Consultation paper on registration standards and related matters

Issued by the Psychology Board of Australia
under the authority of Associate Professor Brin Grenyer, Chair

27 October 2009

If you wish to provide comments on this paper, please lodge a written submission in electronic form, marked ‘Attention: Chair, Psychology Board of Australia’ at natboards@dhs.vic.gov.au by close of business on 24 November 2009.

Please note that your submission will be placed on the Board’s website unless you indicate otherwise.
At the time of issuing this consultation paper the Board is operating under the *Health Practitioner Regulation (Administrative Arrangements) National Law Act 2008* (the Act). However, the approach to the paper and consultation has been informed by the proposed provisions of the Health Practitioner Regulation National Law Bill 2009 (the Bill, the proposed national law), which was introduced in the Queensland Parliament on 6 October 2009. Nothing in this paper is intended to pre-empt consideration of the Bill in that parliament. A copy of the Act and a link to the proposed national law are available at [www.ahpra.gov.au](http://www.ahpra.gov.au).
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1 Introduction

1.1 Legislative requirements

This consultation paper has been developed under the requirements of the Health Practitioner Regulation (Administrative Arrangements) National Law Act 2008 (the Act), taking into account a requirement of the Health Practitioner Regulation National Law Bill 2009 (proposed national law). The Act empowers national boards to oversee the development of health profession standards. The proposed national law includes a requirement for national boards to undertake wide-ranging consultation on proposed registration standards, codes and guidelines.

Other matters needing ministerial approval also require consultation to ensure that boards take into account stakeholder views, and so ministers know that consultation has occurred when they consider board proposals.

1.2 Contents of the consultation paper

This consultation paper covers proposals from the Psychology Board of Australia on the following issues:

Section 2 Proposals for mandatory registration standards (required by all boards).

Section 3 Proposed qualification requirements for general registration.

Section 4 Proposal for specialist registration for the psychology profession.

Section 5 Proposals for endorsement of registration for qualified psychology supervisors.

The consultation paper brings together proposals for the registration of psychologists in Australia. The psychology workforce is a significant social asset that provides services to individuals and groups, children, adolescents, adults and the elderly, from clinical mental health services to commercial and industrial services. There are over 25 000 psychologists in Australia, approximately the same number as General Practitioners of Medicine. Psychologists contribute to the public sector (including health, education, justice, social and community services and defence), and to the private sector (including community groups, businesses, elite sports and in private practice, particularly primary care through Medicare and other health initiatives). A viable, high-quality and safe psychology workforce is required for the Australian community. The registration standards, proposed specialist registration and endorsement for supervisors address this requirement and take into account international psychology standards.

The proposal for specialist registration and the specialties proposed are consistent with current regulation arrangements for specialists (in Western Australia), college membership of the Australian Psychological Society, and specialist recognition from Medicare and the courts. It therefore includes registrants who have completed doctorate or equivalent qualifications, such as specialist master’s degrees plus further supervised specialist practice and training.
With respect to the proposal for an endorsement as a psychology supervisor, while all State and Territory registration boards authorise supervisors and accord them special scope of practice privileges based on additional training and experience, this proposed endorsement would provide for psychology supervision to be regulated, and would recognise endorsed registrants as having special responsibilities for the safety of practice and the competence of their intern psychologists.
2 Mandatory registration standards (all boards)

The proposed national law provides for national boards to develop registration standards for approval by the Australian Health Workforce Ministerial Council (the Ministerial Council). Under the legislation, boards must develop a registration standard on each issue shown in Table 2.1.

Table 2.1 Mandatory registration standards

<table>
<thead>
<tr>
<th>Issues for mandatory standards</th>
<th>Common or individual board standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Criminal history</td>
<td>Common standard for all boards</td>
</tr>
<tr>
<td>English language</td>
<td>Common standard for all boards</td>
</tr>
<tr>
<td>Professional indemnity insurance</td>
<td>Specific to individual boards</td>
</tr>
<tr>
<td>Continuing professional development</td>
<td>Specific to individual boards</td>
</tr>
<tr>
<td>Recency of practice</td>
<td>Specific to individual boards</td>
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</table>

Common standards across all boards are proposed for criminal history matters and English language requirements.

The proposed national law will require a national board to undertake wide-ranging consultation on its proposed registration standards before they are submitted to the Ministerial Council for approval. A background paper on these mandatory standards for psychology is at the end of this paper in Attachment A.
2.1 Criminal history

The following draft common registration standard on criminal history is proposed to be used by all registration boards.

<table>
<thead>
<tr>
<th>Psychology Board of Australia</th>
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</thead>
<tbody>
<tr>
<td>Criminal history standard</td>
</tr>
</tbody>
</table>

**Summary**

In deciding whether a health practitioner’s criminal history is relevant to the practice of their profession, the Board will consider the 10 factors set out in this standard. While every case will need to be decided on an individual basis, these 10 factors provide the basis for the Board's consideration.

**Scope of application**

This standard applies to all applicants seeking registration or renewal of registration, and registrants.

**Requirements**

In deciding whether a health practitioner’s criminal history is relevant to the practice of their profession, the Board will consider the following factors.

- **The nature and gravity of the offence or alleged offence and its relevance to health practice.**
  - The more serious the offence or alleged offence and the greater its relevance to health practice, the more weight that the Board will assign to it.

- **The period of time since the health practitioner committed, or allegedly committed, the offence.**
  - The Board will generally place greater weight on more recent offences.

