

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

**TOR (e) (i) and (ii)**

I am a psychologist, currently generally registered, and am currently completing a period of further supervised practise and professional development, with a view to achieving specialist endorsement as a clinical psychologist. So far, I have completed extensive training to achieve this – 3 years undergraduate, 1 year honours, 5 years post-graduate (PhD in Clinical Psychology), and am now completing an extra years supervision and further clinically specific professional development. In sum, that is 10 years training in order to meet the training requirements to be able to provide a specific specialised service. I am of the view that it would be inappropriate to not recognise the distinction between clinical psychologists and non-specialist psychologists, and acknowledge the difference in the service that each provides.

I am in support of Anthony Cichello's opinion presented in his submission, and I quote and summarise his submission below.

**Clinical Psychology is an internationally industry-recognised specialisation of Psychology in its body of knowledge and practice of assessment, diagnosis, evidence-based and scientifically-informed psychological treatments of the full spectrum of mental health disorders across the total lifespan and across the widest range of complexity and severity. There is a clear and recognised differentiation between the services provided by generalist and clinical psychologists internationally (e.g. in the UK, refer to the Health Professions Council).** Removing Specialist Registration for Clinical Psychologists would make it much more difficult for consumers, GPs and other professionals to clearly identify from whom they should seek professional clinical psychology service provision. It would also be more difficult to prevent others from misrepresenting themselves as providing the same services as a Clinical Psychologist.

**In 2001 the Full Bench of the Industrial Relations Commission of Western Australia determined that there was a higher "Work Value" of the "Calling" of Clinical Psychology over that of general, or non-specialist Clinical, Psychology.** Please refer to Anthony Cichello's submission for elaboration.

**No other allied mental health professional receives as high a degree of education and training in mental health as the Clinical Psychologist. Other than psychiatry, Clinical Psychology is the only mental health profession whose complete post-graduate training is in the area of mental health.** Clinical Psychologists are trained as scientist-practitioners. This added emphasis on the scientific in university training enables the profession of Clinical Psychologist to bring research and empiricism to human service delivery and thus increase accountability. Empirical training equips the Clinical Psychologist with the skills to understand and contribute to new research, evaluate interventions and apply these empirical skills to their own treatment of patients and that of the mental health services themselves. This formal training also carries with it the obligation to provide to the betterment of the wider society within which the Clinical Psychologist works. Clinical Psychologists have a minimum of six years full time university training with two additional years of mandatory professional

supervision. Many students are completing either a Doctorate of Psychology with an additional formal year of training at the university, or a PhD in Clinical Psychology and thus adding a further two years to their formal university training.

As a result of their training, Clinical Psychologists have a thorough understanding of varied and complex psychological theories and have the ability to formulate and respond to both complex disorders and to novel problems, generating interventions based on this solid knowledge base. This very high level of specialist competence of Clinical Psychologists is acknowledged by all private insurance companies who recognise Clinical Psychologists as providers of mental health services.

Post-graduate university level training programmes for Clinical Psychology must be accredited by the Australian Psychological Society. This requirement insures uniform standards of excellence in Clinical Psychology training throughout Australia.

**The definition of a Clinical Psychologist is articulated in Commonwealth Medicare Legislation and incorporates the internationally recognised standard of specialised post-graduate professional training in Clinical Psychology (a minimum of seven years' training in total) and the requirement for demonstrated ongoing specialised Professional Development to maintain Specialist Clinical Psychology accreditation.** The Specialist Medicare Rebate is set at 150 percent of the generalist/non-clinical Psychology Rebate, which reflects the recognised differentiation between Clinical Psychology and other Psychology in the field of Mental Health.

In sum, the main sources in current Australian legislative and professional accreditation processes that provide a strong argument for the clear delineation of a Clinical Psychologist in the public interest within National Registration and Accreditation:

- **industry-wide accepted accreditation and specialist professional postgraduate (at Clinical Masters/Doctorate minimum entry level) training standards for Clinical Psychology in Australia, as opposed to a minimum four year degree for general (non-specialist) Psychology,**
- **2001 Industrial Relations Commission (Full Bench) determination of 'Work Value' for Clinical Psychology as distinct and higher than general (nonspecialist) Psychology, and**
- **2006 Commonwealth Medicare legislation which defined a Clinical Psychologist and Specialist Clinical Psychology Medicare Rebates**

Thank you for considering these issues.

On a matter of a separate TOR, I believe that cutting the available psychology sessions from "6 + 6 + 6 in exceptional circumstances" to "6 + 4" will greatly reduce the success of psychological interventions and result in increased ongoing mental illness in Australia. Please refer to submissions by the Australian Psychological Society regarding this.