

Committee Secretary
Senate Standing Committees on Community Affairs
PO Box 6100
Parliament House
Canberra ACT 2600
Australia

23rd July 2011

**RE: Senate Community Affairs Reference Committee inquiry into
Commonwealth Funding and Administration of Mental Health Services -**

To the Senate Enquiry,

I wish to address the following Terms of Reference:

First: The proposed abolition of the two tier system and the cuts to rebated session numbers will have direct significant ramifications for the most severely complex mentally ill individuals who are attempting to manage in the community.

Secondly: That Clinical Psychologists are the group of psychologists uniquely trained to treat the severely mentally ill members of society. While it is acknowledged that Clinical Psychology is one of nine equal specialisations within Psychology, all Psychologists are equal but are not the same. Each area of specialisation truly deserves a specialist rebate for that which is the specialist domain of that area of psychology (e.g. neuropsychology, health, forensic, family and relationship counselling, community, exercise and sport, education and developmental, and organisational). However, Clinical Psychology is the only profession, apart from Psychiatry, whose entire accredited and integrated postgraduate training is specifically in the field of lifespan and advanced evidence-based psychopathology, assessment, diagnosis, case formulation, psychotherapy, evaluation and research across the full range of severity and complexity. Clinical Psychologists are well represented in high proportions amongst the innovators of evidence-based therapies, NH&MRC Panels, other mental health research bodies and within mental health clinical leadership positions.

Finally: Clinical Psychology is a unique specialised group and, to undertake a comprehensive treatment of individuals with severe mental illness, more than thirty sessions per annum are sometimes required. In this way, Clinical Psychologists should be treated as Psychiatrists are under Medicare as both independently diagnose and treat these client cohorts within the core business of their professional practices.

I therefore wish to unequivocally support my clinical psychologist colleagues in relation to these matters.

Thank you

Peter Wilson, BA, Post Grad. Dip. (Adol.&Child Psych), MPSYCH (Ed&Dev), IBP
(Clinical), MAPS