- **Whether a finding of guilt or a conviction was recorded for the offence or a charge for the offence is still pending.**
  - In considering the relevance of the criminal history information, the Board is to have regard to the type of criminal history information provided. The following types of criminal history information are to be considered, in descending order of relevance:
    1. convictions
    2. findings of guilt
    3. pending charges
    4. nonconviction charges; that is, charges that have been resolved otherwise than by a conviction or finding of guilt.

- **The sentence imposed for the offence.**
  - The weight the Board will place on the sentence will generally increase as the significance of the sentence increases, including any custodial period imposed. The Board will also consider any mitigating factors raised in sentencing, where available, including rehabilitation.

- **The ages of the health practitioner and of any victim at the time the health practitioner committed, or allegedly committed, the offence.**
  - The Board may place less weight on offences committed when the applicant is younger, and particularly under 18 years of age. The Board may place more weight on offences involving victims under 18 years of age or other vulnerable persons.

- **Whether or not the conduct that constituted the offence or to which the charge relates has been decriminalised since the health practitioner committed, or allegedly committed, the offence.**
  - The Board will generally place less or no weight on offences that have been decriminalised since the health practitioner committed, or allegedly committed, the offence.
The health practitioner’s behaviour since he or she committed, or allegedly committed, the offence.

- Indications that the offence was an aberration and evidence of good conduct or rehabilitation since the commission, or alleged commission of the offence, will tend to be a mitigating factor. However, indications that the offence is part of a pattern of behaviour will tend to have the opposite effect.

The likelihood of future threat to a patient of the health practitioner.

- The Board is likely to place significant weight on the likelihood of future threat to a patient of the health practitioner.

Any information given by the health practitioner.

- Any information provided by the health practitioner such as an explanation or mitigating factors will be reviewed by the Board and taken into account in considering the health practitioner’s criminal history.

Any other matter that the Board considers relevant.

- The Board may take into account any other matter that it considers relevant to the application or notification.

<table>
<thead>
<tr>
<th>Definitions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Criminal history</strong> is defined in the Health Practitioner Regulation National Law Bill 2009 (the proposed national law) as:</td>
</tr>
<tr>
<td>- every conviction of the person for an offence, in a participating jurisdiction or elsewhere, and whether before or after the commencement of this Law,</td>
</tr>
<tr>
<td>- every plea of guilty or finding of guilt by a court of the person for an offence, in a participating jurisdiction or elsewhere, and whether before or after the commencement of this Law and whether or not a conviction is recorded for the offence</td>
</tr>
<tr>
<td>- every charge made against the person for an offence, in a participating jurisdiction or elsewhere, and whether before or after the commencement of this Law.</td>
</tr>
</tbody>
</table>

Under the proposed national law, spent convictions legislation does not apply to criminal history disclosure requirements.

**Health practitioner** means an applicant for registration or a registrant under the proposed national law.

<table>
<thead>
<tr>
<th>Review</th>
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<tbody>
<tr>
<td>This standard will commence on 1 July 2010. The Board will review this standard within three years of operation.</td>
</tr>
</tbody>
</table>
2.2 English language skills

The following draft common registration standard on English language requirements is proposed to be used by all registration boards.

<table>
<thead>
<tr>
<th>Psychology Board of Australia</th>
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</thead>
<tbody>
<tr>
<td>English language skills standard</td>
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<tr>
<td><strong>Summary</strong></td>
</tr>
<tr>
<td>An internationally qualified applicant or an applicant who is an international student must have the necessary English language skills for registration purposes by achieving a minimum score of 7 in the IELTS academic module, or specified alternatives (see ‘Definitions’, below).</td>
</tr>
<tr>
<td>Test results will generally need to be obtained within two years, but preferably within 12 months prior to applying for registration. The Board may grant an exemption in specified circumstances.</td>
</tr>
<tr>
<td><strong>Scope of application</strong></td>
</tr>
<tr>
<td>This standard applies to all internationally qualified applicants and applicants who are international students seeking registration in Australia.</td>
</tr>
<tr>
<td><strong>Requirements</strong></td>
</tr>
<tr>
<td>An applicant who is an internationally qualified applicant or an international student must submit evidence, or arrange for evidence to be provided, to the relevant Board of competency in English language skills as demonstrated by having completed the IELTS examination (academic module) to the following standard:</td>
</tr>
<tr>
<td>1. The applicant must have achieved a minimum score of 7 in each of the four components (listening, reading, writing and speaking).</td>
</tr>
<tr>
<td>2. No alternative English proficiency tests are accepted by the Board at this time.</td>
</tr>
<tr>
<td>3. Results must have been obtained within two years prior to applying for registration.</td>
</tr>
<tr>
<td>4. An IELTS (or approved equivalent) Test Report Form more than two years old will be accepted as current if accompanied by proof that a candidate has actively maintained employment as a registered health practitioner using English as the primary language of practice in a country where English is the native or first language. Test results must comply with the current requirements of this policy.</td>
</tr>
<tr>
<td>5. Results from any of the abovementioned English language examinations must be obtained in one sitting.</td>
</tr>
<tr>
<td>6. The applicant is responsible for the cost of English tests.</td>
</tr>
<tr>
<td>7. The applicant must make arrangements for test results to be provided directly to the Board by the testing authority; for example, by secure internet login.</td>
</tr>
<tr>
<td><strong>Exemptions</strong></td>
</tr>
<tr>
<td>1. The Board may grant an exemption where:</td>
</tr>
<tr>
<td>(a) the applicant provides evidence of successful secondary education in English, and that the applicant’s tertiary qualifications in the relevant professional discipline were taught and assessed in English, in any country where English is the native or first language.</td>
</tr>
<tr>
<td>(b) an applicant applies for limited registration in special circumstances, such as:</td>
</tr>
<tr>
<td>• to perform a demonstration in clinical techniques</td>
</tr>
<tr>
<td>• to undertake research that involves limited or no patient contact</td>
</tr>
<tr>
<td>These special circumstances exemptions will generally be subject to conditions requiring the use of a translator and/or supervision by a registered health practitioner.</td>
</tr>
<tr>
<td>2. The Board reserves the right at any time to require an applicant who has been granted an exemption to undertake a specified English language test.</td>
</tr>
</tbody>
</table>
**Definitions**

