



THE AUSTRALIAN
CLINICAL PSYCHOLOGY
ASSOCIATION

Submission in response to Exposure Draft:
Guidelines on area of practice endorsements

Contact:

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Chair, the Psychology Board of Australia

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Dear Professor Grenyer,

Thank you for this opportunity to comment upon the Psychology Board of Australia's (PBA) draft guidelines on areas of practice endorsements. This is a subject of deep concern for the Australian Clinical Psychology Association (ACPA) as ACPA is the only national organisation that solely represents those clinical psychologists who meet the PBA training standards for endorsement in clinical psychology. ACPA appreciates the efforts of the Board to ensure a fair and equitable approach to all matters of registration for members of the profession, while upholding the responsibility to protect the public. A significant component of this protection involves providing adequate information to the public to enable them informed choice of a psychologist, particularly in areas of endorsement in specialist areas. ACPA strongly supports the overarching standards of the PBA for endorsements, particularly in clinical psychology.

ACPA supports the use of titles in areas of endorsement as laid out in the Exposure Draft. However, we are extremely concerned by the lack of an adequate title for students enrolled in post-graduate training for endorsed areas of practice. In post-graduate training in clinical psychology, students are required to undertake placements in Departments of Health, such as hospitals and Community Mental Health Services, where they are expected to see patients with relative independence. The current title of 'provisional psychologist' undermines the confidence of the public, department administrators and potential supervisors in the capacities of these students who would have already undertaken at least a year of intense full-time academic and clinical training within the university setting. We believe it is essential to distinguish these post-graduate students from provisional psychologists undertaking a supervised practice pathway to general registration. We suggest the term 'intern [specialty] psychologist' be used as this equates to terminology utilised in Medicine, as does the 'registrar' title. Furthermore, we propose that those registrars in Western Australia training for specialist title be permitted to use the title 'specialist clinical psychology registrar,' or 'specialist registrar (clinical psychology)'.

ACPA fully supports the qualifications required for endorsement as laid out in the Exposure Draft and we encourage the PBA to continue to move towards standards that are internationally competitive in the areas of endorsement/specialist areas.

ACPA also supports general registration and entry to the registrar program for those undertaking a Masters program once they had completed all academic, placement and research requirements. However, the consideration for Doctoral students is not as straightforward. As proposed, the guidelines would disadvantage those undertaking Doctoral programs that are integrated programs of study spread over three years, as opposed to those undertaking a stand-alone Masters program with the addition of a year of advanced training to complete the Doctoral requirements. Specifically, students who complete a programme that comprises a stand-alone Masters for the first two years would be eligible for registration

at the completion of those two years, however, those undertaking an integrated Doctoral program may not be eligible. For example, students enrolled in the integrated Doctoral programme at the University of Sydney have completed an intensive academic and clinical training on campus and only one external placement at this point in time. This is due to the additional intensive training provided in the University training clinic that is designed to take a full year and the additional academic demands of a Doctoral program of study. These students are thus disadvantaged as they are not eligible for general registration until they have completed a further 6 month external placement, despite all other requirements of a Masters program being met.

In terms of the registrar program, there needs to be clarity as to the program's purpose and goals for each area of endorsement that demonstrate the relevance of the content of the program. For example, direct work with clinical populations is an essential core requirement to build expertise as a clinical psychologist. We do not consider that 176 hours of direct client contact per annum adequate to build this expertise, essentially allowing endorsement on completion of only 352 hours of client contact.

Furthermore, we are deeply concerned about the definition of practice as applied to clinical areas of endorsement such as clinical psychology, clinical neuropsychology and forensic psychology. In these areas "management, administration, education, research, advisory, regulatory or policy development roles" may not involve direct client contact or allow maintenance of clinical skills. Clinical areas of endorsement need to include work directly involved with clinical populations to meet recency of practice requirements. Anything less places the public at risk from clinicians who are de-skilled, and with outdated knowledge, returning to work with clinical populations.

Finally, we are strongly convinced that the competencies for an area of practice endorsement need to be clearly differentiated from those of other areas of endorsement. While many skills and much knowledge is core to all areas of endorsement, clear statements differentiating, for example, counselling psychology, from clinical psychology are necessary to guide the public in choice of psychologist. The encroachment on the domain of clinical psychology by other endorsed areas of practice needs to cease, or these areas of endorsement need to be disbanded or incorporated as sub-specialties of clinical psychology.

Thank you for this opportunity to make representation on behalf of those clinical psychologists who hold post-graduate qualifications in clinical psychology and meet the standards established by the PBA for endorsement as clinical psychologists. We appreciate your consideration of our concerns relating to post graduate students and the issues we have raised in terms of recency of practice. We thank you for the enormous efforts made by members of the Board and wish you well in reaching fair and just solutions to the dilemmas that confront the profession at this time of transition and change.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Judy Hyde', written in a cursive style.

Dr Judy Hyde

President, the Australian Clinical Psychology Association.