

SUBMISSION TO THE SENATE COMMISSION INTO THE FUNDING AND ADMINISTRATION OF MENTAL HEALTH SERVICES IN AUSTRALIA

I am a provisionally registered psychologist, currently completing my training under the 'Internship program', also known as a '4 plus 2' program. I am an experienced health professional who completed my honours degree in psychology 20 years ago. I also have a Post Graduate Diploma of Health Promotion and a Masters of Health Science. I have worked in health and welfare for 20 years in the areas of Drug and Alcohol Services, Sexual Assault, Disability Services and trauma counselling. I have also worked in research, strategic planning and service management positions for National, State and local services, across both Government and NGO sectors.

I consider myself an experienced health and welfare professional and I am well used to the ups and downs of life as a health professional. However, never in my entire professional life have I come across a profession as angry and demoralised as the psychology profession.

I deeply regret choosing to register as a psychologist, and if it wasn't for the fact that I have already invested so much time, money and energy in this training I would drop out. Like many practitioners in the field I actively discourage people from becoming psychologists. I am very open in admitting to them that entering the field 'is not worth it'.

I would like to outline for the Senate Commission some of the very serious issues which are contributing to the demoralised workforce and ultimately damaging the provision of good quality mental health services in Australia.

My Submission relates to Section E, parts i and ii of the senate enquiry. I am also submitting comments under Section J (Other) which specifically relates to remuneration of psychologists and the role and function of the new Psychology Board of Australia (PBA)

Section E: Mental Health Workforce Issues,

Part (i) The two tiered medicare rebate system

(1) Lack of Evidence to Support the Current Two Tiered System

The current two tiered system on Medicare rebate is not based on evidence and is a waste of tax-payers' money. Clinical Psychologists are actively arguing that they automatically deserve a higher rebate and to work with more complex cases than other psychologists. But there is no evidence for this. In fact the recent review into the Better Access program has specifically found that there is no evidence to support the claim that Clinical Psychologists are automatically better than other psychologists. We should not have a system which enables the public funding of services based on 'opinion', otherwise all sorts of health professionals could make service delivery claims and ask for extra money.

The problems this system has created are manifold and the ridiculous situations created are almost humorous. For example, I could do a Masters of Counselling Psychology or a Masters of Developmental and Educational Psychology. These are recognised, academically, as the same level of training as the Masters of Clinical Psychology, but I will automatically be paid less and given less of a Medicare rebate than a clinical psychologist. No adequate explanation for this anomaly has ever been provided.

As a second example: My supervisor and clinic manager is an endorsed Counselling Psychologist. She is recognised as a leader in her field by the APS in order to become an endorsed counselling psychologist. She has at least 30 years of experience as a counselling psychologist. She serves on expert committees, lectures and supervises students, manages a busy clinic and is highly regarded by her peers. In the past she actually supervised Masters of Clinical Psychology students for placements. However she is entitled to claim less of a medicare rebate than a recently qualified clinical psychologist who may be only in her mid-20's and have minimal actual hands on clinical experience. Where is the evidence that this clinical psychologist is **automatically** capable of doing a better job than my supervisor? :In fact, logically to anyone working as a health practitioner we know this is highly unlikely to be the case.

I suggest that if the general public knew of this example, and other similar examples, they would be outraged. They are paying more for a Clinical Psychologist under the belief that they are getting a more experienced, better qualified psychologist and a better result. There is no evidence to support this.

I believe that the current two tiered system is actually an example of a powerful professional group managing to fleece the government for its own ends. If the

government really wanted to fund mental health services in a more efficient way, they would be wise to have one level of rebate for all psychologists.

If the government wishes to retain a 2 tier system they would be better to have a category of 'general rebate' and 'senior professional rebate' which would be available only to select senior professionals to can prove that they possess the level of skills, experience and training to warrant an extra payment. This would not just be based on the type of degree completed but on many levels of competencies and experience.