**IELTS** means the International English Language Testing System developed by the University of Cambridge Local Examinations Syndicate, The British Council and IDP Education Australia. The test is administered at least once a month by IELTS Australia and The British Council at over 230 centres worldwide.

An **internationally qualified applicant** means a person who qualified as a health practitioner outside Australia.

An **international student** is a person who completed their secondary education outside Australia in any country other than those specified in exemption 1.

**Review**

This standard will commence on 1 July 2010. The Board will review this standard within three years of operation.
2.3 Professional indemnity insurance

The following draft professional indemnity insurance registration standard puts forward the proposed requirements of the Psychology Board of Australia.

### Summary

To be eligible for registration an applicant for registration must declare that there is or will be in force professional indemnity insurance (PII) arrangements to adequately cover his or her practice of the profession.

If granted registration or renewal of registration, a registered psychologist must not practise unless PII arrangements are in force.

A registered psychologist may be covered by either an individual insurance arrangement or an employer’s or university’s insurance arrangement. However, if covered by another party, the cover must meet this standard. If an employer’s or university’s insurance arrangement does not meet this standard, the individual must take out additional cover to ensure he or she meets the standard.

### Scope of application

This standard applies to all registered psychologists excluding nonpractising registrants.

### Requirements

1. Professional indemnity arrangements/policy must include:
   (a) civil liability cover
   (b) unlimited retroactive cover
   (c) run-off cover (ongoing insurance protection) for retirement, cessation of practice or death
   (d) two automatic reinstatements during the period of cover.

2. It is highly recommended that arrangements include, but are not limited to, cover for any breach of professional codes or ethics, complaints received in relation to professional misconduct or unprofessional conduct pursuant to the Health Practitioner Regulation National Law Bill 2009 or relevant regulatory laws in the State or Territory, and complaints received in relation to any privacy laws.

3. An individual may be covered by either an individual insurance arrangement or an employer’s or university’s insurance arrangement. However, if covered by another party, the cover must meet this standard. If an employer’s or university’s insurance arrangement does not meet this standard, the individual must take out additional cover to ensure he or she meets the standard.

4. An applicant for registration must declare that he or she has or will have a PII arrangement in force prior to practising as a registered psychologist. If professional indemnity insurance cover is in force at time of application, the applicant will be required to provide details.

5. An applicant for renewal of registration must make a declaration that he or she has a PII arrangement in force in accordance with this standard.

6. Provision of psychological services is not limited to full-time paid employment. Therefore, any person practising as a registered psychologist, including those working as an independent practitioner, in part-time practice, or undertaking voluntary work, must be covered by PII arrangements in accordance with this standard.

7. Random audits of registered psychologists will be conducted on an annual basis to ensure that registrants are in compliance with this standard. The Board will notify registered psychologists in writing if selected for audit. The registered psychologist will be required to provide evidence of PII arrangements for the period requested by the Board.

8. A registered psychologist is required to maintain certificates of currency for the duration of his or her registration as a psychologist. The Board may request to see evidence of PII arrangements for any period of registration.
9. Alternatively, if a PII arrangement is provided by another party such as an employer, the registered psychologist upon request must provide a copy of the certificate of currency certified as a true copy by a person who can witness statutory declarations or a letter from the employer declaring that the organisation’s PII arrangement covers the registered psychologist, states the period of cover, and that the cover meets this standard.

10 In the event that a registered psychologist has failed to meet the requirements of the standard the Board may:

(a) refuse to renew registration or endorsement; or
(b) instigate disciplinary proceedings pursuant to the Health Practitioner Regulation National Law Bill 2009, Part 8, or the relevant legislation applying to that jurisdiction.

DISCLAIMER: This standard sets out the minimum requirements for PII arrangements. An individual must ensure that he or she has appropriate arrangements in place that cover his or her particular type of practice.

Definitions

Professional indemnity insurance protects professionals against claims of negligence made against them by a client. This type of insurance is available to professionals across a range of industries and covers the costs and expenses of defending a legal claim, as well as any damages payable. Professionals are legally held to a higher degree of skill and care than ordinary people. If others suffer a loss that can be attributed to a specialist's failure to uphold professional standards, they risk being sued for a breach of professional duty. A client's loss may be material, financial or physical (Business Victoria).

Run-off cover means insurance that protects a practitioner who has ceased a particular practice or business against claims that arise out of activities that occurred when he or she was conducting that practice or business. This type of cover may be included in a PII policy or may need to be purchased separately.

