

RESOLVED COMPLAINTS

posting as per SCPs Regulatory Bylaws June 2016, Sections 5(4)(5)

2016-005

A complaint was received on July 18, 2016. The complainant alleged that the member refused to provide a copy of brain mapping images as requested by the complainant.

The member sent a copy of this report to the complainant and the complainant confirmed that he was satisfied that he received the documents requested. File closed January 6, 2017.

2016-008

A complaint was received by the College on September 24, 2016. The letter of complaint allegations against the member relating to:

- disclosure of information
- informed consent
- conduct
- objectivity
- fitness to practice

A letter was written by the PCC to the complainant requesting the submission of evidence that corroborates the allegations. No response was received from the complainant. File closed November 25, 2016.

2017-002

A complaint was received by the College on January 19, 2017. The complaint indicated:

- the complainant did not receive the assistance they felt they should have with changing their medication, and accessing disability benefits
- the complainant was unsatisfied with the services provided
- the complainant wishes to continue receiving services from the member

The complaint was found to not meet the criteria for professional misconduct and/or professional incompetence. File closed February 10, 2017.

2016-011

A complaint was received by the College on November 16, 2016. The complaint alleged:

- the member failed to seek clarification of background information used in the establishment of custody recommendations,
- the member indicated to the complainant he/she did not have enough information to make an evaluation, the member failed to investigate new allegations made by the complainant regarding emotional and psychological abuse towards the children,
- the member, failed to protect the complainant's children despite having access to that new information, and having acknowledged that alienation had occurred, and

- the complainant questioned the validity of the assessment report.

After consideration of all evidence before it, the Professional Conduct Committee was unable to find sufficient support for a charge of professional misconduct or professional incompetence. File closed March 10, 2017.

2016-012

A complaint was received by the College on November 17, 2016. The complaint alleged:

- the member did not consider supporting evidence provided by the complainant for the report done by the member
- the complainant disagrees with the findings in the report
- as per the complainant, the report written by the member led to the complainant not having access to his/her children for two years
- as per the complainant, the insufficiency of the member's report was a significant factor in prolonging the emotional pain that the complainant and his/her children reportedly experienced.

The evidence before the PCC was not sufficient to support a charge of professional misconduct or incompetence. File closed March 10, 2017

2016-016

A complaint was received by the College on December 21, 2016. The complaint alleged the member:

- did not obtain proper legal consent
- did not readily provide a reason for complainant's visit
- did not conduct any testing to provide the conclusions in report
- breached confidentiality
- did not provide evidence of training or credentials in post-concussion
- made assumptions and conclusions which complainant did not agree with
- disregarded the medical documentation provided

After consideration of all evidence before it, the Professional Conduct Committee was unable to find sufficient support for a charge of professional misconduct or professional incompetence. File closed April 5, 2017.

2016-013

A complaint was received by the College on December 21, 2016. The complaint:

- questioned the training and job description of the member.
- alleged a psychological assessment took place without consent.
- alleged the member communicated assessment information without permission.

After consideration of all evidence before it, the Professional Conduct Committee was unable to find sufficient support for a charge of professional misconduct or professional incompetence. File closed May 5, 2017.

2015-002 (ADR)

A complaint was received by the College on April 27, 2015. The complaint reported:

- The member conducted therapeutic sessions while registered as being on leave.
- The member worked actively worked for employers as a psychologist while continuing to be listed on the College Registry as “on leave”.
- The member’s registration required that the work be supervised; concern that not all work was supervised.
- The member received payment from the client; since the member was technically “on leave” the client was not eligible to be reimbursed for the payment.
- Concerns regarding member’s use of electronic means to deliver therapeutic services.
- Concerns regarding matters such as confidentiality, record keeping, health record maintenance and storage, among others, when member was delivering psychological services while on leave.

The member agreed to Alternative Dispute Resolution (ADR) and completed all aspects of the ADR in May 2017. Details of the ADR will not be posted as the ADR agreement was signed before the new bylaws came into effect. File closed June 23, 2017.

2016-014

A complaint was received by the College on December 8, 2016. The complaint alleged:

- The member lacked knowledge and understanding of sexual abuse, and as such did not: pursue the reasons for the child’s distress, consult with other professionals who had been involved with the child, consider the child’s noted behaviours, or follow the mandated protocol for reporting.
- The member’s report included serious deficiencies; the conclusions and recommendations made were not supported by evidence.
- The member lacked competence in interviewing and assessment in this specialized area.
- The member established conclusions beyond the scope of their knowledge and competence.
- The member failed to take into account relevant information regarding the accused or to address the issue of the potential for re-victimization.
- Recommendations made to the Court were based on false and fabricated information.
- The member did not use ethical or professional practice in their communication with both parties.

