

Community Affairs, Committee (SEN)

This e-mail is to advise that I am strongly opposed to the proposed reduction of sessions for psychologists under the Medicare system. I am also strongly opposed to continuing with the unjust two-tier system of Medicare rebate.

I am a “generalist” psychologist working in private practice. I trained under the 4 + 2 system of psychology. I was trained and supervised in an integrated community psychiatric service where I obtained skills in psychological clinical assessment, and psychological treatment of clinical problems. I have also spent many years working as a psychologist in trauma rehabilitation, and in a maximum security prison setting.

I find it offensive when some clinical psychologist colleagues assert that “generalist psychologists” are not as well trained as themselves. All psychologists are 6 year trained (none are 4 year trained). 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 competent registered psychologists.

All “generalist” psychologists have participated in ongoing and additional education and training. This has either been in a range of graduate diplomas, masters degrees and PhDs; or in years of professional development training conducted by hands-on qualified practitioners. 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.

The 2011 Better Access evaluation report makes it clear that all psychologists are currently working with equally distressed and complicated clients. It further shows that all psychologists are using similar treatment approaches, and that all psychologists are obtaining positive outcomes with their clients. Most importantly, the Better Access evaluation shows that all psychologists’ clients report high levels of satisfaction with the service that they had received.

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. They

are also more likely to be charging a gap fee; and are paid a higher rate by Medicare.

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 – and it has failed to do so.

I therefore ask that the two-tier system of Medicare rebate be abolished. We are providing an equal service to our clients, and should be paid equally for this service.

Further, the majority of my clients are low to middle income earners. They would not be able to afford to continue therapy without the current Medicare rebate. Reducing sessions from 18 to only 10 per year would greatly disadvantage them in their quest for good mental health.

Thank-you for considering these important changes to the current system.

Yours sincerely,

Ms. Dianna Hanley
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