References


Review

This standard will commence on 1 July 2010. The Board will review this standard within three years of operation.


2.4 Continuing professional development

The following draft continuing professional development registration standard puts forward the proposed requirements of the Psychology Board of Australia.

Once the standard is finalised and approved, the Board proposes to issue guidelines to assist registrants in understanding how the Board will apply the CPD standard, for example, the characteristics of CPD programs that will be considered acceptable for the purposes of meeting the CPD standard.

<table>
<thead>
<tr>
<th>Psychology Board of Australia</th>
<th>Continuing professional development standard</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Summary</strong></td>
<td></td>
</tr>
<tr>
<td>A requirement of annual renewal of registration is participation in a Psychology Board of Australia (Board) approved program of continuing professional development (CPD).</td>
<td></td>
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<tr>
<td>Registered psychologists have a responsibility to ensure that they continue to maintain, enhance and extend their knowledge and skills throughout their working lives. Consumers also have an expectation that registered psychologists providing professional services do so in a competent and contemporary manner.</td>
<td></td>
</tr>
<tr>
<td><strong>Scope of application</strong></td>
<td></td>
</tr>
<tr>
<td>This standard applies to all registered psychologists with the exception of provisional and non-practising registrants.</td>
<td></td>
</tr>
<tr>
<td><strong>Requirements</strong></td>
<td></td>
</tr>
<tr>
<td>1. An applicant for renewal of registration or endorsement must declare that he or she has completed the minimum requirements of the CPD standard, in the previous 12-month registration period, that applies to his or her registration category.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>General registration</th>
<th>Minimum of 30 hours of CPD of which 10 hours must be individual supervision.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specialist registration</td>
<td>Minimum of 30 hours of CPD of which 10 hours must be individual supervision and 15 hours must be activities relating to the specialist area of practice for which the psychologist is registered.</td>
</tr>
<tr>
<td>Endorsement as a psychology supervisor</td>
<td>In addition to the CPD requirements for general and specialist registration, an applicant for renewal of endorsement as a psychology supervisor must complete a minimum of 5 hours of CPD specific to psychology supervision. For example, a general psychologist with endorsement as a psychology supervisor must complete a minimum of 30 hours of CPD of which 10 hours must be individual supervision and 5 hours must be CPD specific to psychology supervision.</td>
</tr>
<tr>
<td>General and specialist registration</td>
<td>An individual who is registered in two registration categories must complete the minimum CPD hours required annually for ‘general’ registration (30 hours), plus the minimum number of ‘specialist’ CPD hours (15 hours) required for each ‘specialist’ category in which the psychologist is registered. For example, a ‘generalist’ psychologist who is also registered under one ‘specialist’ category must accumulate a minimum of 30 ‘generalist’ CPD hours per year (including a minimum of 10 hours individual supervision), plus an additional 15 ‘specialist’ CPD hours, comprising a total of 45 CPD hours annually; a ‘generalist’ psychologist who is registered under two ‘specialist’ categories must accumulate a minimum of 60 CPD hours per year.</td>
</tr>
<tr>
<td>Limited registration</td>
<td>Minimum of 30 hours of CPD of which 10 hours must be individual supervision.</td>
</tr>
</tbody>
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1 Note that proposed CPD requirements for specialist registration are contingent on the Ministerial Council approval for specialist registration to operate under the national law for the psychology profession (see Proposal on specialist registration in this paper).

2 Note that proposed CPD requirements for endorsement of registration of Psychology Supervisors are contingent on the Ministerial Council approval for an area of practice endorsement to operate under the proposed national law for the psychology profession (see Proposal on endorsement in relation to area of practice in this paper).

3 Note that proposed CPD requirements for specialist registration are contingent on the Ministerial Council approval for specialist registration to operate under the proposed national law for the psychology profession (see Proposal on specialist registration in this paper).
As a general guide, CPD activities should be relevant to the psychologist’s area of professional practice and have clear learning aims and objectives that meet the individual’s requirements.

A psychologist is required to develop a learning plan based on a self-assessment of skills and knowledge, which ascertains areas for development or improvement and enhances life-long learning. Professional development activities selected should:
- be outcome focused
- seek to ensure continued competence in the psychologist’s area of practice
- seek to ensure activities have contributed to the quality of a psychologist’s practice, which results in the maintenance of high quality client services.

Professional development activities can be a combination of generalist or specialist activities however activities must meet the minimum requirements for each registration category.

Registrants may participate in a professional development program through their professional society or an equivalent program; however, participation in alternate programs must meet the requirements of this standard including the mandatory individual supervision requirement.

3. A record of CPD activity must be maintained on a template provided by the Board. Alternatively, CPD activity record forms from an alternative approved program will also be accepted.

4. In addition to the record of CPD activity, where applicable, registered psychologists are required to retain any receipts, tax invoices, or certificates of attendance to verify participation in CPD activities.

5. Random audits of registered psychologists will be undertaken annually. A registered psychologist will be notified in writing that he or she has been selected for audit and will be required to submit evidence of CPD activities.

Exemptions

1. Special circumstances
   (a) An applicant for renewal of registration who wishes the Board to consider an application for partial exemption from this standard, due to ill-health, maternity/paternity leave or other special circumstances, must submit a request in writing to the Board prior to the expiry of registration for the Board’s consideration. The submission must include the nature of the special circumstance and the period of time during the previous registration period for which an exemption is being requested.

