

To Whom It May Concern:

I am an endorsed Clinical Psychologist and a member of the APS Clinical College and am writing to address the proposed budget changes to the number of medicare rebated psychological sessions available per calendar year. This has been reduced from a maximum of 18 to a maximum number of 10 sessions per year. I believe this will be detrimental to the mental health care needs of those clients who do not meet the severity to be treated under the public mental health care system however also require more than 10 sessions for significant improvement to be achieved. Such a change will impact not only on the mental health of those more severe and complex clients but will also affect already overstretched community mental health teams who will be struggling to pick up the gap created by this reduction in service. We know that most clients do not need more than the allocated 12 sessions per calendar year for improvement to be obtained, however, the ones that do are often the ones in most need.

I also believe it is beneficial to retain the current two-tier system of medicare rebates. The idea that there is no difference between a Clinical Psychologist and a Generalist Psychologist is like saying there is no difference between a General Practitioner and a Psychiatrist. Clinical Psychologists have done additional postgraduate training that makes them experts in assessment, conceptualization, diagnosis, treatment and evaluation of mental health conditions using evidence-based treatment techniques. This training has been both time consuming and expensive and it is awful to think that the cost, time and effort many Clinical Psychologists have put into the development of their skills may go unrecognised. There may be no data as yet to confirm Clinical Psychologists obtain better outcomes than Generalist Psychologists, however, there is also no data to say that this is not the case. Again, this would be like requiring Psychiatrists to prove they obtain better outcomes for their patients over those cared for by General Practitioners. This would not be contemplated in the medical profession nor should it be contemplated in the psychology profession.

I hope there is further consideration of the negative impact the proposed changes may have on the mental health of people with the more severe and complex mental health needs.

Regards

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Dr Penny Mackay
Clinical Psychologist