

# Annual Report



# 2019



NEW ZEALAND  
CHIROPRACTIC BOARD  
TE POARI KAIKOROHITI O AOTEAROA

## **Safe Chiropractic Health Care for New Zealand**

Annual report 1 April 2018 - 31 March 2019

The Chiropractic Board is pleased to present this report for the year ended 31 March 2019 to the Minister of Health.

Throughout this report:

- the Health Practitioners Competence Assurance Act 2013 is referred to as the Act
- the Chiropractic Board is referred to as the Board
- annual practising certificates are referred to as APC's



## Contents

<b>From the Chair</b>	<b>2</b>
<b>At a Glance</b>	<b>4</b>
<b>The Chiropractic Board</b>	<b>6</b>
Functions of the Board; Board meetings; Membership of the Board; Board Committees	
<b>Registrations and Annual Practising Certificates</b>	<b>10</b>
Chiropractic scope of practice; Prescribed qualifications; The register; Applications for registration; Annual practising certificates	
<b>Competence, Fitness to Practice, Health and Recertification</b>	<b>12</b>
Competence notifications; Fitness to practice and health; Continuing professional development programme; Complaints and discipline; Professional Conduct Committee; Health Practitioners Disciplinary Tribunal	
<b>HRANZ Collaboration</b>	<b>16</b>
<b>Secretariat</b>	<b>16</b>
Administration; Contact details	
<b>Financials for the Year Ended 31 March 2019</b>	<b>17</b>

## From the Chair

We are pleased to report the Board continuously works hard and is confident in its duties to ensure public safety and competence of registered Chiropractors.

### Board Membership

We are pleased to report there were no changes to Board membership this year, providing necessary stability and support, allowing the Board to continue its focus on important matters and work collaboratively and effectively as we navigated operational changes.

The Board is thankful to Ms Rachael Heslop and Mr Andrew Charnock for their interim Registrar support, guidance and management following the departure of the previous Registrar/General Manager until a replacement was secured.

Ms Glenys Sharman commenced her role as Board Registrar/General Manager on 17 December 2018. Ms Sharman's past regulatory experience and near completion of a Master of Business Administration will serve the Board well and support the Board moving forward.

At the Board's February meeting, yearly Board elections were held with myself, Dr Grace, re-elected as Chair and Ms Liz Hird re-elected as the Deputy Chair of the Board.

### Activities of Note

Strong, clear policies developed via robust, inclusive consultation processes are integral to ensuring the Board is working effectively to meet its obligations.

- The Board commenced work on a policy and re-certification programme to ensure the competence of newly registered, overseas-trained practitioners in aspects of practice and obligations specific to the health environment and Chiropractic practice in New Zealand
- The Board introduced a Disciplinary Levy Policy. For the first time, practitioner's Annual Practising Certificate (APC) fee separates out the levy to be applied to disciplinary work and is accounted separately. This was widely appreciated and accepted by Chiropractors.

The Board consulted and approved a Guidance for Chiropractors: Issuing certificates of proof of sickness or injury in relation to employment in response to the amended Holidays Act.

The Board continues to co-locate with nine other Responsible Authorities at 22 Willeston Street and focus on its advantages of greater efficiencies and collaboration while receiving back office support. The Board and Secretariat are pleased the current physical location is sound following past disruptions due to earthquake activity. The Board offices are continually monitored to ensure they meet safety standards and measures are in place to ensure safety should new events occur.

The Board continues to maintain strong relationships with its stakeholders. The existing Memorandum of Understanding agreement between the Board, the New Zealand Chiropractors' Association (NZCA) and the New Zealand College of Chiropractic (NZCC) continues to provide effective and advantageous support to meeting the Board's legislative



duties. The three parties continue to meet biannually to discuss matters of common interest. The Board has developed and maintain a strong relationship with ACC and strengthened communication has been very beneficial.

The Board has had an appointee on the Council on Chiropractic Education Australasia (CCEA) for a number of years. This body has the responsibility for inspecting, accrediting, and monitoring of chiropractic training programmes in Australasia. The Board outsources its accrediting and monitoring responsibilities to the CCEA, and continues to work closely with CCEA as they navigate new Accreditation Standards for Chiropractic Programs and Competency Standards for Graduating Chiropractors.

The Board recognises the importance of international interaction and supports engagement at this level. Engagement in this period has included attendances of Board representatives at meetings of interest such as World Federation of Chiropractic (WFC) and International Chiropractic Regulatory Collaboration (ICRC). These are invaluable events regarding global trends and policies in governance and regulation. New Zealand has, for a number of years, been at the forefront of chiropractic regulation and has continued to be involved on the international stage as chiropractic regulation and practice grows and develops at a rapid rate around the world. These organisations provide discussions on issues relevant to the protection of the public, the mobility by qualified and competent chiropractors between jurisdictions. In the coming year both the Chair and Registrar will attend the WFC, ICRC and NRAS.

## **Finances**

The Board is currently in a sound financial position. The audited financial statements are available at the rear of this report. The Board closely monitors its finances to ensure practitioner fees are used in a prudent and efficient manner to carry out the Board's responsibilities under the HPCA Act and in keeping with the manner of other boards.

## **Conclusion**

2018/2019 was a productive period with many improvements despite significant operational disruptions. The Board is satisfied with the outcomes achieved and look forward to continuing to ensure public safety and chiropractor competence for the New Zealand public.