Failure to comply with this standard

1. In the event that a registered psychologist has failed to meet the requirements of the standard relevant to his or her registration category the Board may:
   (a) refuse to renew registration or endorsement; and/or
   (b) impose a condition on registration requiring the registered psychologist to successfully complete:
      • additional CPD activities within a specified period; and/or
      • further education; and/or
      • a period of supervised practice; and/or
   (c) require the registered psychologist to undergo a performance assessment; and/or
   (d) require the registered psychologist to undergo an examination; and/or
   (e) instigate disciplinary proceedings pursuant to Part 8 of the Health Practitioner Regulation National Law 2009 or the relevant legislation applying to that jurisdiction.
### Definitions

**Continuing professional development** refers to activities that result in the improvement and broadening of psychological knowledge and skill and the personal and professional qualities needed throughout a psychologist’s working life (Australian Psychological Society definition of ‘appropriate PD activities’).

**Generalist activities** are ‘professional development activities that are psychological in nature and would be appropriate for all psychologists.

**Individual supervision** means one-on-one consultation with a registered psychologist for the purposes of professional development and support in the practice of psychology and includes a critically reflective focus on the practitioner’s own practice. Supervision hours must be actual hours.

**One-on-one** includes provision for teleconference or alternative modes of delivery other than face-to-face.

**Group supervision** means consultation with a group of no more than six registered psychologists for the purpose of professional development and support in the practice of psychology and includes a critically reflective focus on the practitioner’s own practice. Where group supervision is undertaken in satisfaction of this standard, the psychologist must ensure a minimum of 10 hours is devoted to the practitioners own practice. For instance, in a supervision group of three, a minimum of 30 hours in any one year would be required, to allow each practitioner to meet minimum standards of reflective practice.

**Specialist activities** are professional development activities that are psychological in content within the specialist area of practice.

### References

None

### Review

This standard will commence on 1 July 2010. The Board will review this standard within three years of operation.
2.5 Recency of practice

Recency of practice requirements ensure that registrants maintain an involvement with practice. The standard may also cover practitioners returning to practice after a period of not practising.

The following draft recency of practice registration standard puts forward the proposed requirements of the Psychology Board of Australia.

<table>
<thead>
<tr>
<th>Psychology Board of Australia</th>
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<tbody>
<tr>
<td>Recency of practice standard</td>
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</table>

Summary

An applicant for registration or endorsement or renewal of registration or endorsement must demonstrate satisfactory evidence of recent practice as a registered psychologist within the three years prior to the date of application for registration or endorsement or renewal of registration or endorsement.

In order to practise as a psychologist in Australia, an individual must be registered by the Psychology Board of Australia. On this basis, the Board will not accept:

(a) unregistered practice involving activities of a psychological nature; or
(b) practice involving activities of a nonpsychological nature despite these being performed by a registered psychologist, as satisfactory evidence of recent professional practice.

Scope of application

This standard applies to all applicants for registration (including restoration of registration) or endorsement, or renewal of registration or endorsement. It does not apply to applicants applying for or renewing under the category of ‘nonpractising’ registration.

This standard applies to all applicants equally, whether they practise full or part-time or whether work is remunerated or not. The standard commences immediately after an individual qualifies for registration in one of the ‘general’, ‘specialist’, or ‘limited’ registration categories, and/or qualifies for any endorsement of registration. For example, an individual is qualified for general registration immediately upon successful completion of a Board-approved minimum six-year sequence of study or equivalent. This standard also applies to applicants for provisional registration, or renewal of provisional registration, in certain circumstances. See ‘Requirements’ section for details.

Requirements

1. An individual must, at the time the application is made, be able to demonstrate that he or she has practised unconditionally as a registered psychologist within the previous three years. A person who is eligible for general or specialist registration and applies for registration within three years of successfully completing a Board approved sequence of study required for general or specialist registration is exempt from this standard.

2. An applicant who has not practised as a registered psychologist for:

   (a) at least three years, but less than five years, must provide evidence of CPD in accordance with the Board’s CPD standard in order to be eligible for registration or endorsement or renewal of registration or endorsement. The supervision requirement of the CPD standard does not need to be met for the period when the applicant is unregistered

   (b) five years or more is not automatically eligible for registration or renewal of registration but may be required to undertake remedial action in order to become eligible for registration or renewal of registration. If the Board grants or renews registration under these circumstances it may impose a condition on registration that the applicant must undertake remedial action within a specified period.

3. Where questions arise as to the quantity or type of practice and whether it constitutes ‘psychology practice’ for the purposes of this standard, the Board will determine such matters on a case-by-case basis.
4. An individual must be able to demonstrate recent practice in both the category of registration he or she is applying for or renewing, and in the area of practice he or she is applying to have endorsed or renewed. For example, an individual applying for both general registration and endorsement as a supervisor must demonstrate recent practice as a general psychologist, and as a supervisor, within three years of his or her application for registration and endorsement. 4

5. If a previously registered provisional psychologist who was participating in an internship program applies for provisional registration three years or more since expiry of registration, any previous supervision completed will not be accepted by the Board. In this situation, the applicant for registration will be required to recommence the internship program.

6. If a provisional psychologist, on application for renewal of registration has a leave of absence of three or more years within their internship program, any previous supervision completed will not be accepted by the Board and the applicant for registration will be required to recommence the internship program.

