

Submission to Senate Community Affairs Committee: Commonwealth Funding and Administration of Mental Health Services

I write to convey my concern regarding the proposed changes to Government funding and administration of mental health services in Australia with particular reference to:

- (e) mental health workforce issues, including:
 - (i) the two-tiered Medicare rebate system for psychologists

The current two-tiered system for Medicare rebates recognizes the specialist training at postgraduate level, post a 4-year Bachelor degree, via either (1) a Master's of Clinical Psychology programme of study and an additional 12 months of supervised practice post-training (3 years full-time); or (2) a Doctorate of Clinical Psychology programme of study (3 years full-time). Currently, completing either path, and maintaining one's professional development, as per requirements set by the Clinical College of the Australian Psychological Society (APS), means that a "specialist clinical psychology rebate" is awarded to clients of clinical psychologists. The increased rebate for clinical psychologists recognizes the unique skill set developed by clinical psychologists, and increases access to appropriately trained psychologists for people with severe and complex mental health issues.

I argue that the current recognition of the specialization of clinical psychology via increased Medicare rebates be continued on the basis of:

- (1) the need to recognize and reward specialization within the profession of psychology;
- (2) the need to maintain excellence of practice within the profession and access to appropriately trained psychologists;
- (3) the importance of maintaining world-class standards in psychology and equivalence across major countries that provide leadership in healthcare

These points are expanded below:

- (1) the need to recognize and reward specialization within the profession of psychology;
- (2) the need to maintain excellence of practice within the profession and access to appropriately trained psychologists.

A single-tiered system of Medicare rebates conveys an understanding to the consumer and other health professionals that the skill level within psychology is all the same. The single-tiered system supports the notion that if one is a registered psychologist in Australia one can undertake any type of psychological activity. This idea is not supported by the findings of the Management Advisory Service of the National Health Review. In

1989, the Management Advisory Service to the NHS differentiated the health care professions according to skill levels. Skills in this sense referred to knowledge, attitudes and values, as well as discrete activities in performing tasks. The group defined three levels of skills as follows:

Level 1- "Basic" Psychology - activities such as establishing, maintaining and supporting relationships; use of simple techniques (relaxation, counselling, stress management)

Level 2 - undertaking circumscribed psychological activities (e.g. behavioural modification). These activities may be described by protocol.

Level 3 - Activities which require specialist psychological intervention, in circumstances where there are deep-rooted underlying influences, or which call for the discretionary capacity to draw on a multiple theoretical base, to devise an individually tailored strategy for a complex presenting problem. Flexibility to adapt and combine approaches is the key to competence at this level which comes from a broad, thorough and sophisticated understanding of the various psychological theories.

The group suggested that almost all health care professionals use level 1 and 2 skills and some have well developed specialist training in level 2 activities. The group went on to argue that clinical psychologists are the only professionals who operated at all three levels and (I quote) "it is the skills required for level 3 activities, entailing flexible and generic knowledge and application of psychology, which distinguishes clinical psychologists..."

This is consistent with other reviews which suggest that what is unique about clinical psychologists is his or her ability to use theories and concepts from the discipline of psychology in a creative way to solve problems in clinical settings.

During the successful *Work Value** case for Clinical Psychology in Western Australia in 2001 heard by the Full Bench Hearing of the Industrial Relations Commission, Anthony Cinchello, along with other expert witnesses, won an industrial case that reclassified clinical psychology. Industrial levels for clinical and general psychology were differentiated, accepted by the Industrial Relations Commission in Western Australia and now form the basis for levels and salaries for psychologists and clinical psychologists in Western Australia.

The means by which clinical psychologists attain their unique skill set is via in-depth and lengthy clinical training at post-graduate level within a course accredited by experts in psychology and education. He or she is selected for the course via a rigorous and competitive process. Students must partake in coursework, internships and a research thesis. They are trained by teachers who are experts in their respective areas, who have at least a PhD, but often Professorships in addition.

