

Community Affairs, Committee (SEN)

I am writing regarding the two-tiered Medicare system for payment of psychologists. I have no pecuniary interest in the issue, since I am a public servant.

In my view clinical psychologists are gaining too much leverage within the system relative to their psychologist colleagues. In my experience of 24 years psychologists who work in a clinical setting have pretty much the same knowledge and method as clinical psychologists. Psychiatrists quite often mistakenly refer to me as a clinical psychologist, so they aren't noticing a difference in my case. The word "clinical" in the title often just reflects a more focussed academic choice at a younger age. It seems to have a powerful brand name effect, but to those in the know it is about as relevant as the quality of high school you attended. Some politically energetic clinical psychs seem to have, shall we say, an unscientific view of their own superiority. The intellectually honest ones accept that competency is more about intelligence and psychological-mindedness than some elective you picked in school. The psychologist v clinical psychologist dichotomy is not analogous to a GP v medical specialist situation, where the latter has substantially more years training. The pay rate discrepancy is quite extraordinary-I don't think you could justify even a 5% advantage.

Regards
Bruce Murray
Psychologist