(2) The negative impact of the two tiered system on access and equity

Our government should be concerned about access to affordable mental health services. While a Medicare rebate may improve this, there is evidence to suggest that Clinical Psychologists are less accessible than generalists and may not be contributing as much as hoped to improving access and equity. Clinical Psychologists are more likely, when compared to general psychologists, to charge more and more likely to charge a gap fee. They are more likely to be providing services to higher income urban clients, while generalist psychologists are more likely to be seeing lower income and rural clients (Better Access Program Evaluation).

The two tiered system is not just costly for the government, it actually encourages the government to put more money where it is least needed, and less money where it is needed most – poor, rural and disadvantaged people.

As someone who has always worked with marginalised and disadvantaged people in government and charity sectors I find this disgusting. None of my clients can afford the ongoing counselling they need under the current Medicare system. Almost all my clients are survivors of severe child abuse. They are frequently self-harming and suicidal. Many of them have personality disorders and long term psychiatric problems. The evidence based literature makes it clear that these clients need regular long term counselling. With scant public health counselling services, which are severely time limited, and the charging of gap fees and time limited Medicare rebates in the private sector, the only way they can get this is through free/low fee charity. It is sad that the government, despite all the money of the Medicare rebate still has a system where the only way the most marginalised and abused people in our country can get adequate mental health services is through the volunteer services of counsellors and psychologists. ***I firmly believe that paying one sector of therapists substantially more, with little evidence that this money gives extra benefits, is not something the government can afford to do.***

Reference E: Mental Health Workforce Issues

Part (ii) Workforce Qualifications and Training of Psychologists

(1) Current Training of Provisionally Registered Psychologists (Intern Training) is unreasonable

Currently interns under the 4 plus 2 program are required to work 3080 hours in placement. This translates to 2 full time years of unpaid work - and since few of us can afford work for free, this means that it is 4 years of part time work. I wonder at what level does this become training and at what level is it exploitation? Is there any workplace law that covers worker's rights? I urge the government to investigate this issue. It has always been my understanding that there are laws to prevent workers being exploited as free labour under the guise of 'training'. While many professions have 'placements' to train students and these are unpaid, these are far shorter than our 3080 hours and the people being trained are clearly recognised as students which we are not (see point below). I believe that this current training standard is not acceptable under the current culture of professional training in Australia. For example a teacher or a nurse being trained has approximately half the placement hours we have, even though we have already completed at least 4 years of full time training at university, and many interns such as myself also have post graduate degrees in related health fields. In my case I am also doing a post graduate diploma in applied psychology at university, professional development courses and the internship program.

In addition to the above problem of working for nothing, most interns also have to pay for private supervision which is 1-2 hours per week, depending if you are full or part time. This costs between \$110 - \$150 per hour. We are paying a large amount of money per week for a compulsory, essential part of our training, yet we are not paid and can't even claim a student allowance. As we are not paid for our work we can't claim supervision as a tax deduction.

I ask why would anyone want to train as a psychologist?

(2) Lack of recognition of Interns as students

Interestingly interns are not considered 'students' either. Although we are students of our profession, and mostly unpaid, we cannot claim Austudy type allowances. To add insult to injury, our leading professional organisation, the Australian

Psychologists Society, does not recognise us as students and makes us pay full membership. So are we students? Are we learning? If not, why are we doing the internship and why does the PBA recognise it as training? If we are students (which I argue we are) then then why aren't we recognised and protected as students?

(3) Lack of Back-dating of Log Books and Length of Time Taken to Approve Placements

Currently the PBA does not allow backdating of log books. As the Senate Enquiry Committee may not be aware of the system I will briefly explain it. Interns are required to find a placement with an organisation, get a supervisor (which we often have to pay for out of our non-earnings). In conjunction with the supervisor, the Intern develops a detailed training plan (at least 30 pages long) and sends it off to the PBA for approval.

Interns then have to begin working in their placement, despite the fact that it is not yet 'approved'. We have to do this as placements are hard to find and if we wait then the job will go to someone else. This places us in an incredibly vulnerable position. Firstly, we may work in this position and then find out the PBA will not approve it, in which case we have worked for nothing.