The contrast is a generalist psychologist who, following his or her four year degree, completes 2 years of supervised practice (the 4+2 model). There is no accreditation

process for this system. Quality control for the supervised practice is up to the individual supervisor and is, as a consequence, highly variable. The completion of a thesis fosters the student's development of superior critical thinking processes, his or her capacity to apply complex theories to practice and to solve complex problems. There is no requirement to complete a thesis following the 4 year degree within the 4+2 model.

Apart from psychiatry, no other discipline receives as advanced training across the lifespan and the entire spectrum of complexity and severity of mental health disorders as the clinical psychologist. Clinical psychology is the only allied health discipline whose entire postgraduate training is in the field of advanced evidence-based and scientifically-informed mental health assessment, diagnosis, case formulation, consultation, treatment, evaluation and research. As such, the clinical psychologist is frequently referred the most complex and severe mental health presentations. Clinical psychologists are well represented in high proportion amongst the innovators of evidence-based therapies, NH&MRC Panels, other mental health research bodies and within mental health clinical leadership positions.

Any cut to the Medicare clinical psychologist rebate directly undermines the most unique contribution of the clinical psychologist to evidence-based and scientifically-informed mental health treatment. The most vulnerable population cohort will be those who cannot afford to fully pay for their remaining mental health treatment, and it is very disappointing that the government is introducing inequality into the provision of mental health care in Australia.

*Work Value is an industrial term referring to the nature and complexity of the work and the minimum industry accepted qualifications required to undertake that work. It is the basis upon which salaries and conditions are set.

(3) Maintaining world-class standards in psychology and equivalence across major countries that provide leadership in Healthcare

Recognition of the specialization of clinical psychologists is not unique to Australia, both the American Psychological Association's (APA) Division of Clinical Psychology (USA), and the British Psychological Society's (BPS) Division of Clinical Psychology (UK), recognize clinical psychology as one of several specializations within psychology (see Appendices 1 and 2).

Not recognizing the specializations of practice within psychology is a backward step for Australia. Moving away from International standards set by leaders in healthcare is regressive. A possible consequence of this step is that we discourage clinical psychologists to move to Australia from the UK and the USA, missing out on their valuable skill base and knowledge. Conversely we may trigger in Australia a 'brain drain' where our best minds in clinical psychology choose to practice abroad where they are recognized and rewarded for their knowledge and skills.

Not recognizing and valuing the specialization of clinical psychology may discourage new graduates in psychology from enrolling in clinical psychology postgraduate courses, thus restricting the numbers of appropriately trained psychologists available in the future to assist people with complex and severe presentations.

The recognition of the need for clinical psychology services is seen in the high value attributed to this profession by the mental health system and the community of consumers and their families and carers. The support for this comes from:

- ❖ the recommendations of the State Mental Health Plan and the Ministerial Taskforce
- ❖ the multitude of successful psychological evidence-supported treatments reported in the scientific literature for many severe mental health disorders
- ❖ the cost effectiveness of psychological treatments
- ❖ positive consumer evaluations of Clinical Psychology services

The 1989 – 1990 National Health Survey demonstrated a high demand for Clinical Psychological services. 43,000 Australians consulted a psychologist over a two week period and required 63,000 consultations (Jorn, 1994). The skills and quality of services provided by Clinical Psychologists have also been recognised by the managers of mental health services in West Australia, General Practitioners and consumers.

In summary, abolishing the two-tiered Medicare rebate system in favour of a single-tiered system that does not recognise the unique skill set of the clinical psychologist:

- is regressive by International standards
- provides a disincentive for psychologists to seek specialised training
- devalues the specialised training available for psychologists
- is likely to lead to less clinical psychologists in Australia, where the demand for clinical psychology services has been clearly demonstrated
- restricts access to clinical psychologists for those who most need the services and can least afford it, ie those with the most severe and complex mental health issues
- is not consistent with current industry standards for psychologists

Submission made on behalf of:

Minds and Hearts: A Specialist Clinic for Asperger's Syndrome and Autism Spectrum Disorders

By Dr Michelle S. Garnett, MPsych(Clin) PhD MAPS MCCP
Clinic Director/Clinical Psychologist

Bibliography

APA website: <http://www.apa.org/ed/graduate/specialize/clinical.aspx>; accessed 27 July, 2011

BPS website: <http://www.clinicalpsychology.org.uk>; accessed 27 July, 2011

Cinchello et al. (1998), Increased Work Value: The case of Clinical Psychology prepared by the HSOA Clinical Psychology Negotiating Committee in support of Application No P39 of 1997 HSOA v Royal Perth Hospital & Others.

