



# psychoBABBLE

A semi-annual publication providing the latest information to help support members of the College of Psychologists of New Brunswick.

## Welcome

By Mandy McLean, Director of Professional Affairs, CPNB

Welcome to the second issue of our newsletter Psychobabble!

There have been many exciting things going on at CPNB! A new President, progress on the new Act, continued ethics initiatives, a new website and so much more!

Our goal is to keep you updated with new initiatives and exciting developments at CPNB. Each issue will bring you information on latest CPNB News, interesting reads or articles, topics of interest, member and committee spotlights as well as valuable website resources.

We hope you find this publication a valuable resource in viewing and managing information.

Please feel free to contact me directly if you have ideas for future newsletters, any comments, questions or concerns.

## latestCPNBNEWS

### Revision to the Psychology Act: Where are we now?

In 2006, it was accepted by the majority of members that entry level in order to gain licensure in New Brunswick would be changed to that of a doctoral degree. The current By-Laws require doctoral training to enter the profession in NB (Master's level programs may be considered until the year 2020).

In keeping with the Revised Act follow-up, our lawyer, Frederick McElman (CPNB Lawyer) continued to work with the Task Force on the Revision of the Act, in order for the College of Psychologists of New-Brunswick to make application to The Legislative Assembly of New Brunswick for the enactment of a bill entitled the "Psychologists Act" In the form circulated to its

By Carole Cormier-Rioux, L. Psych, Registrar, CPNB

members, with such additions, deletions or variations as may be approved by Council, for the purposes of advancing and maintaining the standard of psychological services in the Province, governing and regulating psychological services provided to the public and providing for the welfare of members of the public and the profession.

Since April 2016, the Task Force has completed its 10<sup>th</sup> Revision of the Act, and on August 12, 2016 sent out to members both the English and French revision.

continued on p.2

## THIS MONTH'S ISSUE:

**p.2** Welcome New Members, Cover Story (continued)

**p.5** Update from Health Psychology Association

**p.10** Website Resources

**p.3** In the News, Activity Corner

**p.6** Member Spotlight

**p.4** Committee Spotlight

**p.7** The Digital World



# New Members

## LICENSED MEMBERS

Melissa Burgess Moser  
Tessa Collette  
Valérie Duguay  
Daria Ponomartchouk-Muir  
Virginie Roy Girard

## INTERIM MEMBERS

Nicole Belliveau  
Véronique Clark  
Jolaine Gallant  
Sophie Godbout-Beaulieu  
Anne-Claire Larochette  
Heather Lister  
Lorna Scott  
Christina Jones

## STUDENT MEMBERS

Meghan Beaudin  
Olivia Beaudry  
Pascale Bérubé  
Geneviève Chiasson  
Danie Jacob-Léger  
Rébecca Losier-Chiasson  
Marilyne Maltais  
Pierre Nadeau-Marchand  
Miguel Robichaud  
Vanessa Rowe  
Marianne Thériault  
Jannie Thibodeau  
Freda Burdett

## AIT MEMBERS

Ayalah Aylyn  
Chantale Daigle  
Janine Olthuis

continued from p.1

## Cover Story:

### Revision to the Psychology Act: Where are we now?

Members were also sent a compared version of this current revision, and the changes that had been made after the April 16<sup>th</sup> AGM meeting, taking into consideration all of the comments/feedback/questions raised at the meeting, and subsequently, taking into consideration the retroaction received by email from members.

Since then, the Task Force has been able to indicate target dates in order to be able to file with the fall session of the private legislation.

- On August 9<sup>th</sup>, 2016, the translation of the Act was completed.
- August 12<sup>th</sup>: CPNB sent the updated English and French versions to Members of the College, the summaries for both of these Acts, and the compared version of the current Act and the one circulated to members for the AGM.
- August 31<sup>st</sup>: Forums were held with the membership, the Task Force

members, and legal representatives.

- August 31<sup>st</sup>: Circulation of the Act to stakeholders.
- September 1<sup>st</sup>: Publication in newspaper for 3 weeks. As per required in private legislation.
- September 7<sup>th</sup>: Forums held with membership, the Task Force members, and legal representatives.
- Parallel work continued with an MLA to sponsor our Act and present Bill to legislation.
- Consultation with Department of Health was held.