Secondly, and most importantly, the PBA does not allow back-dating of log books. This means that any work undertaken on the placement can't be counted towards the 3080 hours of placement.

In my case I kept a detailed log book, had supervision and all documents were signed off by my supervisor. In other words I adhered to the EXACT standard of evidence required by an intern, but none of my hours were backdated.

I was a lucky student as I only lost 6 weeks of work. It is not uncommon for the PBA to take 3 months and sometimes even 4 months to approve a plan. One Intern I know of had lost 3 months of a 6 month placement because the PBA took 3 months to approve her plan. Another intern had a placement of 3-4 months. The PBA took so long to approve her plan, that when the approval came back the placement was finished and she no longer had a placement. The Plan was defunct and she had to start all over again. It could be argued that she was exploited, working for nothing for 4 months, all thanks to the PBA.

If an intern is on a full time placement for 3-4 months and her work is not backdated, this means that 400-500 hours of her 3080 are completely lost. Not only has she worked for no money, paid out a lot of money for supervision, but the hours don't count to her placement. I suggest to you that this is so grossly unfair that it constitutes exploitation.

I argue that if Interns are adhering to the proof of evidence required for a placement – detailed log books, supervision reports and all is signed off by the supervisor than

the log books should be allowed to be backdated. In my case my supervision logs were valid after the 19 December, but from 1st November to 19 December they were just not recognised, despite being EXACTLY the same log books, in the same placement with the same supervisor. Why is a standard of evidence acceptable after a certain date, but not acceptable before a date?

If there is a good reason for this rule, that it protects the public from harm, then I am happy not to have log books back dated for an approved plan. However if a placement is approved then it meets standards and the hours worked in that same placement should be counted. I believe this is simply another effort of the PBA to make training of Interns under the 4 plus 2 scheme impossibly difficult.

It is also worth noting that the PBA has never given an explanation as to why approved placements are not backdated, even if the evidence of practice is all provided. The PBA simply states that 'it does not backdate placements'. The PBA appears to be answerable to no one.

(4) Lack of Realistic Professional Competencies

Under the current system the competencies as outlined by the PBA are not realistic, nor a reflection of the practice of the psychology profession.

As an example the competencies in Assessment are such as they do not reflect how the practice of psychology works. We are required to undertake placements which give us supervised practical experience in:

- current and approved tests of adult and child intelligence (eg WIAS/WISC);
- current and approved major personality tests (eg 16PF, MMPI)
- current and approved specialised memory assessments (eg WMS, WRAMT); and
- at least 5 of each of 2 different assessments in 2 different categories - eg if you chose vocational you need to do at least 5 of at least 2 major and current vocational tests, and then you need to choose another category - eg child developmental tests and do at least 5 of two of those.

This is not a realistic reflection of the workplace. Most psychologists do not work across all these areas. For example a counselling psychologist may use mental health and personality assessments, but not intelligence or memory assessments. An educational psychologist will use cognitive assessments and developmental assessments, but not memory assessments.

In actual fact Interns are being required to do a type of training that is beyond the scope of practice of a fully qualified and registered psychologist or clinical psychologist. Over time I have spoken to both clinical and general psychologists and all of them have freely admitted that they do not have competence across all of those

type of tests. This means that it is very difficult for interns to get training in the field because there are simply a lack of registered professionals who have competencies across all these areas of assessment.

This means we are left looking endlessly for placements that train us in everything. For example, despite my work experience and academic post graduate training I am finding it hard to find a psychologist or clinical psychologist willing to supervise me in the use of memory tests as they simply don't use them.

It might be possible in some Department of Health placements to gain this experience, but these positions are reserved for Masters of Clinical Psychology Students. It seems to me that Intern psychologists are being deliberately forced out of the field with impossible training standards.