**Inability to comply with this standard**

1. In the event that an applicant is unable to demonstrate evidence of recent practice in accordance with this standard, the Board may:
   (a) refuse registration or endorsement or renewal of registration or endorsement; or
   (b) renew registration but impose a condition on registration or endorsement that the applicant must undertake a period of supervised practice under the supervision of an endorsed psychology supervisor approved by the Board; and/or
   (c) require the applicant to undergo a performance assessment; and/or
   (d) require the applicant to successfully complete further education aimed at remedying shortfalls in their professional knowledge or skills resulting from their recent lack of practice; and/or
   (e) require the applicant to successfully complete an examination.

**Definitions**

**Practice** includes work in clinical, administration, research and education fields, using the knowledge, skills and attitudes of the profession, whether remunerated or not, whether retired or not, and regardless of job title and generally in roles where registration as a psychologist is a requirement.

**Review**

This standard will commence on 1 July 2010. The Board will review this standard within three years of operation.

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4 Note that proposed recency of practice requirements that relate to an endorsement of registration of psychology supervisors are contingent on the Ministerial Council’s approval for an area of practice endorsement to operate under the proposed national law for the psychology profession (see Section 5).
2.6 Assessment against the Procedures for Development of Registration Standards

The Psychology Board of Australia has used a process to develop these proposed standards consistent with the requirements set out by the Australian Health Practitioner Regulation Agency in the document *Procedures for the Development of Registration Standards* (see [www.ahpra.gov.au](http://www.ahpra.gov.au)). The Board has made the following assessments, against the three elements outlined in the procedures.

### The proposal takes into account the objectives and guiding principles in the legislation

**Board comment**

The Board considers the proposed standards meet the following objective and guiding principle of the proposed legislation.

**Objective:** To provide for the protection of the public by ensuring that only health practitioners who are suitably trained and qualified to practise in a competent and ethical manner are registered.

**Guiding principle:** To enable the continuous development of a flexible, responsive and sustainable Australian health workforce and to enable innovation in the education of, and service delivery by, health practitioners.

### The proposal meets the consultation requirements in the legislation

**Board comment**

The proposal meets the consultation requirements in the legislation. The Board has ensured that the proposal has had public exposure through publication on the websites of the Board, State boards and the Australian Psychological Society and through open consultation meetings in each State and Territory. Specific parties consulted include the Council of Psychology Registration Boards, major employers of psychologists, the Australian Psychology Accreditation Council, the Australian Psychological Society, and the Head Of Department and School of Psychology Association (HODSPA).

### The development of the proposal takes into account the COAG principles for best practice regulation

**Board comment**

The Board believes that the proposed standards take into account the Council of Australian Governments (COAG) principles for best practice regulation and do not restrict competition amongst registered psychologists or restrict consumer choice. The standards will benefit both psychologists and the public by ensuring:

- public safety and confidence in the profession; and
- best professional standards through continuing professional development and recent practice.

Any costs accrued by registered psychologists or members of the public as a result of these standards are far outweighed by the benefits of ensuring an accountable, competent and skilled profession.

The Board has set a timeframe to review the proposed standards to ensure that the standards remain effective and relevant whilst in operation.
3 Proposed qualification requirements for general registration

It may assist readers of this consultation paper to understand the Board’s thinking on the requirements in terms of qualifications for general registrants. The Board is not proposing any changes in this area. However, these requirements are set out below for clarity.

Unlike many of the other professions regulated by the proposed national law, psychology has been required to recognise several pathways to general registration.

The decision to recognise a six-year Australian Psychology Accreditation Council (APAC) accredited sequence of study, at a master’s degree minimum qualification ensures that the standards within Australia are similar to those within other international jurisdictions. Five or six years of university psychology training plus supervised practice is the international benchmark within the European EuroPsy qualifications framework for psychology (www.efpa.eu/europsy/what-is-europsy). The current four university years plus two-year internship (4+2) is set below all current international standards, and therefore is proposed to be phased out in six years, depending on workforce needs and provision of university places. Data collected in October 2008 indicated that there were approximately 4500 provisionally registered psychologists, of which approximately half were undertaking a supervised practice program, which importantly highlights the need to continue to provide equivalent alternate training pathways. The recent addition of an accredited fifth year professional training option (5+1) will help to bring Australia up to international standards. To ensure quality and standards, the Board may require the passing of an examination prior to accepting an application for full general registration.

The proposed requirements of the Psychology Board of Australia in relation to General Registration are shown below.

The Board has determined that the qualification that leads to registration as a general psychologist is a six-year Australian Psychology Accreditation Council (APAC) accredited sequence of study, comprising a master’s degree minimum qualification or equivalent. The Board will also recognise the following six-year sequences as equivalent for the purposes of eligibility for general registration:

- a five-year APAC-approved sequence of study followed by a one-year Board-approved internship (5+1).
- a four-year APAC-approved sequence of study followed by a two-year Board-approved internship (4+2).

‘Internship’ means a Board approved supervised practice program.
4 Proposal for specialist registration

4.1 Approval as a health profession for which specialist recognition operates

Summary of case for seeking approval

The Psychology Board of Australia considers that it is in the public interest that a single mechanism exists for regulating the use of specialist titles within the psychology profession. It also believes it important that the public be properly informed about the specialist qualifications of practitioners so that they will be able to select an appropriately trained practitioner to meet their needs.