The evidence available to the PCC was not sufficient to support a charge of professional misconduct and/or professional incompetence. File closed June 23, 2017.

2017-001

A complaint was received by the College on January 9, 2017. The complaint alleged:

- A member who is a manager in a service agency, denied or failed to authorize the use by another therapist of Cognitive Behavioural Therapy (CBT) with a client.
- As a result, the client did not receive the CBT prescribed.

The evidence before the PCC did not support a charge of professional misconduct and/or professional incompetence. File closed June 23, 2017.

2016-015

A complaint was received by the College on December 21, 2016. The complaint alleged:

- The report created by the member was inappropriately labelled.
- The report was biased, inaccurate, and misleading and was based on personal opinion and unsubstantiated accusations, and, did not provide an accurate diagnosis.
- The member gave the complainant inappropriate medical advice which the complainant was told could be construed as both dangerous and misleading.

The evidence before the Professional Conduct Committee was not sufficient to support charges of professional misconduct and/or professional incompetence. File closed September 29, 2017.

2017-007

A complaint was received by the College on May 8, 2017. The complaint alleged:

- The member was given access to the complainant's medical information without complainant's knowledge or consent.
- The member contacted complainant's doctor and stated that the doctor should not take complainant's allegations seriously as complainant was known to make unfounded allegations.
- The member indicated to WCB that he/she worked as a company psychologist.
- The member threatened the complainant's job if he/she reported the company to Occupational Health & Safety.

The evidence before the Professional Conduct Committee was not sufficient to support a charge of professional misconduct and/or professional incompetence. File closed September 29, 2017.

2016-006 (ADR)

A complaint against Dr. Jason Peebles, Registered Doctoral Psychologist, was received by the College on August 26, 2016. The complaint alleged:

- Dr. Peebles' role in the complainant's care was not made clear at the outset of services and therefore could not be consented to or refused; the complainant was unaware of Dr. Peeble's involvement until the employee file was accessed by the complainant. On the file it was noted that Dr. Peebles had written clinical notes,

provided information to the employer, and had arrived at clinical conclusions about the complainant after having only seen the complainant on one occasion.

- Dr. Peebles shared information about the complainant after the expiration date of the complainant's consent to release information.
- Dr. Peebles' work and actions did not follow the practice guidelines set out by the Saskatchewan College of Psychologists.

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Both the complainant and Dr. Peebles agreed to Alternative Dispute Resolution (ADR). Dr. Peebles agreed to incorporate as standard practise into the informed consent process he engages in with clients, and documentation related to informed consent that he provides clients, clarification about his role as an occupational health consultant, clarification that he does not provide direct treatment in this role, and, discussion to ensure understanding with respect to services provided by the primary service provider vs. the occupational health consultant. Dr. Peebles completed the ADR in October 2017. File closed October 20, 2017.

2017-008

A complaint was received by the College on June 6, 2017. The complaint alleged:

- The member disclosed private information to the complainant's employer without consent to do so.
- The member mislead the complainant as to the reason the complainant was seeing the member.
- The member provided recommendations for treatment to complainant's employer and did not involve complainant in the process. The recommendations also did not consider the complainant's recent treatment efforts.
- The member did not treat complainant in a respectful manner during sessions.

The evidence before the Professional Conduct Committee was not sufficient to support a charge of professional misconduct and/or professional incompetence. File closed November 24, 2017.

2017-011

A complaint was received by the College on July 14, 2017. The complaint alleged:

- The member did not request the complainant's version of their rehabilitation history.
- The member made false allegations and statements in the assessment report.
- The member did not share with the complainant the results of their psychological assessment.
- The complainant was concerned about the member's conclusions
- The complainant was concerned about the fees for the psychological assessment.

The evidence before the Professional Conduct Committee was not sufficient to support a charge of professional misconduct and/or professional incompetence. File closed November 24, 2017.

2017-013

A complaint was received by the College on September 6, 2017. The complaint alleged:

- The member concluded that the complainant did not have a concussion despite reports from the referencing team citing post-concussion issues.
- Complainant believes that the member's report shows a lack of understanding of best practices for the assessment of individuals with concussions.
- The complainant believes that their acceptance into an international brain injury study is evidence that the member failed to accurately diagnose the complainant with having a concussion.
- The member was "ethically unprofessional" in referencing other professionals and in blatantly disagreeing with their conclusions, despite the area of practice being "outside" the member's claimed scope of practice.

The evidence before the Professional Conduct Committee was not sufficient to support a charge of professional misconduct and/or professional incompetence. File closed January 5, 2018.