(5) Unreasonable restrictions on “Time Limited Placements” by the PBA

Under the current internship system any placement that does not allow *all* competencies to be *completely* fulfilled is considered ‘Time limited’ and restricted to 1540 hours. (This applies to all time limited placements except for two small exemptions related to research competencies and lifespan competencies which are not relevant to the example I wish to discuss).

As you can see from the issues raised in the previous point, it is almost impossible for any placement to meet all competencies. In my case I have an exceptional placement in a large charity providing counselling services to a wide range of people, particularly clients who are disadvantaged and suicidal. My current placement allows me to meet all competencies except for a part of Competency 2 (assessment). Despite the fact that my current placement allows me to meet almost all competencies (approximately 80-90%) I have still been restricted to 1540 hours.

In other words if my placement only allowed me to meet 30% of competencies I would be limited to 1540, and if it allowed me to meet 90% I would also be limited to 1540 hours. There is no logic in this decision. It is a clear black and white approach that fails to assess each placement on its merit. I have written to Mr [redacted] at the PBA about this issue, have pointed out this discrepancy in the policy, but have been told this decision will not be changed. Although I have repeatedly asked for an explanation of how the figures of 1540 hours have been derived in regard to my placement which meets 80-90% of competencies, I have never been given one. My questions are simply not answered. It appears the PBA does not have to be transparent and accountable in its decision making. This point will be raised further on.

(6) Lack of Services willing to take interns on training

In my search for placements I have contacted numerous organisations. It is often difficult to find anyone willing to supervise an intern. The feeling among psychologists and organisations is that the PBA requirements are now too time consuming for them to participate. Many also feel that they are unable to supervise some areas such as memory assessments.

Currently there seems to be a degree of collusion between the Department of Health and the APS/PBA where Health will mostly just take clinical psych interns for most (although not all) placements. This means that we have these rigorous requirements on our training (eg memory testing) yet lack placements to full fill them. Clearly we will soon face a massive shortage of psychologists.

(7) Lack of Access to Masters Programs

Personally I have no problem doing a recognised Master's degree. After being faced with the intern program I think I'd prefer a Master's Degree (my last Master's degree was certainly easier than my intern program). It is just that there are no Masters degrees available.

If the PBA, the APS and the government want all psychologists to be trained at the Masters level, then the government needs to provide places for them. I can assure you that fewer and fewer people will want to train through an intern program (only to be less recognised than a Masters graduate). Unless more Masters placements are opened up and opened up very quickly Australia will face a massive shortage of psychologists within 5-10 years.

(8) Lack of Recognition of Prior Learning or Qualifications

Generally within the psychology profession there is a lack of recognition of prior learning and core competencies. This is so extreme that it can be ridiculous. For example one of my colleagues has a Masters in Adolescent Mental Health. She is not allowed any recognition of this if she chooses to study a masters of psychology program. It would be reasonable to argue that she at least be allowed exemption from one subject in the area of adolescent mental health, after completing a whole masters in the field. Psychologists who complete a Masters of Counselling are given no recognition for this study when applying for a masters of psychology course and frequently have to study basic counselling courses all over again.

In my case (I am studying a Post Graduate Diploma of applied psychology) I was forced to sit through a workshop on the 'Introduction to the Drug and Alcohol Field' This workshop cost me approximately \$300 in HECs fees (based on an estimate of what we are charged for our course) yet I have worked in drug and alcohol services for years, establishing and managing highly successful projects, programs and

teams. I have completed courses in the area, workplace training and my Masters thesis was in the drug and alcohol field. I was not allowed to miss this workshop or get RPL. I learnt nothing in the course, and even the course lecturer openly acknowledged the experience I had in the field.

I have also sat through a similar one day workshop on suicide risk assessment even though I had, only 6 months previously, completed a 2 day training course on the same topic, conducted by an organisation regarded as the leading provider of suicide intervention training in Australia. I also work for a specialist suicide intervention service and can conduct at least 3 or 4 suicide risk assessments in a standard work shift. Again, the workshop was useless.

