

2 August 2011

Committee Secretary
Senate Community Affairs Reference Committee inquiry into Commonwealth Funding and Administration of Mental Health Services

PO Box 6100
Parliament House
CANBERRA ACT 2600

Dear Committee Members

I have worked as a Psychologist and then a Clinical Psychologist for forty years, during which I completed a Masters Degree in Educational Psychology and then a Masters Degree in Clinical Psychology. My fees were always free due to scholarships and the existence of free fees during the 1980s. When I completed my Clinical Psychology training I realised how much I did not know when working as a Psychologist without this qualification.

I have completed more than eight years of tertiary studies including a Graduate Diploma in Clinical Hypnosis from Queensland University of Technology. I have had my private practice for 15 years and it is well established with resources, including a range of psychological tests and a lending library. Previously I worked in various government departments in two states. I would like to elaborate on some concerns I have about the new funding arrangements and the higher payments for Clinical Psychologists.

1. I do not know of any other profession in which there is no higher payment for considerably more qualifications. Many of those psychologists who are asking for higher payments claim to have worked in psychology for a long time and therefore deserve higher payments based on experience. Many of those psychologists also had the opportunity to train as Clinical Psychologists when fees were free and there were fewer people competing for places in Clinical Psychology Masters degrees. While experience matters, as it does in my case, more knowledge through training is more important. I do not think that psychologists without Clinical Psychology training can understand the knowledge they lack.

2. If funding is only provided for 10 sessions as maximum number, it will disadvantage a significant number of clients with severe psychological problems. Some of those clients I see are severely distressed by psychological disorders which cause them major problems in coping with everyday life. To arbitrarily limit the number of sessions to 10 without any safety net for severely ill clients is very unfair. Many of those who are most in need of assistance need to be bulk billed due to their circumstances. When the 10 sessions are finished they cannot

afford to top up sessions with private health rebates, since they cannot afford private health coverage. They will be most affected by the proposed changes to the number of sessions being limited. Hence those most disadvantaged through severe illness will be most affected by these changes to this new limit to the number of sessions available.

3. If moderate to severe client are treated under ATAPS they will be treated by psychologists with less experience than those in established practices with the much more experience. The lower payments to psychologists under ATAPS do not attract Clinical Psychologists or psychologists with established practices. In my case I have set up a practice location with many resources for clients, most of which are not transportable. My practice also caters for children who certainly do not feel comfortable in a medical environment. What about the future generation and catering for their needs as well?

4. I am not critical of the system that has been in place for the last few years since it has provided opportunities for me to treat seriously ill clients and to bulk bill those who cannot afford to pay any gap fees. My practice is not located in a wealthy area and I look after clients from diverse socioeconomic backgrounds including those in welfare housing. The Better Access Program has, in my experience, assisted many people in need, including those at risk of suicide. No program can provide for all those with mental illness, but breaking up the existing structure of the Better Access Program will not achieve any improvement in the mental health care of those in the community I work.

Kind Regards

Clinical Psychologist