

The Committee Secretary
Senate Standing Committees on Community Affairs
Re: Commonwealth Funding and Administration of Mental Health Services
PO Box 6100
CANBERRA ACT 2600

Community.affairs.sen@aph.gov.au

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Re: Generalist vs. Clinical Rebate

Dear Senator

I would like to comment on the following Terms of Reference of the Senate Community Affairs Committee's Inquiry into the Government's funding and administration of mental health services in Australia, with particular reference to the two-tiered Medicare rebate system for psychologists.

The training of clinical psychologists differs from generalist psychologists and other allied health professionals. There is a required minimum of six years of university level training. The last two years of university specifically focuses on the diagnosis, assessment and treatment of severe mental health problems. This first year (5th year) of the clinical masters program includes one year of close supervision under highly trained clinical psychologists at a university based psychology clinic. The second final year (6th year) includes two practicum placements (once again) under the close supervision of highly trained clinical psychologists. This training includes a specific focus on meeting *rigorous* accountability and ethical requirements. Even after you complete the masters program you *still* must still engage in an additional two years supervision (under a highly trained clinical psychologist) to be finally endorsed as "clinical psychologist." This results in eight years (in total) of clinical training.

Prior to studying psychology I worked for 12 years in the government and non-government sectors as a Social Worker. At various stages of my Social Work career I worked alongside clinical psychologists and generalist psychologists. I also had this opportunity as psychologist in training while i.e. attending professional development training, APS meetings and during my final year placements (6th year). During this time, I observed vast differences in the knowledge and approach of generalists vs. clinical psychologists in understanding, formulating and providing evidence based practice to disadvantaged clients.

Given the extensive training, clinical psychologists are provided regarding the diagnosis and treatment of a variety of complex psychological disorders, in particularly formulating specific evidence based treatment plans. Given the additional years of university level training (which is both costly and demanding), as well as the higher expectations in regards to ongoing professional development, it is reasonable that these differences are reflected in the rates of remuneration for clinical psychologists. In order to maintain the specialist registration, clinical psychologists also have higher overheads for membership fees and specialist professional development activities.

I would like to request that the review committee consider maintaining the current two-tier system of Medicare rebates, with the upper rebate representing clinical psychologists' extensive training, qualifications and specialist services that they provide to clients with complex mental health problems.

Yours sincerely,

Anonymous.