My sincere thanks again to Ms Rachael Heslop, Andrew Charnock, Glenys Sharman and to all Board members for their dedication and invaluable input during the year. Board members' deliberations are always focused on the best interests of the health consumer and ensuring that the delivery of chiropractic in the healthcare system is of a high standard to protect the health and safety of the public of New Zealand.

Dr Kristin Grace, Chiropractor

Chair

## At a Glance

01 April 2018 - 31 March 2019

### WE GRANTED

**64** NEW REGISTRATIONS



**51** NZ GRADUATES

**9** TTMRA PATHWAY

**4** CCEA PATHWAY

### WE RECEIVED

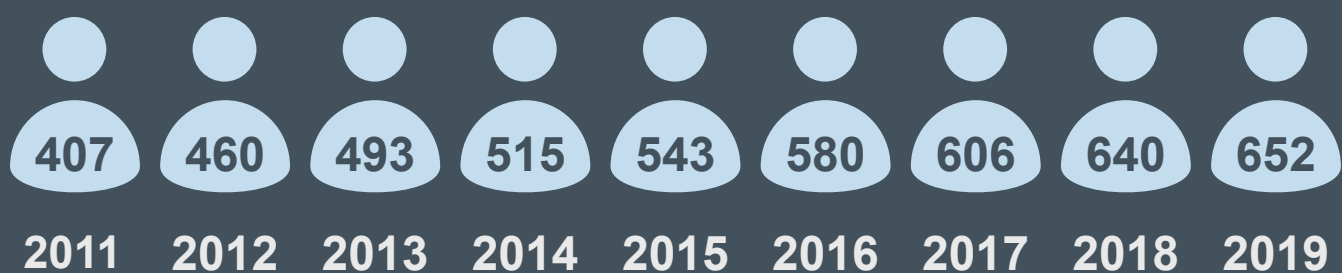
**6** NEW NOTIFICATIONS



**4** CASES OF CONDUCT

**2** CASES OF COMPETENCE

## APC NUMBERS ACROSS THE YEARS



ACROSS THE PROFESSION  
WE HAD **808** REGISTERED  
CHIROPRACTORS WITH **652**  
CHIROPRACTORS HOLDING AN  
APC

# The Chiropractic Board

The Chiropractic Board (the Board) is one of 16 New Zealand health Responsible Authorities appointed by the Minister of Health under the Health Practitioners Competence Assurance Act 2003 (the Act). The Board is responsible for the administration of the Act in respect of the chiropractic profession.

## Functions of the Board

The primary responsibility of the Board is to protect the health and safety of the New Zealand public by ensuring practitioners registered in the chiropractic profession are competent and fit to practise.

The Board has several functions defined by section 118 of the Act, which are to:

- a. prescribe required qualifications for scopes of practice within the profession, and, for that purpose, accredit and monitor educational institutions and programmes;
- b. authorise the registration of chiropractors and maintain registers;
- c. consider applications for annual practising certificates;
- d. review and promote the competence of chiropractic practitioners;
- e. recognise, accredit, and set programmes to ensure the ongoing competence of chiropractic practitioners;
- f. receive and act on information from health practitioners, employers, and the HDC about the competence of chiropractic practitioners;
- g. notify employers, the ACC, the Director-General of Health, and the HDC that the practice of a chiropractor may pose a risk of harm to the public;
- h. consider cases of chiropractors who may be unable to perform the functions required for the practice of the profession;
- i. set standards of clinical competence, cultural competence, and ethical conduct to be observed by the profession;
- j. liaise with other authorities appointed under this Act about matters of common interest;
- k. promote education and training in the profession;
- l. promote public awareness of the responsibilities of the Board;
- m. exercise and perform any other functions, powers, and duties that are conferred or imposed on it by or under this Act or any other enactment.



*At the time of writing this report, the Board was waiting on the reappointment of one practitioner member and one lay person position, and the new appointment of one practitioner member and one lay person position.*

## Board Meetings

During the reporting period Board members attended four face-to-face Board meetings. Board members also participated in teleconferences throughout the year as necessary.

## Membership of the Board

Board members are appointed by the Minister of Health for up to a three-year term and are eligible to apply for re-appointment to serve a maximum of three consecutive terms (nine-years).

Board Member		Term commenced	Term renewed	Term completed
Dr Kristin Grace	Chair Chiropractor	Aug 2011	2015 2019	
Ms Liz Hird	Lay member Deputy Chair	Aug 2013	2016	
Dr Blair Apperley	Chiropractor	Jun 2015		Apr 2019
Dr James Burt	Chiropractor	May 2013	2016	
Dr Sarkaw Randhawa	Chiropractor	Sep 2017		
Ms Kiri Rikihana	Lay member	Aug 2013	2016	Apr 2019
Dr Gordon Winter	Chiropractor	Jun 2015		Apr 2019

### Dr Kristin Grace

Dr Grace is a registered chiropractor and Diplomat to the American Chiropractic Board of Radiology (DACBR) who currently practices with her husband John in Gisborne. She also has a private Chiropractic Diagnostic Imaging consultation service working with chiropractors and health care professionals around the world, and has held academic positions as Department Chair or Head of Diagnostic Imaging with Parker College of Chiropractic, New Zealand Chiropractic College and the Welsh College of Chiropractic and has been involved at various levels with Chiropractic Examining Boards in the United States, New Zealand and the UK.

