



Baulkham Hills NSW 2153

26/07/2011

The Senate Committee on Commonwealth Funding of Mental Health

1. My name is Michelle Kathleen Mulvihill and I have been a practicing psychologist for the past thirty years.
2. I am an endorsed Counselling Psychologist and an endorsed Organisational Psychologist with AHPRA Registration. I am a full member of the Australian Psychological Society, a Member of the College of Counselling Psychologists and a Member of the College of Organisational Psychologists.
3. My qualifications include two Masters Degrees and a Doctorate in Philosophy, as well as hundreds of hours of professional development over the past thirty years.
4. In the office next to me is a 28 year old Clinical Psychologist who has one year's experience.
5. The Commonwealth Government has decided that this first year out clinical psychologist has more skills than I do as a counselling psychologist and therefore affords her the benefit of paying her substantially more under Medicare, per patient, than I am being paid.
6. The irony is that at the University where I taught clinical psychologists, this first year out clinical psychologist was one of my students.
7. Having worked at the coal face of mental health in NSW for over thirty years, seeing hundreds of patients, engaging in hundreds of hours of supervision, being a Lecturer in Psychology at two Universities, supervising interns and having twenty years experience in teaching counselling to postgraduate students, I now find myself unemployable, underpaid, un-acknowledged and **discriminated against**, because of the decision taken by the Commonwealth Government to not accept my training and qualifications and experience as being equal to that of a clinical psychologist.
8. I ask the Senate Committee to consider the implementation of a "Grandfather" provision for those of us who have deep experience, more than enough training and are properly

qualified in conducting clinical psychology but who are unable to practice because of the discriminatory practices and insights of the group who established protocols for Medicare rebates.

9. I also as the Senate Committee to conduct a review of the entire way in which decisions were made about psychologists and the rebates able to be received in relation to Medicare.

10. Reducing the number of sessions by clients to a maximum of eight per annum is a dangerous practice. I have been very successful in working with clients from the general public, charging Medicare rates (bulk billing) without charging any gap, and assisting them with huge improvements in their mental health over twelve sessions. Reducing this to eight sessions does not allow me to have the success I have had because there are not enough sessions and many people cannot afford mental health services without the medicare rebate.

Yours Sincerely,

Michelle K Mulvihill BA, G Dip Couns, MA, M Ed, PhD, MAPS