2017-014

A complaint was received by the College on October 30, 2017. The complaint alleged:

- Conflict of interest – That the member worked with the complainant's ex-spouse and that the member has a conflict of interest as they have an office in the same building as ex-spouse's lawyer.
- Bias in counselling – the complainant holds the belief that there was a conflict of interest as noted in #1 and as such a bias existed in the counselling services that the member provided to complainant's children.
- Excessive fees – The member provided a bill for preparing and copying counselling notes which the complainant felt should not be billed for. The bill also included a charge for consultation with a colleague in anticipation of being called as a witness at a trial which did not occur and was not requested by the complainant. Billing was alleged to be excessive.
- Accuracy of documentation – The complainant questioned if counselling notes were maintained during the course of treatment or rather were they prepared as late entries when copies were requested.

The evidence before the Professional Conduct Committee was not sufficient to support a charge of professional misconduct and/or professional incompetence. File closed February 9, 2018.

2018-001

A complaint was received by the College on March 22, 2018. The complaint alleged:

- The client requested that the member provide him with his medical records in full including test scores and questions that were asked during his mental health assessment by the member.
- The client questioned if a wrongful or improper diagnosis occurred as a result of the assessment that was conducted by the member.
- The client questioned the sufficiency of the procedure utilized for the assessment conducted by the member.

The evidence before the Professional Conduct Committee was not sufficient to support a charge of professional misconduct and/or professional incompetence. File closed June 8, 2018.

2017-003

A complaint was received by the College on February 6, 2017. The complaint alleged:

- The member had a duty to inform others of the potential risk posed by his client, and failed to take necessary steps to warn and protect after obtaining information from his client.
- The member's actions were unethical and were of a serious nature and caused serious harm to others.
- The member did not follow the guidelines of ethics and practice required of members of the College.
- The member failed to show reasonable caring, responsibility to society or to demonstrate integrity in his actions as a professional -

The evidence before the Professional Conduct Committee was not sufficient to support a charge of professional misconduct and/or professional incompetence. File closed September 28, 2018.

2018-003

A complaint was received by the College on May 25, 2018. The complaint alleged:

- The member rescinded an earlier offer of 6 basic counselling sessions (to fulfill the requirement of the employer), and demanded that the client say what the member wanted to hear.
- The member yelled at the client in a manner which the client found to be coercive, manipulative, and disrespectful.
- The member lied when explaining the reason that he/she appeared to be yelling at the client and stated that it was because of a hearing impediment.

The evidence before the Professional Conduct Committee was not sufficient to support a charge of professional misconduct and/or professional incompetence. File closed October 26, 2018.

2018-010

A complaint was received by the College on November 5, 2018. The complaint was in regards to an oral exam and alleged:

- The Chair was late and was unprepared for the oral exam, and offered no explanation or apology for this.
- The Panel did not adhere to the suggested timelines for the exam that are outlined in the examination handbook.
- Improper testing materials that introduced extraneous variables were employed, specifically a vignette that differed from the candidate's claimed area of psychology.
- The Chair made decisions based on improper testing materials and was unable to realize the content error. The Panel did not acknowledge the content error.
- The Chair, in a power position, modelled procedure and conduct for the panel that are not consistent with the Professional Guidelines or Canadian Code of Ethics for Psychologists.

The evidence before the Professional Conduct Committee was not sufficient to support a charge of professional misconduct and/or professional incompetence. File closed January 11, 2019.

2018-006

A complaint was received by the College on August 10, 2018. The complaint alleged that:

- The member denied a parent access to their child while the member was in session, although member was reported to have told parent that parent had the right to have access.
- The member altered some forms after they were signed by the parent.
- The member disagreed with parent's assessment of the suicide risk for child.
- The member disagreed with parent about parental alienation, and as such the parent interpreted this as the member picking sides.
- The member terminated services to child and referred child back to the school counsellor.

The evidence before the Professional Conduct Committee was not sufficient to support a charge of professional misconduct and/or professional incompetence. File closed January 11, 2019.

2017-012 (ADR)

A complaint against Dr. Mary Vandergoot, Registered Doctoral Psychologist, was received by the College on September 5, 2017. The complaint alleged:

- The process used in the psychometric assessment by Dr. Vandergoot did not include a discussion of the psychometric results with the person being assessed and did not include any type of review or discussion of the conclusions and final report with the person being assessed.
- The use and interpretation of the psychometric data is not consistent and not to the standard expected within the profession.
- The assessment dismissed previous treatment information and recommendations and did not take into account the nature of PTSD when it recommended a return to work in the environment in which the trauma occurred.
- The report recommended a return to work plan that failed to consider the nature of PTSD, and the impact of returning to a workplace where violence and threat are a consistent and an ongoing part of the job.