### **Ms Liz Hird**

Ms Hird LLB (Hons) is a lay member who has been a barrister since 1987 and has a wide ranging commercial and administrative law practice. She has had a long involvement in community health, beginning with the founding of the Otaki Women's Health Group in 1987. She was also an initial member of the Otaki Community Health Committee of the Area Health Board and founding trustee and current chairperson of the Otaki Community HealthTrust, which provides community grants for health projects. In 2014, Ms Hird was reappointed a District Inspector of Mental Health Services for Manawatu, Wairarapa, Tarawhiti and Wellington, and a District Inspector for Intellectually Disability Services for the lower half of the North Island.

### **Dr Blair Apperley**

Dr Apperley is a registered chiropractor who has been practicing in Wellington since 2002. He completed undergraduate studies in New Zealand, before obtaining a Master's in Chiropractic at Macquarie University in Sydney. In addition to Chiropractic, Dr Apperley holds degrees in Psychology and Philosophy from the University of Auckland. He is extremely interested in activities that restore and maintain lifelong health. He is New Zealand's only current Certified TACFIT instructor. Dr Apperley has worked as a foreign entry examiner and then chief examiner for the board from 2011-2014.

### **Dr James Burt**

Dr Burt is a registered chiropractor, graduating from Palmer College (USA) in 1975. He has been in private practice in Rotorua and Tokoroa since 1976. He is registered to practice in the United Kingdom and has been a long serving member of the New Zealand Chiropractors' Association Council. Dr Burt was elected President in 1984 and again in 2007 until 2011. He was awarded Chiropractor of the Year in 2010. He graduated with a Bachelor of Law in 1999 and was admitted as a Barrister and Solicitor in the High Court of NZ, Rotorua Registry.

### **Dr Sarkaw Randhawa**

Dr Randhawa is a registered chiropractor based in Hamilton. Her educational background includes a Bachelor in Para Medicine and Emergency Management, Bachelor in Chiropractic, Postgraduate Certificate in Travel Medicine (Refugee and Migrant Health), Postgraduate Diploma in Rehabilitation and Masters in Rehabilitation. Dr Randhawa is the founder of the I AM HE(R) Charitable Trust which produces short films on issues with the ethnic communities - in particular, issues that carry stigma. She also co-founded the Ethnic Business Network which is a hub of information and networking for business owners within the Waikato region. She is a board member of Shama Hamilton Ethnic

*The Board would like to take this opportunity to thank Ms Rikihana, Dr Apperley and Dr Winter for their invaluable time and commitment on the Board.*

Women's Centre which works on providing various social services to the community in Hamilton. Dr Randhawa is an advisory board member of the Immigration Trust. She is also a committee member of the Public Health Committee of the World Federation of Chiropractic with a particular focus on Women's Health. Dr Randhawa was awarded with the 30 under 30 honour by Hamilton City Council for her contribution to the community at a young age. She has won several awards including the ANZ Young Achiever Award and the News Link Community Service Award. Dr Randhawa was appointed to the Chiropractic Board in September 2017.

### **Ms Kiri Rikihana**

Ms Rikihana is a lawyer who has practiced in the public and private sectors. She has been an appointed board member on Nelson Marlborough DHB from 2004-2007. Since 2009 Ms Rikihana has been a member of the Optometrists and Dispensing Opticians Board. She chairs the Kupe Charitable Trust and is a trustee at Te Kura Kaupapa Maori O Nga Mokopuna. Ms Rikihana has previously been employed with Capital and Coast District Health Board as an inhouse legal counsel and as a contracted project manager.

### **Dr Gordon Winter**

Dr. Winter is a registered chiropractor who graduated from Northwestern College of Chiropractic (USA) in 1998 with B.Sc (Human Biology) and Doctor of Chiropractic degrees. Before moving to New Zealand in 2011 he practised in the UK, where he was the team chiropractor for several professional football teams, including his hometown team Everton. He has clinical interests in functional neurology, clinical nutrition, and rehabilitation.

## **Board Committees**

The Board has a number of Committees who have delegated authority to undertake various functions, including advising the Board on issues which fall within their respective portfolio. Board Committees generally undertake their business via teleconference or other electronic means. The Board committees for 2018-2019 were:

- Administration Committee
- Complaints and Competence Committee
- Continuing Professional Development Committee
- Policy Committee
- Registration and Examination Committee

# Registration and Annual Practising Certificates

## Registration Examinations

The Board outsources the administration of the examination for overseas-educated chiropractors to the Council on Chiropractic Education Australasia (CCEA). Overseas educated chiropractors interested in registration in New Zealand have three opportunities to undergo an examination by the CCEA each year: two in Australia and one in New Zealand.

## Chiropractic Scope of Practice

Section 11 of the Act requires the Board to describe the profession of chiropractic in one or more Scopes of Practice.

The Board has gazetted one Scope of Practice which is “chiropractor”. A copy of this Scope of Practice can be found on the Board’s website: [www.chiropracticboard.org.nz](http://www.chiropracticboard.org.nz).

No amendments have been made to this Scope of Practice during the reporting period.

## Prescribed Qualifications

One of the Board’s main functions is the prescription of qualifications required for Scopes of Practice within the profession and for that purpose, to accredit and monitor educational institutions and degrees, courses of studies or programmes. The Board has delegated the accreditation function to the CCEA, of which it is a member, however retains the right to either accept or reject its recommendations.