The Board acknowledges that the psychology profession is in a unique position among the regulated professions to be included in the new national scheme, because it contains practitioners working both within and outside the health sector. Given the legislative framework that sees all psychologists registered under the new scheme, the Board is proposing that specialist registration in psychology apply across all psychology disciplines.

Specialist areas of psychology are well established, with specialist competencies being acquired and developed through accredited postgraduate doctorate programs for which an established specialist accreditation standard applies. A case has to be made, however, for moving specialist recognition from the educational and professional sphere to the sphere of regulation.

A range of government and nongovernment bodies, as well as consumers, rely on accurate information as to who is qualified to practise as a specialist in psychology. A number of mechanisms exist for identifying specialists in psychology, both legislative and professional (e.g. through Medicare, victims of crime compensation schemes, workers’ compensation, courts, and specialist registration of psychologists registered in Western Australia). However, all employ different criteria and standards. This results in confusion for the public, the health profession, universities, government and stakeholders.

It is widely recognised that mental health problems are a serious detriment to the welfare of the Australian community. Currently in the registration systems of Australia (apart from in Western Australia), the public has little or no guidance of whom to choose from a wide range of registered psychologists in order to obtain qualified assistance for mental health problems. A major benefit for public safety and welfare would be gained if the public were able to identify specialist trained psychologists (such as clinical psychologists) on the basis of their specialist status. This status would be visible on the public register.

The risk to the public in not being able to identify such people is that the public, including people with potentially serious mental health problems, seek assistance from people not qualified to help them. Unqualified practitioners may then increase risk rather than assist the person with the illness and fail to refer them for more specialised assistance.
This risk is already recognised in the design of a number of mental health programs available from the Australian Government. Currently, those assessed by Medicare as qualified clinical psychologists are eligible for a ‘psychological therapy’ Medicare item number that provides a higher level of rebate than for the ‘focussed psychological strategies’ item number, under the Medicare initiative ‘Better Access to Mental Health Care’. The Board is of the view that responsibility for identifying which registered psychologists are suitably qualified as clinical psychologists under Medicare or other current and future health related schemes, and determining the standards of training required for such recognition, is a responsibility of the Board in its role to protect the public. Therefore, it should be carried out by the Board or under the Board’s direction through the mechanism of specialist registration.

This proposal for specialist registration for the psychology profession, if accepted by the Ministerial Council, will provide a national standard for the recognition of specialties in psychology practice in Australia, and will provide certainty to the public about specialist credentials, and who is qualified and who is not. Because specialist qualifications are already recognised through various mechanisms (though not regulated), this proposal is not expected to impact on the costs of educating psychologists or on the supply of psychologists.

As with all specialisation proposals, there is a risk that over-specialisation may occur in the workforce, but in the view of the Board, this is outweighed by the benefits to the public of transparency in relation to specialist qualifications.

Specialist registration protects the public interest by ensuring the public is fully informed about the extent and type of qualifications possessed by a practitioner. Consumers and the health system as a whole require accurate and reliable information on specialist psychologists. At present, the professional college system does not provide that protection because there are no offences for unauthorised use of the various specialist titles. It is commonplace for unqualified general psychologists to claim specialist titles in Australia with no legal recourse. Specialist registration will prevent nonqualified practitioners from claiming expertise in specialist areas and gives the Psychology Board of Australia the ability to act against nonqualified practitioners in these cases. Apart from in Western Australia, no such protection currently is in force.

In terms of costs, concerns have been expressed that bringing the recognition of psychology specialties into the regulatory regime (rather than leaving it to professional and other bodies to set standards of training and confer credentials or recognition) has the potential to:

- fragment and introduce unnecessary rigidities in the psychology workforce, and
- impose additional regulatory burdens on the profession, the cost of which is likely, ultimately, to be borne by the community as a whole.

The Board looks forward to receiving the views of the psychology sector, governments, employers, community groups and other national boards to assist it in developing its views on the question of specialist registration in the psychology profession.

A background paper on specialist registration is provided at Attachment C.
Approved program of education

If specialist registration is to operate under the national scheme for the psychology profession then it is proposed that the minimum qualification for specialist registration be an accredited professional doctorate in psychology in the specialty plus one year of approved supervised full-time equivalent practice comprising 35 hours of individual supervision with a psychology supervisor who has the relevant specialty and is endorsed by the Board, or equivalent.

Proposed equivalence is a PhD in psychology where all specialist coursework and placements at master’s level have been met and the two additional years of supervision and professional development requirements have been completed.

In recognition of the current criteria for specialisation in psychology, equivalence will be grandparented for accredited professional master’s programs in the specialty plus a two-year program of approved supervised practice (comprising 70 hours of supervision with an endorsed supervisor, of which 45 hours must be individual supervision, with the rest being individual or group supervision) and 120 CPD hours in the specialty; another sequence of study acceptable to the Board; and/or passing an examination in the specialist area.