I have a Masters in Health Science and have studied research design and methodology for 6 years at university, two at the post graduate level and have numerous experiences in research, but under the internship program I have to demonstrate competencies in research. All my previous published reports and peer-reviewed published papers count for nothing, even those in the mental health/psychological field.

To me this is unfair, exploitation of students and it is simply a way of ensuring that training organisations earn more income by retraining people. It also smacks of the arrogance of the PBA that high level professional experience and training is so unrecognised as 'non-psychological', when clearly this is highly debatable. Again this is just contributing to turning people away from the field of psychology.

Section J: Other

Lack of adequate financial remuneration for psychologists.

Psychologists are required to undertake a rigorous training program. We have 4 year honours degrees and then undertake a 2-4 year post graduate training program. Despite this we are paid very low wages in comparison to other professions. This will dramatically contribute to the future shortage of psychologists. For example in Australia an Engineer, who has a four year degree will earn much more than a 6 year trained generalist psychologist, right from the start. The starting salary for four year trained teachers in the public sector is now higher than the starting salary of psychologists in the public sector, and we only get 20 days annual leave a year, compared to teachers getting more than double that. The NGO sector, a big employer of psychologists, usually pays much less than the public sector.

It is more lucrative in most cases to be a nurse, a teacher or a plumber than it is to be a generalist psychologist. Why would anyone want to study for an extra two

years, including loss of income and extra HECS debt to earn more than a less stressful profession, some of whom enjoy substantially more leave entitlements than psychologists?

The government urgently needs to review the way in which psychologists are paid if it wishes to retain people in the profession.

Section J: Other

The Role and Scope of the PBA

(1) Lack of transparency and accountability of the PBA

The PBA appears to be answerable to no one. The rights of psychologists to appeal their decisions are not clearly explained and the process does not appear accessible to the average person.

As far as I can work out there is no independent authority to which we can appeal if we find the decision of the PBA to be unjust. Psychologists and interns who have asked to have a decision revised usually very quickly get an email from the same officer who made the decision, telling them they will not change their mind. Explanations and rationale for their decisions are not provided.

I will offer two examples. In this submission I have previously outlined that the PBA – for reasons completely unknown – do not allow the back-dating of log books. Psychology Interns regularly query this and are asked for an explanation – one to which they are entitled. No psychologist has ever been given an explanation – other than ‘We do not back date log books’. I would like the Senate Commission to challenge the PBA on this. If log books of an approved placement are completed and signed by the intern and supervisor, why can they not be accepted?

A second example relates to time-limited placements. As described before, any placement which does not meet all competencies (virtually impossible) is limited to 1540 hours. This applies whether the placement meets 80% of competencies or 20% of them. The PBA has not provided psychology interns with an explanation as to how or why this is so. I suspect this limit was arbitrarily made simply because it is easy and quick. It doesn't matter if it is unjust and inefficient if you are also an organisation that is not required to be transparent or accountable.

As stated before I have repeatedly emailed Mr _____ of the PBA asking him if I could have the decision to limit my placement hours revised (I would suggest that if my placement enables me to meet 80% of competencies I should be at least allowed to spend 2, 500 of my 3080 hours there. I have never been given an answer to any

of my detailed questions. His response, less than 12 hours after my detailed email was sent, simply stated 'You can work in your current placement as long as you like, but the hours won't count.' No explanation, rationalisation or justification.

That is the way the PBA works. Their decision making process is neither transparent or accountable.

(2) Inefficiency and Incompetence of the PBA

Currently the PBA is inefficient in several ways:

(1) *Difficulty contacting them.*

I have sent no less than 6 online enquiries through their official system and have NEVER, EVER had a reply. I have not even had an acknowledgement. Furthermore I do not know of any psychologist who has ever had a reply from the online system. We actually joke that it doesn't exist and it is just a front to fob off our queries.

In addition it is almost impossible to phone the PBA. When I last tried to phone them it took me four weeks of being on hold before I could get to speak to anyone. Of course my online enquiries were not responded to, forcing me to use the phone.