Again, I would like to extend much appreciation to individuals who have participated:

Dr. Mary Ann Campbell  
Dr. Douglas French  
Art Lamrock  
Hélène Ouellette  
Dr. William B. Morrison  
Dr. Jeffrey Landine  
Jean-Robert Roussel  
Carole Cormier-Rioux

Mandy MacLean  
Renée Turner

Many thanks to the individuals who also contributed to the revision of the Act, through consultations, for the purposes of advancing and maintaining the standard of psychological services in the Province:

Offa Gaudet, Adéline Gibbs, Marie-Thérèse Fournier, Dr. Yves Turgeon, and Camille Martin, who remain key resources. And also to members of organizations (national and provincial) and legislative consultants.



# In the News

## Bill C-14 Medical Assistance in Dying

As you may know, CPA presented to the House of Commons Standing Committee on Justice and Human Rights on Bill C-14 on April 29<sup>th</sup>. The submission made three recommendations summarized as follows:

1. Health providers like psychologists should be exempt from 241(1) (a) of counselling a person to die by suicide if they are assessing or counselling a person about an end of life decision
2. “Counselling” a person to die by suicide be replaced with “Persuades or encourages”
3. A safeguard be added to 241.2 to ensure that in the event a grievous and irremediable medical condition is accompanied by a concomitant psychological or cognitive disorder, the capacity to give consent be assessed by a regulated health provider whose scope of practice includes the assessment of cognitive and/or psychological conditions.

The submission can be found at

<http://www.cpa.ca/docs/File/Government%20Relations/Bill%20C14%20submission%20April%2028FINAL.pdf> and  
<https://www.youtube.com/user/CPAVideoChannel>

As you also may know, the Bill passed third reading in the House of Commons. It appears that one of the amendments made to the Bill included the first of CPA’s recommendations. Psychologists are now specifically named in the Bill. Under 241(1) (5.1) psychologists are exempt from 241(1) if they provide information to a person on the lawful provision of medical assistance in dying. In other words, the activity of psychologists described under 241 (1) (5.1) will not be considered counselling or aiding a person to die by suicide. The Bill <http://www.parl.gc.ca/HousePublications/Publication.aspx?Language=E&Mode=1&DocId=8309978> now goes to the Senate for review and consideration where it is possible they will recommend further amendments back to the House of Commons.

Under the leadership of Sam Mikail, CPA has a task force on end of life. The task force is charged with developing a position to recommend for approval to CPA’s Board about whether psychological disorders could be grievous and irremediable, how capacity to give consent to an end of life decision should be assessed, what would be the role of psychologists in assessing capacity, what gaps in service and support need to be filled for persons facing end of life.

## activityCORNER

### RESOURCES REVIEW: Indigo Dreams CDs and Books

By Dr. Angela Burbridge, Licensed Psychologist [www.saintjohnpsychologist.ca](http://www.saintjohnpsychologist.ca)

When working with children and families, it is sometimes challenging finding helpful resources to bridge the gap between in-session and at-home practice. Indigo Dreams is a series of CDs and books created by author Lori Lite, and can be a valuable resource for clinicians working with children ages 6 to 12. With titles such as “Angry Octopus”, “Bubble Riding”, “Sea Otter Cover”, and “Affirmation Weaver”, the books are immediately engaging. Inside, you’ll find colorful illustrations, and a story that delightfully follows a character as he learns to use a specific coping skill. The stories are simple, yet the descriptions of *how* to practice skills such as breathing, relaxation, visualization, and positive self-talk is clear. There is also an available CD, which provides an audio version of the books, and can be used either as a stand alone or in conjunction with the books. In the clinic setting, Indigo Dreams can be a helpful way to introduce skills to children in a friendly and interesting manner. Perhaps more valuable is the link between clinic and home that the books can provide. At home, children and families can engage with the stories and continue practicing skills. If you primarily work with teens, then there is a teen version of the CD. Overall, Indigo Dreams CDs and books can be a valuable resource for clinicians and families alike.





# Update from Health Psychology Association

By: Jean-Robert Roussel, President NBHPA

I wish to thank the Professional Affairs Committee for this opportunity to write a few words regarding the New Brunswick Health Psychology Association (NBHPA). The consolidation began in 2012. Coinciding with the Moncton AGM (2012), a group of psychologists and students got together to discuss possibilities for members of the CPNB to form a group to promote health psychology and provide a networking opportunity for those interested. Dr. Doug French and I came up with the idea to verify if there was interest with CPNB members on such an initiative. During this first meeting, the message was clear that an interest was present (approximately 22 participants). At this meeting, it was clear in the discussions that everyone recognized the emergence of health psychology in North America and that the psychologists in our province had to take a leadership role for the population of New Brunswick. Since this meeting, the importance of our role (as a psychologist) with the changes in the health system toward individual awareness, of the involvement required in order to take control of their health, has been raised to a level similar to the primary health care services. The process of empowerment and interdisciplinary work are crucial aspects now well recognized in primary health care in North America.

