will this model work? What will each of the steps include?**

All registered psychotherapists holding a current APC and applying for an APC renewal will be in regular clinical supervision. Clinical supervision will be provided by either a registered psychotherapist with a current APC, or a health practitioner registered under the HPCAA with a current APC (approved by the Board as having sufficient psychotherapy training, knowledge, professional development and skills). Clinical supervision is an acknowledged form of self-reflective practice.

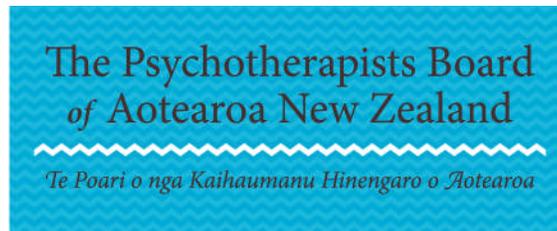
**The Board is now seeking feedback from the profession as to the following proposed 3 step method of recertification.** Draft templates are located in appendix two.

#### **1. Self-reflection**

- Prior to APC renewal and in conjunction with their supervisor all practitioners will be expected to engage in self-reflection on their current level of competency.
- Psychotherapists' core competencies will be used as a basis for this self-reflection to identify potential areas of growth, development and improvement.
- Practitioners will record these areas of development and their intended development plan. It is expected that practitioners will review their progress throughout the year.
- If areas for improvement have not been met by the time of the subsequent APC renewal time, practitioners will include the reasons why they believe they were unable to achieve their intended growth/improvement and how they will meet these areas in the coming year.

#### **2. Supervisor attestation**

- Practitioners will have discussed and agreed the areas for growth, development and improvement with their supervisor
- Supervisors will attest to the following:
  - a) I have sighted and discussed my supervisee's areas for growth, development and or improvement.
  - b) I am satisfied that the professional development activities my supervisee has outlined are appropriate for maintaining competence in his/her scope, practice area and level of experience.
  - c) I can confirm that [Psychotherapists Name] attended and participated in regular supervision and that to the best of my knowledge they understand and adhere to the Board's Core Clinical Competencies, Cultural Competencies and Ethical Standards.



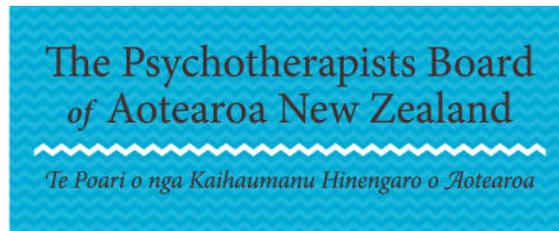
### **3. Peer Esteem**

The Board would like the profession to comment on whether a peer esteem statement should be required. A peer esteem would include:

- a brief statement from a colleague, either a psychotherapist or someone with sufficient knowledge of the practitioner, attesting [as far as they know] that the practitioner is practicing ethically and professionally.

### **Audit Process**

The Board proposes to audit all those registered in the Interim Psychotherapist Scope of Practice annually. Initially the audit process will focus on those in the Interim Psychotherapists Scope of Practice however following the setup and implementation of the recertification process a small number of Psychotherapists registered in the Psychotherapists Scope of Practice and Psychotherapist Scope of Practice with Child and Adolescent Psychotherapist Specialism will be audited each year.



**Appendix two**

**Psychotherapist Board of Aotearoa New Zealand Recertification 2013/2014**

**1. Practitioner Self Reflection**

**Background**

In conjunction with their supervisor all practitioners will be expected to engage in the self-reflection on their current level of competency. Self-reflection should be aimed at identifying areas of growth, development and improvement. Psychotherapist’s core competencies will be used as a basis for this self-reflection.

Practitioners will record these areas of development, their intended developmental plan and review their progress throughout the year.

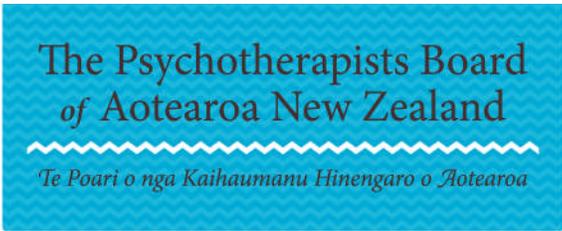
If areas for improvement have not been met by the time of the subsequent APC renewal time, practitioners will include the reasons why they believe they were unable to achieve their intended growth/improvement and how they will meet these areas in the coming year.

Professional Development may include but is not limited to educational activities such as: attendance at a course of study; attendance at workshops; reading material; additional supervision undertaken.

Practitioners Name:	Registration Number:
Scope of Practice:	
Supervisors Name:	

I have identified below areas of professional development in conjunction with my supervisor.

