

Submission to the Senate Community Affairs Legislation Committee inquiry into the *National Disability Insurance Scheme Amendment (Improving Supports of At Risk Participants) Bill 2021 (the Bill)*

The Australian Clinical Psychology Association (**ACPA**) is the national professional body that represents clinical psychologists who hold the accredited post-graduate qualifications that meet the criteria established by the Psychology Board of Australia (PsyBA) for endorsement in clinical psychology.

The preparation of this submission has been led by Dr Paul Gertler BA (Hons) MPsychol (Clin) PhD, supported by contributions from an experienced group of clinical psychologists who have particular expertise and interest in working with clients who are living with disability, in both 'pre-NDIS' and 'post-NDIS' environments.

We acknowledge and celebrate the achievements of the NDIS and the transformational outcomes it has had on many living in our community with a disability. Although the NDIS funding values capacity building programs for participants the scheme remains in its infancy, and like many new things, it has brought its own challenges. We reflect on the circumstances surrounding the death of Ms Ann Marie Smith and express our deepest sympathies with her friends, family and NDIS participants.

We thank the Senate Community Affairs Legislation Committee for the opportunity to provide comment on the Bill and trust the input is valuable in ensuring the amendments strengthen the Act, and work to ensure the best possible care and outcomes for NDIS participants, especially for those who are at risk and are some of the most vulnerable in our community.

Comments and recommendations

1. *Safeguarding arrangements and the disclosure of confidential information*

ACPA acknowledges the Bill's amendments to improve the information sharing between the NDIS commission and the NDIA, and note the Bill's provisions to provide the NDIS commission the scope to further define the circumstances surrounding reportable incidents and clarify reporting requirements, in the NDIS commission's reportable incidents rules.

We note the recent establishment of the NDIS commission and its national oversight of the NDIS quality and safeguard arrangements and believe this is a positive measure in ensuring the quality of support provided and the safety and wellbeing of all NDIS participants. Further, the Bill's provisions to improve information sharing between the NDIS commission and NDIA look to be a positive step forward in ensuring the protection of NDIS participants.

Clinical psychologists have a duty stated explicitly within their Code of Conduct as set out by the Psychology Board to protect and maintain the confidentiality of a client's personal information and disclosures, except where the risk of maintaining a client's

confidentiality is outweighed by the risk of harm to the client, or to others. In such instances there are clear expectations of the steps a clinical psychologist should take to protect the safety of their client.

However, under the current arrangements, it has been often unclear to our practitioners what requirements and reporting obligations they have to the NDIA. Further, once a report has been made by a practitioner to the NDIA they are not informed what action, if any, has been taken against a service provider. This lack of information back to the practitioner has the potential to present further risk to their clients, as possible safeguards may not be in place to protect their client's ongoing relationships.

Recommendation:

We recommend amendments are made to ensure that treating practitioners, such as clinical psychologists and other regulated health professionals, are included in the disclosure of information surrounding reportable incidents, as these complement the long-established reporting processes already adhered to by our profession to improve the safety of our clients.

2. NDIS registration for service providers

Under the current system, to provide clinical psychology services to an Agency Managed NDIS participant practitioners are required to be registered with the NDIA. Agency Managed clients often have the most complex needs and require a higher level of support. In our view the current registration process could be improved to better ensure the standards of service or clinical quality. For many clinical psychologists, particularly those who are running small and private services, it is a burdensome and costly exercise to become a registered provider, and this is working to discourage clinical psychologists from providing support to the most vulnerable NDIS participants.

Fewer options for NDIS participants with severe challenging behaviours

We note that clinical psychologists and other regulated health professionals who have not undergone the specific NDIS registration process can provide some services, such as individual counselling and assessment of psychological distress, for self or plan-managed NDIS participants. However, the provision of behavioural support services is still restricted to NDIS-registered practitioners. Challenging behaviours are amongst the most complex presentations and is a barrier to the participation of NDIS participants in accessing their communities and engaging in other activities. We note that many people with challenging behaviours cannot access regular health services and even simple procedures, such as administering vaccines, would require the coordinated effort of many partners. Challenging behaviours place a heavy burden on families leading to burnout and marital distress and causes high turnover of care staff and workplace injury. Currently, NDIS participants are restricted to accessing behavioural support from a limited pool of NDIS-registered practitioners and do not have access highly trained and experienced clinical psychologists who are not NDIS-registered because they have found that the NDIS registration process is expensive, time-consuming, onerous, and irrelevant to actual clinical practice standards.

A 'doubling-up' of registration

The NDIA registration process is also arguably an unnecessary doubling-up of the long-established clinical psychologist registration process under the *Health Practitioner*

Regulation National Law Act 2009. The Psychology Board of Australia (the Board), established under this Act, is responsible for registering psychologists, and for developing standards, codes, and guidelines, and for investigating and, if necessary, prosecuting complaints. Training in ethical practice and continuing professional development is foundational to our profession and required to remain registered. We feel requiring clinical psychologists to go through a second registration process with the NDIA is unnecessary. The current NDIA registration process is also a large expense to practitioners and can take months to complete.

Removing the barriers for clinical psychologists to receive NDIS registration would provide NDIS participants with greater choice in selecting their support, by having access to all practicing clinical psychologists, not limiting the choice to those who have taken the steps to become NDIS registered.

Recommendation:

We recommend that professionals, such as clinical psychologists, who are already registered with a regulatory Board to be automatically accredited as NDIS service providers for all relevant item codes, including provision of behavioural support. This would open up a wider range of professional supports to NDIS participants.

We would like to thank the Legislation Committee for the opportunity to comment on this important Bill. We hope that our input is useful and informs the Committee's deliberations. If any clarification is required, we would be happy to provide further information or speak to Committee members to answer any questions they may have.

Yours faithfully,

Professor Caroline Hunt
President
The Australian Clinical Psychology Association