Senate Community Affairs Reference Committee inquiry into Commonwealth Funding and Administration of Mental Health Services

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Submission by
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I wish to submit comment to the Senate Enquiry into the Commonwealth Funding and Administration of Mental Health Services, relating to the following terms of reference:

- (b) changes to the Better Access Initiative, including:
- (ii) the rationalisation of allied health treatment sessions,
- (iv) the impact of changes to the number of allied mental health treatment services for patients with moderate to severe mental illness under the Medicare Benefits Schedule.
- (e) mental health workforce issues, including:
- (i) the two-tiered Medicare rebate system for psychologists,
- (ii) workforce qualifications and training of psychologists,
- (b)(ii) As many clinical psychologists agree, it is extremely important not to reduce Better Access services to those who need the services most and who may have no voice to address their needs for services because of the effects of their illness or condition. These are the people who suffer from moderate to severe mental health conditions.
 - Under the present Better Access Scheme, clients with diagnosable mental health conditions are able to obtain psychological treatment for an initial six sessions, a further six after a review, and in exceptional circumstances a total of eighteen sessions in a calendar year.
 - I have practiced for 8 years as a clinical psychologist, which includes the years since the inception of the Better Access Scheme. I have found that the treatment session requirements for mild to moderate conditions differ from those for moderate to severe conditions.
 - (iv) For those clients with moderate to severe conditions, even 18 sessions may not be adequate.
 - This patient group includes individuals presenting with personality disorders, substance abuse, early trauma histories, chronic and severe mental health issues and the associated impairment in functioning, adults presenting with childhood-

- onset anxiety disorders, eating disorders and chronic depression that has not responded to medication.
- For approximately half of this group, more than 18 sessions in a year are required.
- Thus, the recommendation that assessment and treatment sessions authorized under Better Access be cut back to 10 sessions in a calendar year will result in suboptimal care for those who are most in need of ongoing and accessable mental health care.
- Indeed, their access to mental health services will not be better, it will be "worse access", as appropriate mental health care for these clients is frequently not accessable through the public health system in a timely manner due to extensive wait-lists or restrictive selection criteria.
- Therefore, it is essential that Better Access via private specialist clinical psychologists remains and offers a realistic number of sessions for this group of clients with more severe conditions.
- 20 sessions per calendar year is a more realistic provision for the clients with moderate to severe conditions.

(e)(i) I would also like to recommend maintaining the two-tier Medicare rebate system, which recognizes specialized payment for clinical psychologists for the following reasons:

- Clinical psychology is one of nine specialized areas within psychology. These
 areas of specialization are internationally recognized, enshrined within Australian
 legislation and are the basis for our industrial awards. The 1965 Western
 Australian model recognized clinical psychologists and clinical
 neuropsychologists as specialists, and this model formed the basis for the 2010
 National Registration and Accreditation Scheme.
- All specialized areas within psychology require a minimum of eight years education and training leading to advanced psychological competency in that field.
- Vast differences exist in the way that psychological knowledge and skills are imparted when university post graduate clinical training is compared with the "apprenticeship-style" approach of the basic APAC accredited four year training of a generalist psychologist.
- Clinical psychologists' postgraduate training is preceded by a rigorous selection
 process ensuring a high standard of intellectual ability and applicant suitability.
 Training then focuses on clinical evaluation and research across the full range of
 severity and complexity and human development and evidence-based and
 scientifically-informed practice (including assessment and diagnosis, case
 formulation, psychotherapy, and psychopharmacology).
- Clinical courses demand a process of intense supervision and evaluation within a standardized teaching program. Measures of competency ensure that the standards of knowledge and skills are met. Clinical training is now followed by at least 1-2 years of supervised practice before the title of clinical psychologist can be used. ie. 8 years in total of intense training.
- The apprenticeship-style training approach of the generalist psychologist cannot guarantee this level of training or these standards of practice.

- (ii) It is important to note that Australia is the only developed nation that requires only an undergraduate degree and two years of supervision for registration as a psychologist i.e. the standard of generalist psychologist, and that
 - Standards change as scientific research evidence becomes available. We must move forward in lifting standards in psychology to provide best care to clients and to keep pace with other developed nations.
 - We need to consider raising our training standards by moving away from the basic APAC accredited four year training (4+2 training) of generalist psychologists and towards higher levels of postgraduate university training.
 - One way of encouraging higher levels of expertise and standards is to provide higher levels of remuneration for those who have invested the time, energy and expense needed to further their education, so that they can provide the highest standards of evidence-based psychological treatment.
 - Payment of specialist clinical psychologists should be commensurate with that offered to our psychiatrist colleagues, based on years of post-graduate training.