Area of Competence	Self-reflection	Identified areas for further development	Development plan	Review of progress
Core Clinical Competencies				
Cultural Competence				



Ethical and Legal practice				

**Psychotherapist Board of Aotearoa New Zealand Recertification 2012/2013**

**2. Supervisor Attestation**

Practitioners will have discussed and agreed areas for growth, development and improvement with their supervisor.

**Supervisors Name:** \_\_\_\_\_

I am a Registered Psychotherapist with a current APC

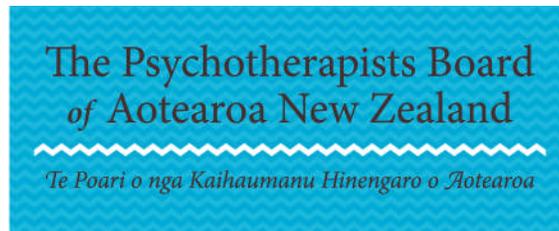
I am registered under the HPCAA with a current APC and have been approved by the Board as having suitable psychotherapy training, knowledge, skill and or professional development.

- I have sighted and discussed my supervisee’s areas for growth, development and or improvement.
- I am satisfied that the professional development activities my supervisee has outlined are appropriate for maintaining competence in his/her scope, practice area and level of experience.
- I can confirm that they have attended and participated in regular supervision and that to the best of my knowledge they understand and adhere to the Board’s Core Clinical Competences, Cultural Competencies and Ethical Standards.

I would like to make the additional comments (optional):



**Signed by** ----- **date**  
Supervisor



## Psychotherapist Board of Aotearoa New Zealand Recertification 2012/2013

### 3. Peer Esteem

Peer esteem may be completed by a colleague, either a psychotherapist or someone with sufficient knowledge of the practitioner's work who can attest that as far as they are aware the practitioner is practicing ethically and professionally.

**Psychotherapists Name:**

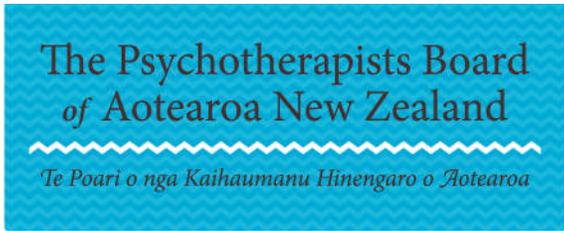
**Registration Number:**

**Colleagues Name:**

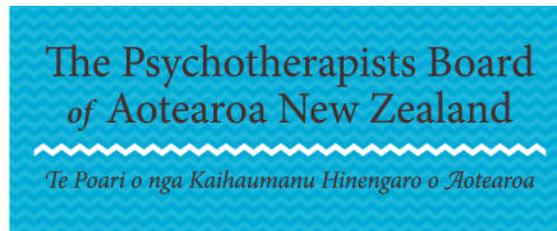
**Relationship to Psychotherapist:**

I am providing a peer esteem for \_\_\_\_\_  
Psychotherapist's name

Please write a brief statement attesting to the best of your knowledge that the practitioner listed above is practising ethically and professionally.



Signed: \_\_\_\_\_ Date \_\_\_\_\_  
Colleague



## **Appendix 2**

### **Recertification programme Discussion Paper March 2011**

This paper aims to:

- Explain what a recertification programme is in terms of the Health Practitioners Competence Assurance Act 2003 (the Act) and how it works
- Describe the range of activities associated with recertification programmes
- Describe what other Boards and Councils expect of the practitioners they regulate
- Seek feedback from psychotherapists on:
  - the type of education and professional development activities practitioners are currently engaged in;
  - the type of recertification programme the profession would prefer; and
  - how recertification could be audited by the Board.

### **What is a recertification programme?**

Under Section 41 of the Act, the Board can set programmes, assessments and training in order that the Board can be assured that practitioners are maintaining their competence.

The Board's aim is to develop a recertification programme that:

- a) assures the Board that practitioners are maintaining their competence;
- b) assures public safety is maintained; and
- c) suits the needs of the profession.

Thus, in terms of the HPCA Act, recertification is the term given to the process by which the Board expects its practitioners to demonstrate that they are maintaining their competence so they can be issued a practising certificate by the Board. Most Boards and Councils link recertification to practitioners meeting the standards of clinical and cultural competence and ethical conduct the Board or Council has set.

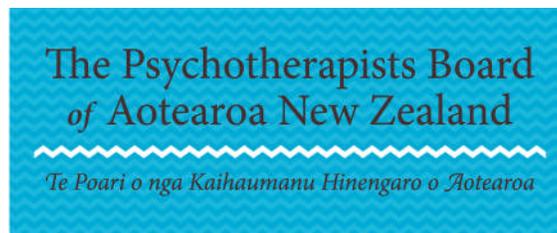
Most Boards and Councils also have a process to 'check' or 'audit' what is being done by the practitioner before the practising certificate is issued, so when the practising certificate is being applied for each year, the Board or Council asks practitioners, and sometimes their supervisors and/or employer, to confirm the practitioner is (as far as they are aware) competent and fit to continue practising.