Jorn, A.F. (1994). Characteristics of Australians who reported consulting a psychologist for health problems: An analysis of the data from the 1989 – 1990 National Health Survey. *Australian Psychologist*, 29, 212 – 216.

Parliament of Australia's website:
http://www.aph.gov.au/senate/committee/clac_ctte/comm_fund_men_hlth/index.htm;
accessed 5 July 2011.

Appendix 1

American Psychological Association's (APA) definition of Clinical Psychology

The APA website provides the following public definition of clinical psychology:

Clinical Psychology is a general practice and health service provider specialty in professional psychology. Clinical psychologists assess, diagnose, predict, prevent, and treat psychopathology, mental disorders and other individual or group problems to improve behavior adjustment, adaptation, personal effectiveness and satisfaction.

What distinguishes Clinical Psychology as a general practice specialty is the breadth of problems addressed and of populations served. Clinical Psychology, in research, education, training and practice, focuses on individual differences, abnormal behavior, and mental disorders and their prevention, and lifestyle enhancement.

Appendix 2

British Psychological Society's (BPS) definition of Clinical Psychology

The BPS provide this information to the public on their website:

Clinical Psychology - one of the Registered Practitioner Psychology Professions

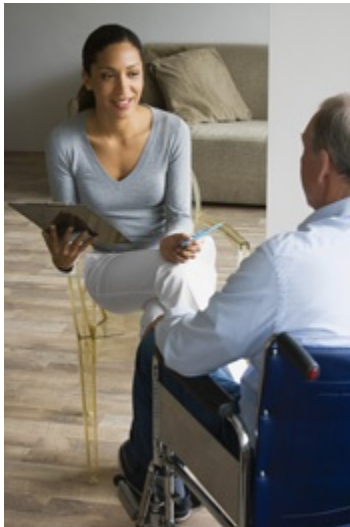
Psychology is the scientific study of human thought and behaviour. Many people are interested in psychology, and in fact it is one of the most popular degrees that can be studied at university. But having a degree in psychology is not the same as being a Registered Practitioner Psychologist. A Registered Psychologist is a legally regulated professional who has a postgraduate qualification in the application of psychological science to a particular issue.

There are currently seven types of Practitioner Psychologists:

- *Clinical Psychologists*
- *Counselling Psychologists*
- *Educational Psychologists*
- *Forensic Psychologists*
- *Health Psychologists*
- *Occupational Psychologists*
- *Sports & Exercise Psychologists*

How do clinical psychologists help people?

Every day clinical psychologists help a wide range of people of all ages with all sorts of problems. Some have particular emotional or mental health problems, such as depression or schizophrenia. Others have difficulties with their thinking (also known as 'cognitive' problems). These can take many forms, such as problems with memory or perception after a head injury, a learning disability or dementia.



There are many more areas of life where a clinical psychologist can help. These could include helping people manage and live with health conditions such as HIV, cancer or chronic pain, assisting people who have difficulties in maintaining relationships or providing advice about how to care for a child who

has been abused.

Whatever the problem, the clinical psychologist will consider what scientific research says about its probable cause and what will be likely to help.

Sometimes the clinical psychologist will be the one who then provides the help. Examples of this include seeing the person for a number of sessions to provide psychological therapy or giving advice on how to manage memory problems.

And sometimes the clinical psychologist will recommend other people who can help, perhaps advising them on the best way forward for the client.

Clinical psychologists are trained by the NHS, just like doctors and nurses, and most work there too.