Both the complainant and Dr. Vandergoot agreed to Alternative Dispute Resolution (ADR). ADR involved:

Considerations of the Participants:

1. The process used in the psychometric assessment by Dr. Vandergoot did not include a discussion of the psychometric results with the person being assessed and did not include any type of review or discussion of the conclusions and final report with the person being assessed.
2. The assessment dismissed previous treatment information and recommendations and did not take into account the nature of PTSD when it recommended a return to work in the environment in which the trauma occurred.

Terms of the Resolution:

The PCC proposes:

1. Dr. Vandergoot is to provide a written addendum to the original report on <Client> which advises of information that was not referenced in the original report, including information that was made available to her as a result of the complaint process. She will then send the addendum to all parties that received the original report and send an attestation to the PCC that this has been completed.
2. Dr. Vandergoot will submit an attestation (acceptable to the PCC) to the effect that she will provide sufficient evidence and explanation underlying recommendations in her mental health assessments, particularly if the diagnosis and conclusions contradicts those of other treatment providers. Furthermore, she will consult, as appropriate, with the other professionals involved with the client regarding their conclusions, diagnosis or other information relevant to the client, particularly when there is a differing diagnosis. Dr. Vandergoot's intention to do so will be clearly reflected in her current consent form, in accordance with Professional Practice Guidelines. She will submit to this consent form to the PCC.
3. Dr. Vandergoot is to submit an attestation (acceptable to PCC) that in the future, she will speak to clients about assessment results/written reports, keeping with the Saskatchewan College of Psychologists Professional Practise Guidelines.
4. Dr. Vandergoot will be responsible for all costs incurred by SCP in responding to the complaint against her. The cost has been determined to be \$1981.88 and is to be paid directly to SCP.

5. All terms of this resolution shall be completed within two months of the date endorsed.
The participants agree on the terms of the resolution which they jointly endorse.

Dr. Vandergoot completed the ADR in January 2019. File closed February 8, 2019.

2018-008

A complaint was received by the College on October 31, 2018. The complaint alleged that:

- The member did not conduct a proper and thorough assessment although it was reported that client had been through years of trauma and been exposed to domestic violence.
- The member provided only a few treatment sessions even though the client expressed emotional trauma and verbalized thoughts of wanting to stab/injure themself and others.
- The member did not respond when urgent requests for help were made by the client.

The evidence before the Professional Conduct Committee was not sufficient to support a charge of professional misconduct and/or professional incompetence. File closed February 8, 2019.

2017-010 (ADR)

A complaint against Dr. Audrey Kinzel, Registered Doctoral Psychologist, was received by the College on June 16, 2017. The complaint alleged that:

- Dr. Kinzel did not see the complainant for enough time in order to come to the conclusions made in the file sent to WCB. Furthermore that these conclusions were inaccurate and based on incomplete information.
- The complainant was asked to complete an MMPI without being given a proper explanation as to why Dr. Kinzel felt this was necessary.
- The complainant was unclear as to the rationale for the conclusions Dr. Kinzel made.
- Dr. Kinzel and the physiotherapist were working together to build a case indicating that the complainant was faking the injury.

Both the complainant and Dr. Kinzel agreed to Alternative Dispute Resolution (ADR). The ADR involved:

Considerations of the Participants:

1. Dr. Kinzel asked client to complete an MMPI2-RF without giving client a proper explanation as to why she felt this was necessary.

Terms of the Resolution:

1. As to 1) above, the PCC proposes that Dr. Kinzel create a consent form to be signed by clients indicating that the clients understand fully what services she is offering and why. The form will be reviewed by the PCC and, when approved, will be used with future clients.
2. Dr. Kinzel shall be responsible for all costs incurred by SCP and agreed to by the PCC in responding to the complaint against her. The cost has been determined to be \$5725.13 and is to be paid directly to SCP.

3. All terms of this resolution shall be completed within one month of the date endorsed.

The participants agree on the terms of the resolution which they jointly endorsed.

Dr. Kinzel completed the terms of the ADR on May 14, 2019. The file was closed on June 21, 2019.

2018-005

A complaint was received by the College on July 24, 2018. The complaint alleged that:

- The member conducted a psychological assessment and communicated assessment results for employees in a manner that contravened the the Professional Practice Guidelines for Psychologists.
- The member offered a verbal psychological diagnosis in front of the employer's Governance Committee and the Human Resources partner (representing the employer). The communication of this diagnosis breached the employee's confidentiality and the communication of the diagnosis was not discussed previously with the employee.

The evidence before the Professional Conduct Committee was not sufficient to support a charge of professional misconduct and/or professional incompetence. File closed June 21, 2019.