

26th July 2011

To whom it may concern,

Re: the two-tiered Medicare rebate system for psychologists

I am writing this to you as a 6 year University trained psychologist. I have a Masters Degree in Educational and Developmental Psychologist, from Monash University. This was achieved at a huge significant cost: financially and in terms of time and mental energy. In my practice I counsel children and their parents; and, I provide assessments for a range of developmental conditions including Autism Spectrum Disorders, Intellectual Disabilities, ADHD and conduct learning assessments. I chose to specialize in this area of work and therefore chose the Educational and Developmental Masters. The counselling and some of the assessments I conduct attract Medicare rebates.

However, due to the current legislation clients who come to see me under the Better Access program receive less Medicare rebate than if they saw another 6 year University trained psychologist who just happened to do a course with a different name and a couple of different electives; namely a clinical psychology course.

This situation:

1. Is **inequitable**. Both 'types' of psychologists have invested 6 years of time, money and effort and subsequent professional development. Yet by virtue of choosing a course with some different electives current legislation means that one psychologist ends up with a distinct business advantage. A client choosing a clinical psychologist pays less.
2. Is **not** based on evidence of better treatment being provided by a clinical psychologist over myself. Nor of which psychologist is the best trained and can provide the best outcomes. There is a significant overlap between the types of clientele that practising psychologists see regarding of their speciality. There is no evidence that clinical psychologists see more difficult clients or have harder jobs. In fact I would argue that the distinct business advantage the government has handed them has made their job easier and much less stressful than it is for psychologists such as myself who are not enjoying a business advantage and who instead worry constantly about how much business clinical psychologists are taking away from them and what else the government may do to undermine their livelihood.
3. **Devalues** the role of the majority of psychologists who are not clinical psychologists, and the arbitrary distinction implies an inferiority that has no basis in fact or logic.

I am looking for fairness and equality and hope that when you look at the issues and examine the facts logically you can see that the exclusivity given to a small yet politically powerful group of psychologists is quite arbitrary and is doing a great deal of harm to the psychology profession as a whole and to individuals such as myself.

I also wish to bring to your attention that in my reading of various letters and publications there appears to be some confusion of terms with various authors using the terms 'general psychologist' and '4+2's' interchangeably implying that only clinical psychologists are 6 year University trained, this is completely incorrect and the distinction needs to be understood by all parties to this debate. Six year University courses are undertaken by many people who become psychologists and who have chosen to specialize in various areas of psychology including counselling, educational and developmental, clinical, etc.

Regards

Kim Dunn

B.A., Grad. Dip. Ed. Psych., M. Psych (Ed & Dev). MAPS

(PSY0001124624)

Narre Warren Victoria 3805

P.S.

I have included a number of facts below which have probably already been brought to your attention.

- The 2011 Better Access evaluation report makes it clear that all psychologists are currently working with as distressed and complicated clients- moderate to severe conditions; all psychologists are using similar treatment approaches; all psychologists are obtaining positive outcomes in clients; all psychologists' clients report high levels of satisfaction with the service.

- The only differences between psychologists reported in the Better Access report is that 'clinical' psychologists are more likely than 'generalist' psychologists to be working with higher income and urban clients; are more likely to be charging a gap fee; and are paid a higher rate by Medicare.
- 'Generalist' psychologists are more likely to be working with lower income and rural/remote clients; and are less likely to be charging a gap fee.
- Paying 'clinical' psychologists the higher Medicare rebate rate has cost the Australian taxpayers an additional \$134 million than if they were paid the same as the rest of us. No additional services, no higher quality and no better outcomes were achieved for that \$134 million.
- If 'clinical' psychologists were superior in any way, the only relevant research would have demonstrated this outcome - it has failed to.
- Clinical psychology is what psychologists do in a clinical setting, treating clinical problems. There is no exclusive ownership of this term.
- Clinical skills are generic psychology skills possessed by all registered psychologists.
- All 'generalist' psychologists have participated in ongoing and additional education training, either in a range of graduate diplomas, or masters degrees or PhDs, or in years of professional development training conducted by hands-on practitioners (not academics).
- Recent APS research clearly demonstrates that the vast majority of Australia's psychologists (around 80%) have always been extremely diligent and active in seeking ongoing training.
- Our profession has been 'hijacked' by a clique of self appointed elites who are in the same cohort of academic and 'clinical' psychologists.
- The national board of the PBA is grossly unrepresentative of Australia's psychologists. 100% of its members who are members or fellows of the APS (whereas only 66% of Australian psychologists are members of the APS). 63% of the psychologists on the PBA are 'clinical' psychologists (whereas only 14% of Australia's psychologists are 'clinicals'). 38% of the psychologist members of the PBA are academic clinical psychology teachers, whereas only 7% of Australian psychologists are academics.
- The same cohort of academic clinical psychology teachers also dominate the leadership positions in the APS.
- As such, a massive conflict of interest exists in the governance and administration of our profession, to such an extent that only non-psychologist professional administrators can now be trusted with the PBA role.