The Board recognises that the degree of confidentiality and the nature of the relationship between the client and the psychotherapist in the practice of psychotherapy requires special care in the development of a recertification programme.

Under Section 41(4) of the HPCA Act, the board must give a reasonable time for practitioners to comply with any programme.

### **What is happening now?**

As a temporary measure, during the period where the Board developed the standards of competence for psychotherapists, all practitioners and supervisors have been asked to sign a declaration that they were competent and fit to practise.



### **What sort of activities could be included in a recertification programme?**

Recertification programmes differ from one Board or Council to the next, and what is right for one profession may not be right for another. Some of the activities undertaken as part of these programmes include the following:

**Continuing Medical Education (CME)** – this is on-going education activities and learning to help practitioners remain current and learn more and may include attending conferences and meetings and doing reading of relevant articles etc.

**Continuing Professional Development (CPD)** - this is defined as a commitment to a structured skills enhancement programme, an updating of professional knowledge and the improvement of professional competence, keeping up to date with practice and continuously seeking to improve in specific areas where an individual's competence may need to be improved. As well as CME, some groups accept that it may include activities such as self-reflection and the setting of specific objectives, teaching, supervising, doing research or publishing in professional journals, examining and mentoring others etc. The information may be recorded in a learning diary or portfolio.

**Peer review** is the evaluation of the performance of individuals or groups by members in the same team; this may include review of cases and discussion groups.

**Clinical audit** includes things such as the reviewing of records, external audit of processes or outcomes, audit of procedures and outcomes.

**Practice visit** includes a process whereby one or more practitioners visit a practitioner to review their work and possibly review records and other aspects of their practice.

A **portfolio** is the way a practitioner sets out the evidence of learning and is where the individual records their efforts and assesses the benefits of their planned activities. It usually records time spent reflecting on how they have approached each activity and in assessing the outcomes will enable the individual to adjust their learning objectives for the following year.

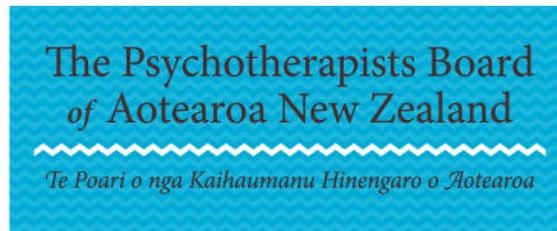
Some Board and Council programmes are prescriptive and others more flexible; some have mandatory requirements for all practitioners to ensure a minimum level of on-going learning is taking place across the profession.

### **Example recertification programmes**

Examples of three different programmes can be found by copying and pasting the following links into your web browser:

1. The New Zealand Psychologists Board call their recertification process a Continuing Competence Programme:  
<http://www.psychologistsboard.org.nz/resources>

The Psychologists Board's recertification programme is an annual review of this Board's core competencies by the practitioner to identify areas of strength and weakness through self-reflection. From this review, learning objectives are established and a self-directed learning plan developed to meet them in collaboration with the practitioner's supervisor, employer,



mentor or senior colleague. This work is documented and the practitioner reviews this documentation, assesses their progress towards the original objectives and reflects on evolving directions. This process requires third party declarations from the practitioner's supervisor, employer, mentor or senior colleague confirming that the work has been done.

2. The Physiotherapy Board of New Zealand's recertification programme:  
<http://www.physioboard.org.nz/index.php?Recertification>

The Physiotherapy Board operates its programme on a 3-year cycle, and sets minimum requirements for satisfactory completion of the programme. This includes:

- 100 hours of formally recorded CPD activity which is linked to four learning categories (work-based, professional activity, formal education and self-directed) – the practitioner must have completed at least one activity from each category during the previous 3-year period and have completed at least 20 hours per year
- at least 50 of these hours must be practical hours from their specific area of practice (verification of these hours is required in writing, e.g. from an employer, a copy of a contract and/or a detailed invoice)
- taking part in professional peer review.

3. The Midwifery Council of New Zealand's recertification programme:  
<http://www.midwiferycouncil.health.nz/recertification/>

The Midwifery Council operates its programme on a 3-year cycle and requires midwives to complete certain compulsory and elective education courses and engage in professional activities in the 3-year period in order to maintain their APC.

Points are allocated to each activity and each midwife must collect a minimum of 50 points of education and professional activities over each 3-year period.

### **Why does the Board need to monitor practitioners' on-going competence?**

The Board's principle purpose, under Section 3 of the HPCA Act, is to protect the public by as far as possible ensuring that practitioners are fit and competent to practise.