Since this initial meeting, the first steps completed by the group were to create a separate association from CPNB but always working in collaboration with the latter. Several meetings therefore enabled us to create the foundation for the association such as the regulations and objectives. We now have a Facebook page which remains under construction at this time and we are working on the creation of a website.

Another project that we are still working on achieving is holding a conference/training in health psychology in New Brunswick.

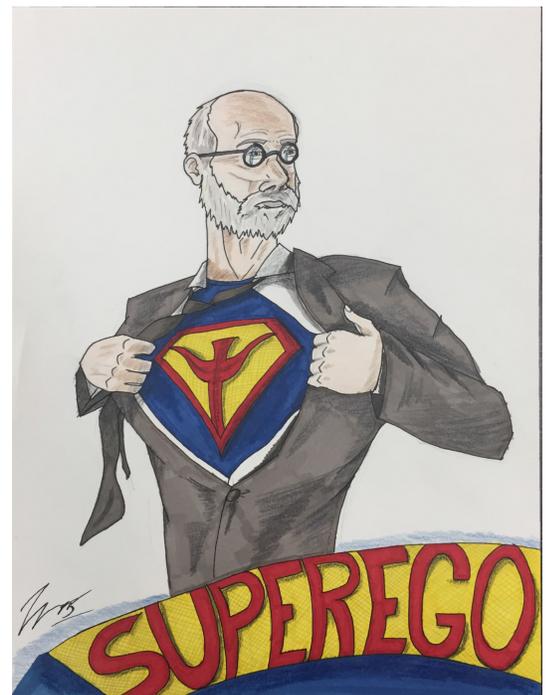
Our main objective is now to recruit members to support all of the projects. With the Facebook page and eventually the website, this will enable us to have a greater visibility for the decision makers in the province, the members and for the public in general. In addition, this will promote networking between members. Do not hesitate to contact us and give us your support by becoming a member.

I would like to take this opportunity to thank all the members of our association for your support and to past and present members who have worked hard on our mission.

The current members of the Executive Committee are: Lise Godbout (President-Elect), Raphaël Mignault-Laplante (Member), Graeme Dyck (Member), Kristina Hobson (Member), Pascale Bérubé (Student Member), Jean-Robert Roussel (President/Treasurer).

I invite all those who have an interest in our association to join us and visit our Facebook page (Nbhpa Apsnb).

I wish to take this opportunity to emphasize the excellent work on this CPNB newsletter. Thank you!





# Member Spotlight

By Mandy McLean, Director of Professional Affairs, CPNB

## An Interview with CPNB's new President, Jeff Landine

I had the opportunity to speak with CPNB President, Jeffrey Landine. His answers to my questions give us some insight into the work and life of this psychologist.

### ***I asked Jeff to talk briefly about his education background and his past and current work experiences:***

I started to pursue a career as a psychologist after taking a few years away from school post high school. While living in Alberta, I came in contact with a psychologist working with children in the Pacific Northwest and was totally fascinated with the work that he was doing. I decided at that point that I was going to return to Fredericton and go into Psychology at UNB. While I enjoyed my time at Keirstead Hall completing my Honours degree, by the end of the degree I was faced with the reality that to become a psychologist I would need to continue my studies for an additional 5-7 years. I wanted to start working with children so I took my minors in English and History and applied to St. Thomas to become a teacher. I worked for 10 years in the school systems in Labrador and New Brunswick and during that time I also came back to UNB to complete a Masters in Education specializing in Counselling. In 1999, I was offered the opportunity to work in the Faculty of Education at UNB as a Faculty Associate for two years. During that time I came to love the autonomy and variety of the work in a university faculty and decided to pursue my doctorate in hopes of, at some point, becoming a professor. I was accepted into the Ed.D. program at the Ontario Institute for Studies in Education at the University of Toronto. Although the program was in Counselling Psychology, I knew that without a Ph.D. in this area I would be unable to pursue a license as a Psychologist, so at Christmas of my first year, I transferred into the Ph.D. program in Counselling Psychology.