(2) *The PBA takes an inordinate amount of time to approve Supervision Plans.*

As stated in the main part of my submission it can take the PBA anywhere from 6-16 weeks to approve a Supervision Plan. With the lack of backdating of log books this means that interns lose as much as 400-500 hours of their placement. People's lives are literally placed on hold, they are placed under unreasonable stress, suffer severe loss of income, all in the name of training.

Again there is no point complaining to the PBA – if you do you are simple told 'the role of the PBA is to protect the public' (the under-current to this is 'from bad people like you!!'.)

(3) *The PBA appears to lose correspondence with alarming regularity*

Most psychologists have experienced the strange mail system of the PBA. I do not know how one organisation can be so incompetent with managing its internal mail. In my case my academic transcripts went missing, meaning I had to pay for them to be sent again. They appeared to have found some of the originals eventually, but not before I had paid twice. This might be excused if it wasn't for the fact that virtually

every intern finds some administrative mistake is made with every supervision plan submission. I need to put in a new one soon as I am adding a placement and I am scared to do so. I know they will lose something, take forever to approve it, will not back date it, and once again I will lose weeks and months of work.

(4)The decisions of the PBA are confusing and conflicting

Over a year ago I applied to study a Post Graduate Diploma of Applied Psychology at Macquarie University. At this stage this course was a psychology registration program under the '4 plus 2 pathway' of psychology registration. When I went to complete the paperwork I saw, right at the top of the application form, in bold letters, that students who had an honours degree over 10 years old would not be allowed to do the 4 plus 2 program. As I had already been accepted into the University degree, I queried this and asked what further training I needed to undertake.

The first stage of my process involved four weeks of trying to contact the PBA through on line enquiries and phone calls. When finally, after weeks of being on hold for an hour at a time, before giving up, you can imagine my excitement when someone at AHPRA actually answered the phone, after no less than one hour twenty minutes of being on hold. Imagine my disappointment when I was thoughtfully transferred to the physiotherapy department in Victoria, not psychology in NSW. This was just a small introduction to the incompetence of AHPRA and the PBA, incompetence which I now expect and accept.

Finally making contact with the right authority, with assistance of the physiotherapy registration team in Victoria, there began a long and confusing process which involved me jumping through endless hoops for the PBA. First I had to get all my academic transcripts and post them to them. They lost some. I posted them again. Then I had to send a resume. Then a letter of endorsement from the university. Finally I was told that the PBA were going to meet to discuss my case. The PBA had taken so long to decide that the HECS census date was going to be passed and I would be billed for the university course, regardless.

Finally I got a confusing phone message from the PBA saying that the Board 'was unable to make a decision as to what training I would need', so 'I should put in my Supervision Plan anyway and then they'd decide if I could continue'. So not only had I spent weeks performing for this faceless government bureaucracy, I was now required to stop work, go out and find a volunteer placement, complete a 30 page document, find a supervisor, begin paying them, and begin working for nothing, just in case the PBA decided, months down the track, to accept me? Despite the fact that their own documentation told me I would not be accepted?

When I rang to complain, I was told by Mr that 'the PBA does not yet have a policy on the holding of degrees over ten years old' and that my application would be

decided without this factor being taken into consideration'. If there was no policy, why was it clearly stated on their forms and why had I wasted months of my time and endured endless stress?

(5) The constitution of the PBA is such that it is unable to oversee the practice of psychology in an impartial and unbiased manner.

Currently the PBA consists of 8 members. Of these 8 members, ALL are current members/fellows of the APS. Five (62%) of the members are clinical psychologists, despite the fact that 80% of psychologists are NOT clinical psychologists. Three members are full time academics, a group of psychologists that share nothing in common with the practicing therapists the PBA deals with. There is no one on the PBA to represent the generalist psychologist.

The APS and the PBA are so inter-related that most psychologists lack anyone to independently represent their interests. This is one of the reasons why the PBA is not transparent and accountable. No one is forcing them to be. We urgently need the Minister for Health to step in and make the PBA transparent and accountable because no one else can.

Kate McMaugh