Pursuant to Section 12 of the Act, the following qualifications are prescribed for registration as a Chiropractor:

Registration as a chiropractor in New Zealand under the Chiropractic Board Scope of Practice requires either:

- a Council on Chiropractic Education Australasia (CCEA) accredited Chiropractic qualification from the New Zealand College of Chiropractic, Auckland; or
- a pass in an examination set by the New Zealand Chiropractic Board for chiropractors trained overseas who have graduated from an institution with accreditation status as recognised by a member body of the Council on Chiropractic Education International (CCEI); or
- under the provision of the Trans-Tasman Mutual Recognition (TTMR) Act 1997, registration by the Chiropractic Board of Australia at the time of application.

## The Register

The Board maintains a public register of chiropractors, pursuant to section 136 of the Act. As at 31 March 2019 the register contained **808** names of which **652** held current Annual Practising Certificates.

## Applications for registration

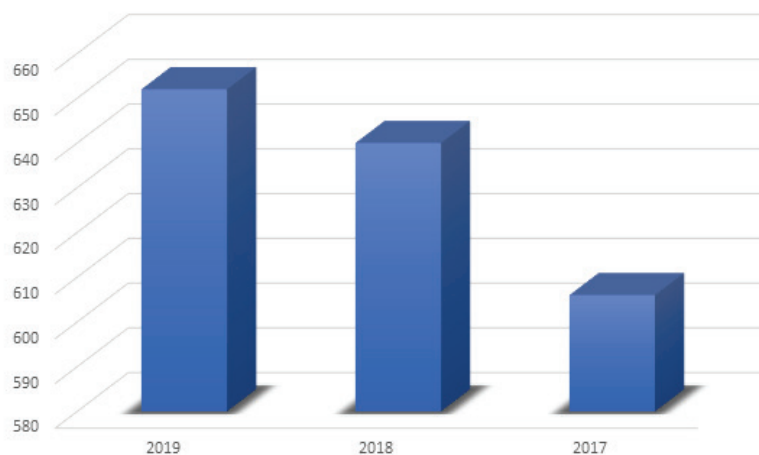
During the reporting period the Board received a total of **62** new applications for registration:

- **51** New Zealand graduates
- **9** TTMR Act pathway
- **4** CCEA pathway

## Annual Practising Certificates

The Board is pleased to report that it again decided not to raise the cost of Annual Practising Certificates for the 2018/2019 registration year.

Throughout the reporting year, the Board received **652** APC applications under section 26 of the Act, all of which were issued with an APC.



# Competence, Fitness to Practice, Health and Recertification

The Board is responsible for monitoring Chiropractors, to ensure they meet and maintain practice standards in order to protect the health and safety of the New Zealand public.

Chiropractors are asked to make a number of declarations in respect of their competence and fitness to practise when applying for registration, and each year they apply for a practising certificate.

## Competence notifications

A concern or complaint about a practitioner's competence can be raised by:

- a patient
- a colleague
- the Ministry of Health
- the Accident Compensation Corporation
- the Health & Disability Commissioner.

During the reporting period, the Board received two new competence notifications and two ongoing cases.

## Competence notifications by source:

Source	HPCA section	2018/19	2017/18	2016/17
Health practitioner	34(1)	-	-	-
HDC	34(2)	-	-	-
Employer	34(3)	-	-	-
Other		2	2	1
<b>TOTAL</b>		<b>2</b>	<b>2</b>	<b>1</b>

## Outcomes of competence notifications

When the Board receives a notification or concern about a Chiropractor's competence, it makes initial inquiries and may decide to

- take no further action
- make recommendations to the practitioner
- order a competence review.

Competence reviews focus on supporting the practitioner by putting in place appropriate training, education and safeguards to assist them to improve their standard of practice. Competence reviews undertaken by the Board are based on principles of natural justice, support and education.

Outcomes	HPCA section	Number			
		Existing	New	Closed	Still active
<b>Total number Initial inquiries</b>		2	2	-	-
<b>No further action</b>		2	1	-	1
<b>Notification of risk of harm to public</b>	35	-	-	-	-
<b>Orders concerning competence</b>	38	-	-	-	-
<b>Interim suspension/ conditions</b>	39	-	-	-	-
<b>Competence programme</b>	40	-	-	-	-
<b>Recertification programme</b>	41	-	-	-	-
<b>Unsatisfactory results of competence or recertification programme</b>	43	-	-	-	-

## Fitness to Practice and Health

There were no referrals to the Board under section 45 of the HPCA Act this year.

## Continuing professional development programme

The Board's Continuing professional development (CPD) programme is a key tool to ensuring practitioners maintain their chiropractic competence. The Board expects Chiropractors will demonstrate engagement in continuous and ongoing CPD activities involving a variety of learning activities. They must be able to articulate how their CPD activities have impacted on their practice as a Chiropractor

During 2019 the Board conducted its third CPD audit under the current CPD programme, where 10% of the profession were randomly selected.

Three practitioners were unable to satisfy the requirements of the Board's compulsory recertification programme, with one practitioner required to have a condition placed on their practice.

	2019	2017	2015
<b>Number Selected for audit</b>	62	91	50
<b>Passed</b>	13	18	38
<b>Passed with recommendations</b>	46	47	4
<b>Failed</b>	3	24	8
<b>Exempted</b>	1	2	-

## Complaints and Discipline

The Board's primary responsibility when receiving a complaint is the protection of the health and safety of the public. For the reporting year, the Board received five new complaints and had five complaint matters carry over from the previous period.