As part of the program I completed a practicum at the Child and Youth Mental Health Clinic, Scarborough Hospital, and then at the end of my two-year residency I completed a 2000-hour internship, split between the Scarborough Hospital ADHD Clinic, Research and Training Institute and UNB's Counselling Services. After completing my degree in 2008 (and working at UNB's Counselling Services for five years) I was successful in applying for a faculty position working in the Counselling program at UNB. During this time, I also completed 1600 hours of supervised practice with Dr. Bill Morrison and in 2014 I was successful in attaining my license as a psychologist. It seems like a round-about route to get to the occupation I aspired to back in 1984, but the journey has been a positive one throughout.

### ***I asked Jeff to describe some of his professional and personal areas of interest:***

While I got into the field of psychology as a means to helping children and youth who were struggling, through my various experiences in education and work I have come to also enjoy working with adults, in particular males, and with couples. I spend one day each week seeing clients in a part-time practice in downtown Fredericton and the work I do there helps me to stay in touch with the practical world of counselling and psychology. My research interests at the university are largely in the area of career development and employability so I also engage in some career counselling and assessment in my professional role.

### ***When I asked him about his goals for his term as President, he offered the following:***

As my professional academic work straddles the world's of counseling and psychology, I am regularly reminded of how

difficult it is for the general public to differentiate psychologists from psychiatrists, social workers and counsellors.

One of my goals for my term is to continue the work of making the public more aware of the unique skills that psychologists possess and the essential role that we play in the field of mental health. In keeping with this objective, one of the most significant accomplishments we will achieve this year will be the passing of our updated Act.

### ***Finally, I asked what motivates him to do "service work" (like serving on Council for CPNB)?***

This is an interesting question, as I hadn't given this much thought in the past. Service work is just something that I did, to some extent as a course of habit. I enjoy working with people and on teams so joining a council or board or association has always resulted in my being able to meet and work with new and interesting people. Service is a significant motivator for me, however, and this is evident in my motivation to teach and counsel and my overall approach to work and life. I believe that we make the most of our lives by helping others.

### ***Is there anything else to add that you would like to let members know?***

I would like our members to know that I take pride in being a member of this college and that I will be working towards seeing the College of Psychologists in NB maintain the high status we currently hold in the mental health community. I would encourage all members to consider pitching in to help achieve this goal by getting involved in mentorship roles, some of the new committees that have been formed, or offering to serve on council.

# The Digital World

## Assessment – The Emerging Digital Trend

By Dr. Angela Burbridge, Licensed Psychologist [www.saintjohnpsychologist.ca](http://www.saintjohnpsychologist.ca)

As psychologists, we become adept at multi-tasking during test administration – pencil in one hand, stop watch in another, as we attend carefully to the examinee and quickly scan the protocol and jot down responses – all the while considering reversal rules, discontinue criterion, 2-point versus 1 point answers, and more. Indeed, many of us were trained in what may be becoming the “traditional” form of test administration. There is a growing trend to move psychological testing towards computer administration and online environments. Perhaps surprisingly, this trend extends beyond the standard self-report questionnaire to more advanced testing, such as cognitive and academic testing. One such platform, Q-interactive, is offered by Pearson. Considering this growing area of psychological testing, it’s worth taking a closer look.



### What is Q-Interactive?

At the most basic level, Q-interactive is a digital system (which includes an online website as well as a tablet application called “Assess”) that allows you to administer psychological tests via two tablets, specifically two iPads, that communicate with each other. Users first visit the Q-interactive website from any computer or tablet device and input basic client information. The user then selects the desired test battery and downloads the information to one of the iPads. There is some configuration required in order to properly set up the two iPads – one as an examiner iPad and the other as an examinee iPad. Even this self-proclaimed computer savvy Psychologist had to connect with tech support for help, but overall the experience was seamless. Now, let’s review some of the main factors to consider when reviewing a digital platform such as Q-interactive.

**Cost** – Whether you work in private practice or the public system, the bottom line usually comes down to cost. Pearson offers a free 30 day trial for Q-interactive, but after that there is an annual subscription fee should you wish to continue the service. The annual fee ranges from \$250 to \$350 for an individual license depending on the number of tests to which you want access. In addition to an annual fee, there are individual fees associated with each test. Some tests have individual subtest fees (\$1.75/subtest), while other tests are priced as a whole (\$5.25/test). The final cost comes with the purchase of additional material needed to administer the test (e.g., Wechsler standard blocks, response booklets).

