

Committee Secretary
Senate Standing Committees on Community Affairs
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Parliament House
Canberra ACT 2600
Australia

5/7/11

Dear committee members

I am a Senior Clinical Psychologist with the Alfred Adult Mental Health Service and also have a private practice in which I see clients who are not severe enough in presentation to be seen by public mental health services but who have significant mental health issues and are often at risk of deterioration. I find the balance of work between the private and public sector is highly beneficial for my private clients as I provide a level of expertise in the community that they cannot access in the public system due to not meeting the severity of presentation required for those services.

My concern is that my private clients who can see me only because they can access my services due to the current Medicare structure will not be able to do so if it is changed, as is currently being proposed. It is not uncommon for me to receive referrals from GPs of patients who have previously received treatment from other psychologists, but due to the complexity of their presentation they required clinical expertise for effective treatment. While there is a great need for psychologists with a variety of skill base and expertise, the difference between Clinical Psychologists and other psychologist is not broadly understood by the general public, and often, by community health professionals. However, the difference between the training and skill base of Clinical Psychologists is well recognised by all Area Mental Health Services, which is the reason they will only employ Clinical Psychologists into their mental health programs. Our skill in diagnosis, clinical evaluation, assessment and treatment of mental health disorders, as well as skill in research, service evaluation and development are known.

The prevalence of serious mental health issues in the community is now widely recognised. Similarly there is a very large body of evidence to support the use of specialist psychological interventions in the treatment of all major mental health issues, including high prevalence disorders such as generalised anxiety and depression, and low prevalence disorders such as Schizophrenia, Obsessive Compulsive disorder and Major Depression. What's more, many mental health difficulties have complex co-morbidity, such as substance abuse, trauma, and pervasive personality disorders, which require an advanced level of knowledge in psychopathology to effectively identify and treat. Clinical Psychologists are the only professionals, other than Psychiatrists, who have received training exclusively focused on the identification and evidence-based treatment of mental health disorders. Essentially, clinical psychology and psychiatry are the only two professions in which the public can feel secure in knowing what they are getting in terms of the level of training expected of these professionals. Furthermore, because most Clinical

Psychologists and Psychiatrists have been employed in Public Mental Health Services and as such have extensive experience in the most difficult to manage mental health issues. This expertise is invaluable when providing services in the private sector for sub-clinical patients.

In relation to people with more severe mental health issues I would like to argue that there needs to be an increase in the number available to them currently rather than a reduction. Most such clients are needing the current 18 sessions made available under 'exceptional circumstances'. These sessions often need to be stretched across the year, which is a measure taken not because they need less frequent treatment but to ensure they do not remain without psychological support for long periods of time. Many of these clients do not enter our public mental health systems as a direct result of the assistance they receive through privately practicing Clinical Psychologists. A drop in number of sessions will have dire consequences for such clients and a drop of rebates will mean many people will not be able to access the level of expertise their condition requires.

I urge you to give close thought to these issues and the importance of recognising the unique specialist expertise brought to the private sector by Clinical Psychologists. Please ensure our services can be accessed by people who need them.