### **What process do Boards and Councils use to ensure practitioners complete recertification requirements?**

Some Boards and Councils have a 'high trust model' – they expect their practitioners to keep themselves competent and up to date and then sign off that they have done this each year when they request a practising certificate.

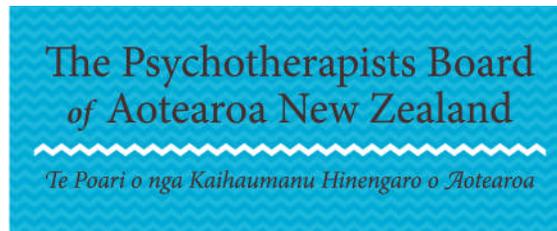
Other Boards and Councils may from time to time require a percentage of practitioners to provide more detailed information on what particular activities they have been undertaking to ensure their on-going competence. This is known as an Audit process.

Some use a third party to assess what has been achieved and whether it meets the programme requirements.

Some Boards and Councils run their recertification programmes annually, whereas others complete a 3-yearly or 5-yearly cycle.

### **Where to from here?**

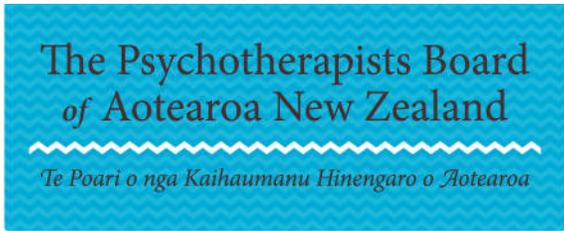
The Board is seeking feedback on the nature of continuing education, professional development, and other activities psychotherapists engage in currently. With this information, the Board will



develop a recertification programme to present to the profession, before considering whether to have a pilot programme to assess effectiveness.

### **Questionnaire**

The Board would like your feedback on what sort of activities you are currently undertaking and what sort of recertification programme you think you would most prefer to undertake. As mentioned above, the Board's aim is to develop a recertification programme that helps to ensure the practitioner remains competent and thus improves public safety and that also meets the needs of the profession. Please help us by completing the questionnaire below and emailing it to the Board's Registrar at [registrar@pbanz.org.nz](mailto:registrar@pbanz.org.nz) no later than the **1<sup>st</sup> of June 2011**.



**Questionnaire**

This questionnaire will be used to inform the Board’s development of a recertification programme for the profession. Any completed questionnaires submitted to the Board will be seen only by the Board and its staff and any committee or professional it may appoint to assist it in the development of the programme. You can submit your completed questionnaire either with your name on it or anonymously. You can also send in a reply from a group; however, please indicate in your submission how many people have been involved in developing the reply. Please answer the following questions and email your responses to [registrar@pbanz.org.nz](mailto:registrar@pbanz.org.nz), or alternatively, mail them to the board at PO Box 10-787, Wellington. Submissions need to be received no later than

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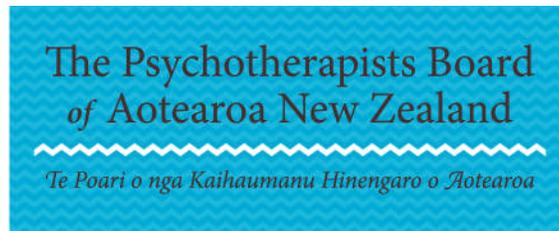
Put questionnaire back

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Thank you for completing this questionnaire. The Board appreciates your feedback.

If you wish to, please provide your name/s below:

.....



## Psychotherapist Board of Aotearoa New Zealand Recertification 2012/2013

### 4. Peer Esteem

Peer esteem may be completed by a colleague, either a psychotherapist or someone with sufficient knowledge of the practitioner's work who can attest that as far as they are aware the practitioner is practicing ethically and professionally.

**Psychotherapists Name:**

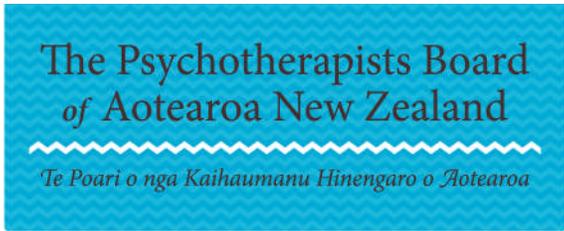
**Registration Number:**

**Colleagues Name:**

**Relationship to Psychotherapist:**

I am providing a peer esteem for \_\_\_\_\_  
Psychotherapist's name

Please write a brief statement attesting to the best of your knowledge that the practitioner listed above is practising ethically and professionally.



Signed: \_\_\_\_\_ Date \_\_\_\_\_  
Colleague