The largest expense of Q-interactive comes with the purchase of the hardware required for administration. You are required to use two iPads, and these can not be substituted for laptops or other tablets. According to Pearson, Q-interactive can successfully operate on iPad 2 or newer, including the iPad mini (which can be used only for the examiner’s device) and iPad Air. In case you’re not familiar with Apple jargon, let me break that down into numbers for you. At the most economical level, you’ll need to purchase an iPad mini for the examiner’s device at a cost of about \$365, plus an additional, slightly larger, iPad Air 2 for the examinee, at a cost of about \$500. If you already own an iPad, then be sure to check Pearson’s website to see if yours is already compatible. To sum it up, your start up cost for access to three different tests would be about \$1165, with additional fees associated with additional test access.

Now, you’re probably thinking that this is a fairly large start-up cost just to use a digital platform to administer psychological tests. And yes, that is certainly true. However, for a clinician wishing to expand their current repertoire of tests, or for the clinician purchasing multiple tests at once, Q-interactive becomes an extremely affordable choice. Consider, for instance, the purchase of two common tests – the WAIS-IV and WIAT-III (available on Q-interactive in August). The purchase cost of these tests would total about \$3500 for the standard materials, including protocols, response booklets, etc. Add a couple more tests to that order, and your costs quickly skyrocket. Suddenly, that initial Q-interactive start-up cost doesn’t seem so bad!

**Test Availability** – Considering the initial start-up cost, are there enough tests available via Q-interactive to make it worthwhile? It all depends on which tests you may use most frequently. Currently, there are 15 available tests. This includes the popular Wechsler cognitive tests, memory tests, and a few common neuropsychological tests. There is currently an achievement test available, and the WIAT-III is scheduled for release in August. Overall, Q-interactive offers many tests that are standard choices in psychological assessment, with more tests on the horizon.

**Ease of Use** – Depending on your comfort level with technology, this could go either way. Personally, I found Q-interactive fairly easy to navigate once I took some time to become familiar with the platform. During administration, the platform automatically suggests appropriate start points, and prompts you with discontinue criterion are met. There is a built in timer, responses choices are easily selected on the screen, and all verbal responses are automatically recorded. But don't worry, the Psychologist is still a necessary part of the process. You are in control of what the examinee sees on their iPad, scoring responses, and ultimately choosing start points and whether you want to discontinue or test the limits. Your own notes are easily recorded on the iPad screen, although this process can be rather cumbersome compared to pen and paper.

For those not entirely comfortable with technology, there would likely be a steep learning curve, and you might never adapt your comfort level to digital administration. I'll admit, I missed having the paper protocol in front of me, and sometimes felt a bit displaced not being able to see how many questions were left in a subtest, or even which subtests had or hadn't been administered yet. While this information can quickly be viewed through the platform, it takes you out of the testing mode, and therefore isn't easily obtained during subtest administration without interrupting the testing process.

**Data Security** – Q-interactive data is stored in a cloud. Don't panic – it's a digital cloud and not the big, white fluffy kind. This means that data is saved on secure servers owned by Pearson and located in the Toronto area, while back-up data is housed in Vancouver. The important thing here is that your data is stored in Canada. The Q-interactive app on your iPad requires a username and password to access.



**Efficiency** – For some, Q-interactive will be incredibly efficient. It automatically calculates raw scores and standard scores. Once you finish a subtest administration, you immediately see standard scores. At the end of an entire battery, you have the option to view immediate results. What's more, during testing you can easily flag items to review later. Upon review, you can listen to the recorded audio response for each individual question, and revise scores as needed.

When it comes to scoring (e.g., discrepancy analyses) and interpretation that might require you to consult a manual, the Q-interactive platform may quickly become inefficient. Pearson provides online versions of testing manuals that can neither be downloaded to your computer nor printed. Compared to hard copies, online versions of manuals can often be more difficult to navigate and thus more time consuming. There's no simple way to bookmark a page or table, or flip easily between pages. This disadvantage can certainly make the process more cumbersome.

**Standardization** – This point is, of course, of utmost importance to us as Psychologists. Currently, the majority of our psychological tests are standardized based on pen and paper administration. How can we be sure that the same norms apply to tests administered using a digital platform? Currently, there are several equivalency studies available on the Q-interactive website. These studies, conducted by Pearson, suggest that test scores obtained through Q-interactive are interchangeable with test scores obtained through pen and paper administration. You can visit the Q-interactive website and select the research link to access these studies.

