To the Senators involved in the inquiry to the changes in the Medicare system.

We are in private practice in an area which has a demographic which includes a low socio-economic community.

We also have a number of people suffering from mental illnesses of varying degrees.

We believe that some of the changes that would be truly detrimental to the community, in particular the consideration of lowering the number of visits to 10 per year. Some of the people we deal with are so challenged that the 12 (18 in extreme cases) are often not enough to resolve their issues.

With the changes to the Public Mental Health system, we find that the number of patients being referred to us is increasing. With respect, we feel that more funding rather than less would be advantageous particularly in light of the stressors being experienced in the community. Many people would have little or no access to counselling without the valuable assistance from Medicare.

In relation to the training and the perceived differences between Clinical and other Psychologists. I am one of those people who come under the 4 + 2 category and believe the training I received under a supervised practice programme to have been extremely beneficial and thorough, often with more "hands" on experiences than provided during a Masters degree. I recently enrolled in a Masters and found that I had to meet the same competencies that were expected and had already been achieved in the supervised practice programme.

It is also interesting to note that because of our experience, my business partner and I are often asked for opinion and advice by Clinical Psychologists with less experience.

Perhaps then some consideration may be given to increasing the basic Medicare rebate to come closer to that currently given to the Clinical Psychologists.

If you would like further input, we would be happy to assist.

It would be appreciated that our names and contact details be withheld for privacy.