

SUBMISSION TO SENATE COMMUNITY AFFAIRS REFERENCE COMMITTEE

Re the following Terms of Reference

Community Affairs References Committee for inquiry and report by 16 August 2011:
The Government's funding and administration of mental health services in Australia,
with particular reference to:

- (a) the Government's 2011-12 Budget changes relating to mental health;
 - (b) changes to the Better Access Initiative, including:**
 - (i) the rationalisation of general practitioner (GP) mental health services,
 - (ii) the rationalisation of allied health treatment sessions,**
 - (iii) the impact of changes to the Medicare rebates and the two-tiered rebate structure for clinical assessment and preparation of a care plan by GPs, and
 - (iv) the impact of changes to the number of allied mental health treatment services for patients with mild or moderate mental illness under the Medicare Benefits Schedule;**
 - (c) the impact and adequacy of services provided to people with mental illness through the Access to Allied Psychological Services program;
 - (d) services available for people with severe mental illness and the coordination of those services;**
 - (e) mental health workforce issues, including:**
 - (i) the two-tiered Medicare rebate system for psychologists,**
 - (ii) workforce qualifications and training of psychologists, and
 - (iii) workforce shortages;
 - (f) the adequacy of mental health funding and services for disadvantaged groups, including:
 - (i) culturally and linguistically diverse communities,
 - (ii) Indigenous communities, and
 - (iii) people with disabilities;
 - (g) the delivery of a national mental health commission; and
 - (h) the impact of online services for people with a mental illness, with particular regard to those living in rural and remote locations and other hard to reach groups; and
 - (j) any other related matters.
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I am unable to address all of the above Terms of Reference but will focus on the cutting back of the number of sessions that clients can receive with a psychologist per year and possible changes to the current two-tiered rebate.

I would like expand on the education and training of Clinical, as distinct from General (predominantly Counselling) Psychologists:

Historically there have only been a small number of Clinical psychology courses and only those students with outstanding academic scores were accepted into those programs. In my own case I did my undergraduate and Masters training at Melbourne University, 1974-1982. I achieved First Class Honours in my fourth (Hons) year and won a scholarship to do Post-graduate training. Without having achieved this standard I would not have been accepted into the course as there were interstate applicants, as well as Victorian, and the competition for 10 places was intense

I am grateful for the training provided in my clinical masters, which included a placement of 6 months in the Psychiatric Ward of a hospital, and supervised therapeutic work with adults and children. I graduated from this intensive training with the and necessary clinical skills to provide the best possible outcomes for a broad range of clients.

I work, as a Clinical Psychologist in private practice, in the City and in an inner suburb of Melbourne and see a variety of clients (adults, adolescents and children from all walks of life and with many different mental health difficulties). My past experience in hospitals

(Prince Henry's and Western Hospital, Sunshine) has been invaluable to me in understanding severe mental illness. As a person who has provided Post-Graduate teaching and supervision, I know very well that it is impossible to provide even placement experience in hospitals for other than Clinical students. General Psychologists have NO experience whatever in working in hospital teams with psychiatrists and Mental Health nurses.

Most are trained only in Counselling, which is a superficial advisory role in relation to their clients and requires very little conceptual understanding of psychopathology.

If changes are made to the current two-tiered Medicare system it will demonstrate that the Government and others providing for the mental health needs of Australian have no real understanding of the difference between stress induced by external circumstances and serious mental illness. Those suffering from the latter are deprived of fully professional treatment if referred to a General rather than a Clinical Psychologist.

Yours sincerely,

Rosemary Grahame
Clinical Psychologist