In sum, platforms such as Q-interactive pose an exciting advance in psychological testing. Depending on the individual user, this may be an economical option with several advantages. However, platforms such as Q-interactive have inherent disadvantages which may discourage some users. In the end, our individual differences will determine whether platforms such as Q-interactive are right for us. Visit [www.HelloQ.ca](http://www.HelloQ.ca) and decide for yourself!

# The Digital World



## Web-Based Platforms for Psychological Assessment

By: Graeme Dyck, Licensed Psychologist [www.resiliencepsych.ca](http://www.resiliencepsych.ca)

As a psychologist new to private practice in 2015, I encountered a problem I had never experienced before in my professional life. I needed access to a “whack” of psychometric tests. And because I’m a bit of a tech junky, I wanted them digitally. As a start-up business, money was tight and efficiency was crucial. I also felt a lot of pressure to find inexpensive measures that could yield rich clinical data.

I must confess, I had been spoiled for more than 15 years as a prison psychologist, with unfettered access to a relatively contemporary testing library and provided with administrative support to score all kinds of psychometric tests. So my foray into the domain of psychometric testing last year was an intriguing (albeit slightly intimidating) adventure.

As you might imagine, I had many questions on my mind: How can I keep my costs low, yet my inventory high? Who can supply the tests that I need? How quickly can I purchase and receive access? What options do I have for offering testing on a computer or tablet? Can I provide clients with remote access from the comfort of their own home or at a local library? Who offers the most convenient digital platform for one-stop shopping? In my pursuit of answers I arrived at several conclusions. Here are some the things I learned:

- Web-based applications are usually cheaper and easier to administer than traditional pen-and-pencil methods. Most importantly, results are received much faster and can be stored electronically.
- There are many companies that supply web-based testing applications. Those companies among the leaders of web-based assessment platforms are: Pearson ([www.pearsonclinical.ca](http://www.pearsonclinical.ca)), Multi-Health Systems ([www.mhs.com](http://www.mhs.com)) and PAR ([www4.parinc.com](http://www4.parinc.com)).
- In terms of cost, convenience and accessibility, there is no clear winner. Each company has a different inventory of tests and a slightly different platform. There are costs and benefits to working with each, and the platforms are typically easy to navigate. What they have in common is this: ordering, administering and scoring is always completed on-line.
- Each company’s web-based test inventory is smaller than their paper-and-pencil inventory, which makes sense given the limitations of web-based administration for some kinds of tests (i.e. neuropsychological). Web-based testing inventories for the companies named above can be found at:  
[www.pearsonassess.ca/static/q-global/content.htm](http://www.pearsonassess.ca/static/q-global/content.htm)  
[www.mhs.com/infocenter.aspx?gr=mhs&prod=service&id=AssessmentsAvailable](http://www.mhs.com/infocenter.aspx?gr=mhs&prod=service&id=AssessmentsAvailable)  
[www4.parinc.com/PARiConnect/default.aspx](http://www4.parinc.com/PARiConnect/default.aspx)
- Ordering tests has become extremely simple and efficient. As long as you are authorized to use assessments in accordance with your training qualifications (which requires a brief application and authorization process), your tests are usually available within minutes of ordering them on-line.

- Each company has its own test purchasing and administration rules. Whereas some companies require you to purchase a bundle of scoring forms and interpretation reports (i.e. PAR requires you to purchase tests in minimum quantities of 5), others sell them individually (i.e. Pearson and MHS sell tests on a per use basis). Some companies also price administrations and reports separately (i.e. PAR), whereas others provide a “bundle” price that includes the administration and report (Pearson and MHS).
- Some companies require an annual user fee for access to their digital platform (i.e. Q-Global with Pearson, \$115 annual fee), while others require no fee at all (PARiconnect with PAR; MHS On -Line with MHS).
- Each company has different methods of showing purchases, available report uses, and completed measures.
- Each company has the ability to send questionnaires remotely if you wish. The clinician typically sends the link (or authorizes the link to be sent) to the respondent (i.e. student, teacher or client) by e-mail, where it can be completed by anyone with an internet connection. Notification is sent to the clinician when the test is complete.
- A great feature of all web-based testing is “automatic backup”. If a testing session is suddenly terminated or if the connection lost, information is immediately saved and the respondent can resume at the very next question after logging back in.
- Test results are available immediately in PDF formats that can be saved to your hard drive and/or printed. However, if you don't want to save a report, be aware that viewing time expires with some companies (which allows them to purge data that is clogging their system).
- Although availability tends to be greater for tests that use questionnaire formats, some companies (like Pearson) are also incorporating the use of tablets (their platform is called Q-interactive) into neuropsychological and intellectual testing.

