

August 4th 2011
Senate Standing Committees on Community Affairs
PO Box 6100
Parliament House
Canberra ACT 2600
To the Senate Standing Committee,

Re: Better Access Cuts

I would like to comment on Terms of Reference:

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

(iv) the impact of changes to the number of allied mental health treatment services for patients with mild or moderate mental illness under the Medicare Benefits Schedule

I am a registered (Specialist) Psychologist who has completed a Master's Degree in Educational Psychology which requires thorough knowledge of psychometric assessments and identification and treatment of developmental and psychiatric disorders. I also have a Bachelor of Behavioural Science Degree as well as Post Graduate Diplomas in Psychology and Counselling Psychology. I am also an accredited STAP supervisor. My general and specialized psychological studies and supervision training extended over seven years. I have 18 years of experience working in the areas of Trauma counselling, Forensic psychology, Child and Adolescent psychology, Family and Couple relationship counselling, Drug and Alcohol rehabilitation, and Pain management (with many good outcomes in all areas).

Despite my qualifications and wealth of experience I am regarded as a "generalist" psychologist and not as "capable or as well trained" as someone who has completed a Master's Degree in "Clinical" psychology. Nor are my services considered to be equal in financial worth to clinical practitioners. That is a joke. I see there are many PhD level Clinical psychologists who have written to the Senate Committee saying exactly that – we "generalist" psychologists (e.g., anyone who does not have a Clinical Masters) are inferior practitioners.

I and many other psychologists believe that Medicare psychological services have been hijacked by the Clinical "elitists" and this has to change. We have all studied from the same text books, we belong to the same APS and AHPRA, with access to all manner of up-to-date professional development opportunities, and our practical experiences with clients vary but are often similar too. We all have an obligation to remain fully informed practitioners no matter what educational facilities we attended.

***** I am 100% in favour of a one tier system for billing psychological services.**

As for the second consideration:

The curtailment of services to individuals with mental health disorders is not a good move. If the same applied to GPs then someone with ongoing blood pressure or diabetes would only be allowed to have 10 visits and then would be left to their own devices... they know what's wrong and what medication to use... so away you go and help yourself! Too bad you have a chronic complaint.

In our stressful society there are many more people reaching out for counselling support. This is a preventative measure for many and there are lots of people who require only a few sessions of counselling to move on with their lives. There are many others who need more time and more counselling. The system is probably open to abuse by some psychologists and some GPs who work in tandem with one another. Yet in the end, it probably would be better to err on the side of caution rather than curtail services. Most psychologists are ethical practitioners. Clients usually opt out of counselling when they have had enough.

I note that the current Commonwealth Government have cut Job Capacity Account Services (as of December 2010) to save \$80 million or so. This allowed clients of Centrelink to attend 8 counselling sessions with psychologists at government expense. The service appeared to be well utilised for the time it was available.

There has been recent discussion about the high cost of funding school chaplains (these are usually young people who are hired to talk to high school students about various issues). Yet government schools are loathe to hire school psychologists (they usually demand that qualified psychologists wanting to work in schools also have a teaching degree – which is ridiculous).

Children and adolescents are the most vulnerable of all people to mental health problems and there are many services available for them. Youth mental health is very well funded and sometimes those funds are provided to wasteful organisations who do very little to help. That whole funding sector should be more closely scrutinized.

***** Continue to allow psychologists to provide the currently regulated number of services to clients with a medical review after eight sessions. Many clients neither take up nor require the full number of counselling sessions anyway unless they really need them.**