## Complaints from various sources and outcomes

Source	Received		Outcomes					
	New	Existing	Referred to HDC	Referred to PCC	Referred to HPDT	No further action	Other action	Ongoing
Consumer	4	7	4	4	1	7	1	4
HDC								
Health practitioner	1	1					1	
Courts notice of conviction								
Employer								
Self-declared	1					1		
<b>TOTAL</b>	<b>6</b>	<b>8</b>	<b>4</b>	<b>4</b>	<b>1</b>	<b>8</b>	<b>2</b>	<b>4</b>

## Professional Conduct Committee

Of the four cases referred to the Professional Conduct Committee (PCC):

1. Referred to the Health Practitioners Disciplinary Tribunal (HPDT):
2. PCC determined one case under 80(3)(a) of the HPCA Act to take no further action:
3. PCC required one practitioner to reflect on the charges laid before it:
4. PCC still ongoing at 31 March 2019.

## Health Practitioners Disciplinary Tribunal

The Board had one case before the HPDT during the reporting year. The HPDT ordered for the practitioner's registration to be cancelled.

The Board has one further case before the Tribunal scheduled to be heard in 2019.

## HRANZ Collaborations

Health Regulatory Authorities New Zealand (HRANZ) is an organisation made up of all the health regulatory authorities of New Zealand. It meets periodically to discuss matters of common interest, both at an operational and a governance level. The Board is an active participant in HRANZ work and considers it an important vehicle for improving regulation across the health professions.

With proposed changes to the HPCA Act about to be enacted, there will no doubt be a number of HRANZ meetings scheduled for the coming year, so members can collaborate closely on implementation of these changes.

## Secretariat

### Administration

The Board employs two dedicated staff members, the Registrar-General Manager who is responsible for all day to day activities of the Board and the Registration Officer-Administrator who provides support to the Registrar.

The Board along with other Boards with which it is collocated receives back office support from the Nursing Council.

### Contact details

+64 4 474 0740

[admin@chiropracticboard.org.nz](mailto:admin@chiropracticboard.org.nz)

[registrar@chiropracticboard.org.nz](mailto:registrar@chiropracticboard.org.nz)

[www.chiropracticboard.org.nz/](http://www.chiropracticboard.org.nz/)

Level 5

22 Willeston Street

Wellington 6011

# Chiropractic Board Financials

## For the year ended 31 March 2019

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### INDEPENDENT AUDITOR'S REPORT TO THE READERS OF CHIROPRACTIC BOARD'S FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2019

The Auditor-General is the auditor of the Chiropractic Board. The Auditor-General has appointed me, Chrissie Murray, using the staff and resources of Baker Tilly Staples Rodway Audit Limited, to carry out the audit of the performance report of the Chiropractic Board on his behalf.

#### Opinion

We have audited the performance report of the Chiropractic Board, that comprises the entity information, the statement of financial position as at 31 March 2019, the statement of financial performance, the statement of movement in equity and statement of cash flows for the year ended on that date and the notes to the financial statements that include accounting policies and other explanatory information.

In our opinion the performance report of the Chiropractic Board, present fairly, in all material respects:

- The entity information,
- its financial position as at 31 March 2019;
- its financial performance and cash flows for the year then ended; and
- comply with generally accepted accounting practice in New Zealand and have been prepared in accordance with Public Benefit Entity Simple Format Reporting – Accrual (Public Sector)

Our audit was completed on 7 October 2019. This is the date at which our opinion is expressed.

The basis of our opinion is explained below. In addition, we outline the responsibilities of the Board and our responsibilities relating to the performance report, and we explain our independence.

#### Basis of opinion

We carried out our audit in accordance with the Auditor-General's Auditing Standards, which incorporate the Professional and Ethical Standards and International Standards on Auditing (New Zealand) issued by the New Zealand Auditing and Assurance Standards Board. Our responsibilities under those standards are further described in the Responsibilities of the Auditor section of our report.

We have fulfilled our responsibilities in accordance with the Auditor-General's Auditing Standards.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

#### Responsibilities of the Board for the performance report

The Board is responsible for preparing the performance report which is fairly presented and that complies with generally accepted accounting practice in New Zealand.

The Board is responsible for such internal control as it determines is necessary to enable the preparation of the performance report that is free from material misstatement, whether due to fraud or error.

In preparing the performance report, the Board is responsible on behalf of the Chiropractic Board for assessing the Chiropractic Board's ability to continue as a going concern. The Board is also responsible for disclosing, as applicable, matters related to going concern and using the going concern basis of accounting, unless there is an intention to liquidate the Chiropractic Board or to cease operations, or there is no realistic alternative but to do so.

The Board's responsibilities arise from the Health Practitioners Competence Assurance Act 2003.

Baker Tilly Staples Rodway Audit Limited, incorporating the audit practices of Christchurch, Hawkes Bay, Taranaki, Tauranga, Waikato and Wellington.

Baker Tilly Staples Rodway Audit Limited is a member of the global network of Baker Tilly International Limited, the members of which are separate and independent legal entities.

**Responsibilities of the auditor for the audit of the performance report**

Our objectives are to obtain reasonable assurance about whether the performance report, as a whole, is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion.

Reasonable assurance is a high level of assurance, but is not a guarantee that an audit carried out in accordance with the Auditor-General's Auditing Standards will always detect a material misstatement when it exists. Misstatements are differences or omissions of amounts or disclosures, and can arise from fraud or error. Misstatements are considered material if, individually or in the aggregate, they could reasonably be expected to influence the decisions of readers taken on the basis of these performance report.

We did not evaluate the security and controls over the electronic publication of the performance report.

