To whom it may concern,

RE: Commonwealth Funding and Administration of Mental Health Services.

My wish to become a Professional Psychologist was founding in a desire to serve my community to the best of my abilities. I had no desire to be set apart and included or excluded from other professional psychologists who work at the "coal-face" of humanity providing emotional and mental support to those most in need, and often initially in crisis.

I worked hard to attain Honours' Degrees (Double) and also a Masters Degree in Psychology, and have worked in the field for the last 15 years.

Damage has been done to my Profession through the in-fighting of professional bureaucratic psychologists, who have successfully anointed one pathway of learning above another. I shall also point out that these psychologists, are usually based in administrative, research or teaching practices and have very little to do with the "hands-on" required in psychological treatment practices.

Further damage has been done to publically announce that one stream of learning and experience is superior to another, and the unequal pay rates has served to further cement this in the minds of GP's and referring agencies within the community

The result has been that some of us have greater access to funding, denied by others of us- it's a derisive state of operation.

I was involved in the Better Outcomes Pilot Project, and know from the results (which were objectively measured) of those clients who sought our services; there was no difference between those of us who have Clinical Masters degrees and those of us who did not.

This finding is supported further in the "Error of the 3 E's" in the two tier system:

- 1 Evidence: the evidence of the Better Access evaluation shows NO DIFFERENCE between clinical and generalists
- 2 Equity: it is therefore outrageous that some Australians receive almost \$40 more rebate per treatment consultation that others for exactly the same service
- 3 Ethics: the Better Access guidelines restrict 'generalist' psychologists' treatments to 'so-called 'Focused Psychological Strategies' denying 'best practice' treatments, and limiting consumers to lesser treatment approaches.

A wider sphere of consultation must be generated to establish appropriate boundaries within the profession- and not controlled, manipulated and managed by professional bureaucrats, who quite frankly "sold out" 80% of its Members by promoting the two-tiered system of inequality, with no empirical basis to support their self-interest. AND have sought though various mean to cover up this devious act.

I write in response to the following statement recently reported by The Senate Community Affairs Committee:

"The Senate Community Affairs Committee has concluded that there are no grounds for the twotiered Medicare rebate system for psychologists and recommends the single lower rate for all psychologists including clinical psychologists....."

I recommend that there is one standard payment for all psychologists, and that this is at the HIGHER rate for all.

I hope this has been of assistance to the enquiry.

Please feel free to contact me via email for further information.

Kind regards