In a nutshell, there are many great reasons to explore web-based platforms for psychometric testing. Becoming familiar with this approach has definitely made my work more cost-effective, efficient and organized. Clients appear to appreciate the ease of use as well, through the off-site/on-line scoring capabilities. But perhaps most importantly, the technology allows me to spend more time delivering services than dealing with administration. And who wouldn't want that in their private practice!

## *Hey SIGMUND* Website Resources

By Suzanne Durepos, L. Psych, Private Practice

The website is called, Hey Sigmund. <http://www.heyigmund.com/>

The website description reads... “Because sometimes the only diagnosis is ‘**human**’.”

“Every day there are stunning new insights into the human mind and the way we work, love, play, behave, relate, think and feel. We are learning more and more about what it means to be human, and how to master the art. Now more than ever, anybody who is any version of human has something to gain from the science of psychology. This website contains the latest research and news in psychology. It attempts to bring psychology into the mainstream, unfolding the brilliance that happens within the scientific realm. We will explain what it all means and why it matters.”

The author of the website, Karen Young, “has worked as a psychologist in private practice, in organisational settings, lectured and has extensive experience in the facilitation of personal growth groups. Her Honours degree in Psychology and Masters in Gestalt Therapy have come in handy at times. She has had her work published on various international sites including The Good Men Project, The Huffington Post UK, The Mighty, Your Tango, Yahoo Health and Thought Catalog. She has also been a regular contributor to Parenting Magazine in New Zealand.”

## Invitation to Participate in the "Characteristics of Counseling Psychology in Canada and Canada Counseling Psychologists" Survey

Dr. Robinder (Rob) Bedi and Kesha Pradhan from the University of British Columbia are conducting a survey to gain knowledge about Canadian counselling psychologists' understanding and practice of counselling psychology in Canada. The results of this study will educate others about the nature and practice of Canadian counselling psychology, bringing a broader awareness of the profession and serving as a springboard for ideas about ways in which the field is meeting the unique sociocultural and sociopolitical needs of the Canadian population.

**Who is eligible?** Canadian counselling psychologists who are ***not*** members of the Counselling Psychology Section of the Canadian Psychological Association

**How long will it take?** 20 minutes

**What's in it for me?** \$20 Tim Horton's electronic gift card delivered by e-mail

Please copy, type, or follow the link below for the informed consent and the electronic survey.

<https://survey.ubc.ca/s/2016-Canadian-Counselling-Psychologists-Survey-Informed-Consent/>

Please note that due to funding constraints, only the first 167 individuals will be eligible for the honorarium. As such, we encourage you to respond as soon as you are able.

We realize that most people are extremely busy but we sincerely hope that you can take the time to help us collect empirical data to characterize the profession and discipline of counselling psychology in Canada. Thank you for your time and consideration.

*If there are other Canadian counselling psychologists that you believe would be interested in completing this survey, we would greatly appreciate if you could pass on this information or the survey link.*

If you have any questions or comments, please contact the researchers. Dr. Bedi may be reached at [604-822-4185](tel:604-822-4185), and Kesha Pradhan may be reached at [778-999-3154](tel:778-999-3154). You can also contact the researchers at [Bedi.ResearchLab@ubc.ca](mailto:Bedi.ResearchLab@ubc.ca)



### UpcomingEVENTS

November 29, 2016

Ethical Dilemma Case Study Teleconference (French)

11:30am to 12:15pm



If you have a story  
or suggestions for  
future articles we'd  
like to hear from you.

Contact Mandy McLean at 506-382-6748 or  
[mandy.mclean@bellaliant.com](mailto:mandy.mclean@bellaliant.com)

**talkBACK**

If you would like to participate in one of our committees, contribute to the ethical dilemma teleconference, join our peer support ethics network or more, please contact us! We'd LOVE your feedback! If you have any ideas, comments or suggestions regarding this newsletter or any CPNB initiatives, please let us know. Your voice counts!