As part of an audit in accordance with the Auditor-General's Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. Also:

- We identify and assess the risks of material misstatement of the performance report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- We obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Board's internal control.
- We evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the governing body.
- We conclude on the appropriateness of the use of the going concern basis of accounting by the governing body and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Chiropractic Board's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the performance report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Chiropractic Board to cease to continue as a going concern.
- We evaluate the overall presentation, structure and content of the performance report, including the disclosures, and whether the performance report represents the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the Board regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Our responsibility arises from the Public Audit Act 2001 and section 134(1) of the Health Practitioners Competence Assurance Act 2003.

**Independence**

We are independent of the Chiropractic Board in accordance with the independence requirements of the Auditor-General's Auditing Standards, which incorporate the independence requirements of Professional and Ethical Standard 1(Revised): *Code of Ethics for Assurance Practitioners* issued by the New Zealand Auditing and Assurance Standards Board.

Other than the audit, we have no relationship with, or interests in, the Chiropractic Board.



Chrissie Murray  
Baker Tilly Staples Rodway Audit Limited  
On behalf of the Auditor-General  
Wellington, New Zealand

## Chiropractic Board

# Entity Information

For the year ended 31 March 2019

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<b>Legal name of entity</b>	Chiropractic Board
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<b>Type of entity and Legal Basis :</b>	The Chiropractic Board (the Board) is a body corporate established by the Health Practitioners Competence Assurance Act 2003 (HPCA Act) and is a Responsible Authority under that Act.
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<b>Entity's Purpose or Mission:</b>	<p>"The Board is established under the HPCA Act that enables self-regulation of various health professions - the principle purpose of the act being to protect the health and safety of members of the public by providing for mechanisms to ensure that health practitioners are qualified, competent and fit to practise their profession.</p> <p>The functions of the Board are to:</p> <ol style="list-style-type: none"><li>1. Prescribe the qualifications required for scopes of practice within the profession, and, for that purpose, to accredit and monitor educational institutions and degrees, courses of studies, or programmes;</li><li>2. Authorise the registration of health practitioners under this Act, and to maintain registers;</li><li>3. Consider applications for annual practising certificates (APCs);</li><li>4. Review and promote the competence of health practitioners;</li><li>5. Recognise, accredit, and set programmes to ensure the ongoing competence of health practitioners;</li><li>6. Receive and act on information from health practitioners, employers, and the Health and Disability Commissioner about the competence of health practitioners;</li><li>7. Notify employers, the Accident Compensation Corporation, the Director- General of Health, and the Health and Disability Commissioner that the practice of a health practitioner may pose a risk of harm to the public;</li><li>8. Consider the cases of health practitioners who may be unable to perform the functions required for the practice of the profession;</li><li>9. Set standards of clinical competence, cultural competence, and ethical conduct to be observed by health practitioners of the profession;</li><li>10. Liaise with other authorities appointed under this Act about matters of common interest;</li><li>11. Promote education and training in the profession;</li><li>12. Promote public awareness of the responsibilities of the authority;</li><li>13. Exercise and perform any other functions, powers, and duties that are conferred or imposed on it by or under this Act or any other enactment.</li></ol>
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<b>Entity Structure:</b>	The Board has seven (7) members. Five (5) chiropractors and two (2) lay members to represent public interests. Board Members are appointed by the Minister of Health. There is currently vacancies of one professional member and one lay member.
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<b>Main Sources of the entity's cash and resources:</b>	The Board has received its main income from APCs fees paid by registered chiropractors.
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<b>Additional information:</b>	To protect the public, the Board is also responsible for making sure that chiropractors keep high standards of practice by continuing to maintain their competence once they have entered the workforce.
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<b>General Description of the Entity's Outputs:</b>	To protect the health and safety of the public by providing for mechanisms to ensure that chiropractors are competent and fit to practise.
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## Chiropractic Board

# Statement of Financial Performance

For the year ended 31 March 2019

	Note	2019 \$	2018 \$
<b>Revenue</b>			
Practising Certificates		604,928	597,897
Registration		24,960	10,575
Interest Income		21,258	17,629
Other Income		2,522	1,678
Disciplinary Orders		30,000	-
Disciplinary Levy		130,430	-
<b>Total Income</b>		<b>814,099</b>	<b>627,780</b>
<b>Less Expenses</b>			
Accident Compensation Levy		360	354
Accounting		17,554	14,275
APC Processing costs		1,897	3,205
Audit Fees		6,606	5,956
Authority Member Fees		133,733	129,043
Bad Debts	7	10,000	-
Bank Charges		16,418	11,491
Board Expenses		3,546	11,829
Board Professional Development		-	5,583
Board Travel & Accommodation		55,585	40,269
Committee Fees		4,450	-
Communications		2,705	3,103
Conferences		16,184	9,406
Consultants		67,534	14,908
CPD Programme		700	-
Disciplinary costs		92,799	113,505
Filing		502	564
Information Technology		18,351	11,051
Insurance		5,254	4,423
Legal Expenses		2,789	7,533
Photocopying		251	398
Postage		1,922	1,460
Printing & Stationery		825	1,730
Professional Membership		41,233	32,669
Projects		19,549	34,233
Rent		13,328	13,156
Staff related expenses		92,156	143,777
Staff travel		4,481	6,224
Sundry		1,797	5,470
Telephone		2,444	2,914
Utilities		10,006	9,408
Website Expenses		1,549	1,215
<b>Total Expenses</b>		<b>646,512</b>	<b>639,152</b>
<b>Net Surplus/ (Deficit) Before Depreciation &amp; Amortisation</b>		<b>167,586</b>	<b>(11,372)</b>
Depreciation	5	14,592	17,064
Amortisation	5	-	3,167
<b>NET SURPLUS/ (DEFICIT)</b>		<b>152,994</b>	<b>(31,603)</b>

Chiropractic Board

## Statement of Movement in Equity

For the year ended 31 March 2019

	<i>Note</i>	2019 \$	2018 \$
EQUITY AT START OF PERIOD		340,415	372,019
Net Surplus/ (Deficit) for the year		152,994	(31,603)
EQUITY AT END OF PERIOD		\$493,410	\$340,415

*To be read in conjunction with the Notes to the financial Statements*



Chiropractic Board

# Statement of Financial Position

For the year ended 31 March 2019

	Note	2019 \$	2018 \$
<b>CURRENT ASSETS</b>			
Cash and cash equivalents		757,399	373,076
Short-term investments		530,858	726,736
Accounts Receivable	7	27,618	15,299
Other Current Assets		2,964	1,589
Prepayments		21,992	25,413
<b>Total Current Assets</b>		<b>1,340,831</b>	<b>1,142,112</b>
<b>NON-CURRENT ASSETS</b>			
Property, Plant and Equipment	3	16,466	25,459
Intangible Asset- Website	4	-	-
<b>Total Non Current Assets</b>		<b>16,466</b>	<b>25,459</b>
<b>TOTAL ASSETS</b>		<b>1,357,297</b>	<b>1,167,572</b>
<b>CURRENT LIABILITIES</b>			
GST Due for Payment	1(e)	90,256	92,898
Accounts Payable	6	66,710	38,687
Income in Advance		693,429	683,861
PAYE Payable		5,376	4,071
WHT Payable		8,116	7,640
<b>TOTAL LIABILITIES</b>		<b>863,887</b>	<b>827,157</b>
<b>NET ASSETS</b>		<b>\$493,410</b>	<b>\$340,415</b>
<b>EQUITY</b>			
Accumulated Funds		493,410	340,415
<b>TOTAL EQUITY</b>		<b>\$493,410</b>	<b>\$340,415</b>



Dr Kristin Grace  
Chairperson

07 October 2019



Glenys Sharman  
Registrar/General Manager

07 October 2019

*To be read in conjunction with the Notes to the financial Statements*

Chiropractic Board

# Statement of Cash Flows

For the year ended 31 March 2019

	2019	2018
	\$	\$
<b>Cash flows from Operating Activities</b>		
<b>Cash was received from:</b>		
Statutory fees and levies	739,584	723,277
Registration income	26,003	23,358
Other fees	14,503	1,678
Interest Revenue	19,882	18,928
<b>Cash was applied to:</b>		
Payments from suppliers and employees	(605,302)	(695,097)
<b>Net cash flows from operating activities</b>	<b>194,671</b>	<b>72,144</b>
<b>Cash flows from Investing and Financing Activities</b>		
<b>Cash was received from:</b>		
Short-term investments	912,010	910,629
<b>Cash was applied to:</b>		
Purchase of fixed Assets	(6,226)	(641)
Short-term investments	(716,132)	(804,886)
<b>Net Cash Flows from Investing and Financing Activities</b>	<b>189,652</b>	<b>105,102</b>
<b>Net Increase / (Decrease) in Cash</b>	<b>384,323</b>	<b>177,246</b>
Opening Cash Brought Forward	373,076	195,830
<b>Closing Cash Carried Forward</b>	<b>757,399</b>	<b>373,076</b>
<b>Represented by:</b>		
<b>Cash and cash equivalents</b>	<b>757,399</b>	<b>373,076</b>

To be read in conjunction with the Notes to the financial Statements

## Chiropractic Board

# Statement of Accounting Policies

For the year ended 31 March 2019

## 1. Statement of Accounting Policies

### **BASIS OF PREPERATION**

The Board is a body corporate established by the HPCA Act and is a Responsible Authority under that Act.

The financial statements have been prepared in accordance with generally accepted accounting practice in New Zealand (NZ GAAP) and have been prepared on the basis of historical cost.

The Board has elected to apply PBE SFR-A (PS) Public Benefit Entity Simple Format Reporting - Accrual (Public Sector) on the basis that it does not have public accountability and has total annual expenses of equal to or less than \$2,000,000. All transactions in the Performance Report are reported using the accrual basis of accounting. The Performance Report is prepared under the assumption that the entity will continue to operate in the foreseeable future.

### **Specific Accounting Policies**

#### **(a) Income recognition**

Fees received for the issue of APC's, disciplinary levies and register maintenance are recognised in the year to which they relate. All other fees are recognised on receipt. Interest income is recognised on an accrual basis.

#### **(b) Changes in Accounting Policies**

There have been no changes in accounting policies. All policies have been applied on bases consistent with those used in previous years.

#### **(c) Property, Plant, Equipment and Depreciation**

Property, Plant and Equipment are shown at original cost less accumulated depreciation. Depreciation has been calculated over the expected useful life of the assets at the following rates

Office Equipment	48%	Straight Line
Computer Equipment	48% - 67%	Straight Line
Fixtures & Fittings	20%	Straight Line
Office Refit	5 years	Straight Line

## Chiropractic Board

# Notes to the Performance Report

For the year ended 31 March 2019

### **(d) Intangible Assets & Amortisation**

Websites have a finite useful life. Websites are capitalised and amortised over their currently estimated useful life of 3 years on a straight line basis.

Costs associated with maintaining websites are recognised as expenses when incurred

### **(e) Goods & Services Tax**

The Board is registered for Goods & Services Tax (GST). The Statement of Financial Performance has been prepared so that all components are stated exclusive of GST. All items in the Statement of Financial Position are stated net of GST, with the exception of accounts receivable and payables.

### **(f) Cash and Cash equivalents**

Cash and cash equivalents are short term, highly liquid investments that are readily convertible to known amounts of cash and which are subject to an insignificant risk of changes in value.

### **(g) Receivables and doubtful debts**

Receivables are stated at the amount owed less any impairment for amounts that are likely to be uncollectible. Doubtful debts are estimated based on review of receivables at year end and if the debtor is making contribution against the debt, if no contribution the debt is fully provided for as a doubtful debt.

### **(h) Income Tax**

The Board is registered as a charitable entity under the Charities Act 2005 and is therefore exempt from Income Tax.

### **(i) Investments**

Short-term investments comprise term deposits which have a term of greater than three months and therefore do not fall into the category of cash and cash equivalents.

## 2. Contingent Liabilities and Commitments

The Board has entered into a Service Level Agreement (SLA) with the Nursing Council of New Zealand for the provision of back office corporate services. This SLA is for an initial term of 5 years. The future estimated commitments based on the expected costs included in this agreement as at 31 Mar 2019 are: Property \$14,539, Corporate Services \$33,527, Total \$48,066.

## Chiropractic Board

# Notes to the Performance Report

For the year ended 31 March 2019

	2019 \$	2018 \$
Current	48,066	48,279
Non-current	44,061	92,535
<b>Total</b>	<b>92,127</b>	<b>140,814</b>

At balance date there are no known contingent liabilities (2018: \$nil).

There are no capital or other commitments at balance date (2018: \$nil)

### 3. Property, Plant and Equipment

	2019 \$	2018 \$
<b>Office Equipment</b>		
At Cost	5,743	5,743
Less Accumulated Depreciation	5,743	5,743
<b>Total</b>	<b>0</b>	<b>0</b>
<b>Computer Equipment</b>		
At Cost	34,136	32,710
Less Accumulated Depreciation	29,191	23,930
<b>Total</b>	<b>4,945</b>	<b>8,780</b>
<b>Fixtures &amp; Fittings</b>		
At Cost	18,011	17,441
Less Accumulated Depreciation	11,232	7,978
<b>Total</b>	<b>6,779</b>	<b>9,463</b>
<b>Office Refit</b>		
At Cost	12,370	12,370
Less Accumulated Depreciation	7,628	5,154
<b>Total</b>	<b>4,742</b>	<b>7,216</b>
<b>Total Property, Plant and Equipment</b>	<b>16,466</b>	<b>25,459</b>

## Notes to the Performance Report

For the year ended 31 March 2019

### 4. Intangible Assets

	2019	2018
	\$	\$
Website		
At Cost	9,500	9,500
Less Accumulated Amortisation	9,500	9,500
<b>Total</b>	<b>0</b>	<b>0</b>

### 5. Depreciation and Amortisation

	2019	2018
	\$	\$
Depreciation has been charged against:		
Computer equipment	8,864	11,392
Fixtures & Fittings	3,254	3,198
Office Refit	2,474	2,474
<b>Total</b>	<b>14,592</b>	<b>17,064</b>

	2019	2018
	\$	\$
Amortisation of intangible assets		
Website	0	3,167
<b>Total</b>	<b>0</b>	<b>3,167</b>

### 6. Accounts Payable and Provisions

	2019	2018
	\$	\$
Accounts payable	51,460	20,332
Accrued Expenses	12,011	15,964
Employee entitlements	3,239	2,392
<b>Total</b>	<b>66,710</b>	<b>38,687</b>

### 7. Accounts Receivable

	2019	2018
	\$	\$
Accounts receivable	30,161	12,141
Less provision for doubtful debts	(10,000)	-
Accrued income	7,457	3,157
<b>Total</b>	<b>27,618</b>	<b>15,299</b>

## Chiropractic Board

# Notes to the Performance Report

For the year ended 31 March 2019

## 8. Credit Facility

The Board has a Business Mastercard facility of \$30,000.

## 9. Assets Held on Behalf of Others

There were no assets held on behalf of others during the financial year. (2018: \$nil)

## 10. Events After Balance Date

There were no events that have occurred after balance date that would have a material impact on the Performance Report. (2018: One charge laid before Health and Disciplinary Tribunal on 17 May 2018, costs currently unknown).

## 11. Correction of Errors

There were no correction of errors at balance date. (2018: \$nil)

## 12. Shared Services

In 2015/16, Nursing Council of New Zealand, Occupational Therapy Board of New Zealand, Podiatrists Board of New Zealand, Dietitians Board, Midwifery Council of New Zealand, Psychotherapists Board of Aotearoa New Zealand, Osteopathic Council of New Zealand, Chiropractic Board, Psychologist Board and Optometrists & Dispensing Opticians Board entered into an agreement to co-locate to 22 Willeston Street, Wellington. The lease agreement for 22 Willeston Street (signed solely by Nursing Council of New Zealand) is for six years taking effect from 1st February 2016 and expiring on 1st February 2022.

To facilitate the management of shared resources, including a joint lease agreement for office rental purposes and corporate supports, the ten RAs entered into an agreement for the provision of corporate services.

## 13. Re-Classification of Revenue

There has been some reclassification of revenue and expenditure in the Statement of Financial Performance and comparatives for these changes have been reclassified.