Proposed list of specialties

Table 4.1 shows a list of proposed specialties and related specialist titles. It is proposed that the approved specialist titles be defined by the title of the qualification, or specialty. The list of specialties in the table reflect the specialist areas covered by currently available APAC-accredited postgraduate professional degrees:

<table>
<thead>
<tr>
<th>Proposed specialty</th>
<th>Proposed specialist titles</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical neuropsychology</td>
<td>Specialist clinical neuropsychologist</td>
</tr>
<tr>
<td>Clinical geropsychology</td>
<td>Specialist clinical geropsychologist</td>
</tr>
<tr>
<td>Clinical psychology</td>
<td>Specialist clinical psychologist</td>
</tr>
<tr>
<td>Community psychology</td>
<td>Specialist community psychologist</td>
</tr>
<tr>
<td>Counselling psychology</td>
<td>Specialist counselling psychologist</td>
</tr>
<tr>
<td>Educational and developmental psychology</td>
<td>Specialist educational and developmental psychologist</td>
</tr>
<tr>
<td>Forensic psychology</td>
<td>Specialist forensic psychologist</td>
</tr>
<tr>
<td>Health psychology</td>
<td>Specialist health psychologist</td>
</tr>
<tr>
<td>Industrial and organisational psychology</td>
<td>Specialist industrial and organisational psychologist</td>
</tr>
<tr>
<td>Sport psychology</td>
<td>Specialist sport psychologist</td>
</tr>
</tbody>
</table>

The Board is aware that there could be alternative ways of looking at which specialties to register but has chosen this approach as reflecting the current structure of accredited postgraduate programs.
4.2 Assessment of proposal against Procedures for Standard Development

The Psychology Board of Australia has used a process to develop this proposal consistent with the requirements set out by the Australian Health Practitioner Regulation Agency in the document Procedures for the Development of Registration Standards (see www.ahpra.gov.au). The Board has made the following assessments, against the three elements outlined in the procedures.

| The proposal takes into account the objectives and guiding principles in the legislation |
| Board comment |
| This proposal meets objective 1(a), providing for the protection of the public by ensuring that only practitioners who are suitably trained and qualified are registered to work in specialist areas. Guiding principle 1(c) is met as, although the proposal places a restriction on the practice of a health profession, the restriction is necessary to ensure specialist psychological services are provided safely and are of an appropriate quality. |

| The proposal meets the consultation requirements in the legislation |
| Board comment |
| The Board has ensured that the proposal has had public exposure through publication on the websites of the Psychology Board of Australia, State boards and the Australian Psychological Society and through national consultation meetings. Specific parties to be consulted include governments, other national boards and the Council of Psychology Registration Boards, major employers of psychologists, the Australian Psychology Accreditation Council, the Australian Psychological Society, and the Head Of Department and School of Psychology Association (HODSPA) and other relevant psychology organisations and groups. |

| The development of the proposal takes into account the COAG principles for best practice regulation |
| Board comment |
| Although the proposal may contribute to restriction of competition, it is necessary to delineate specialist areas of practice clearly in order to ensure that the public receives effective service from properly qualified and competent specialist psychologists who match the requirements of the individuals and organisations involved. It is in the public interest that information about psychologists holding specialist qualifications be known and regulated. By clearly identifying those registrants qualified to provide specialist services, the market becomes more efficient and the choices available to consumers more transparent. After 15 years of specialist registration in Western Australia, there exists no evidence of unreasonable negative impact on workforce or workforce flexibility. The proposed standard will remain relevant through regular review by the Psychology Board of Australia and consultation with stakeholders. The accreditation body will also report to the Board ensuring qualification standards remain relevant. |
5 Proposals for endorsements

The Psychology Board of Australia is of the view that supervision intended to meet the requirements of registration and continuing professional development should be an endorsed area of practice.

5.1 Area of practice

Approval

Ministerial Council approval is required for an area of practice to be the subject of an endorsement.

The Board has formed the view that a serious risk to the public exists in the profession because there is insufficient regulatory control of psychology supervisors. The Board has identified a number of cases where the origins of a professional problem relate to inadequate supervision.

Summary of case for endorsement

Supervision is a critical mechanism in the training of psychologists and in the ongoing professional development of psychologists throughout their career. Supervisors play a key role in training and assessing professional competencies. In order to provide effective supervision, supervisors must have demonstrated proficiency in the areas of professional practice in which the supervisee is engaged, as well as possessing demonstrated skill in the provision of supervision and have acquired Board approved training in supervision.

Under Queensland legislation, there is legislative precedent for endorsement of supervision as an identified area of practice. Although the requirements for endorsement as a supervisor vary across each State and Territory, all jurisdictions recognise that supervisors (of interns) must be Board approved. However, not all Boards currently require supervisors to undergo training in order to qualify as a supervisor, nor to undertake targeted CPD to maintain their status as a supervisor. An endorsement function would allow such hurdle and CPD requirements to be applied to any psychologist who wishes to supervise provisional registrants.

The Board considers endorsement essential to ensure that those in supervisory roles have the requisite knowledge, skills and competencies to adequately prepare supervisees for professional practice. Because supervision is critical to safe psychology practice, it is in the public interest for supervisors to meet additional requirements to be identified on the register as being competent to provide their services within this scope of practice.
Endorsement of supervisors enables the Board to set minimum standards regarding the qualifications, experience, training and demonstrated skills required to provide supervision for the purposes of attaining general and specialist registration. Endorsement enables the Board to act against supervisors providing supervision that does not meet contemporary acceptable standards, or those who have not maintained the continuous professional development required for maintaining minimum standards of practice as a supervisor. The Board acknowledges that the educational hurdle for this endorsement is lower than for other endorsements proposed under the scheme by other professions, but considers that further educational developments can be considered in the future. The case for the endorsement lies in public safety and that this is at risk under the current arrangements. This endorsement scheme should not impact on the supply of supervisors and is unlikely to have any negative workforce effects. A background paper on the proposed internship model under a board-approved supervised practice program is provided at Attachment B.

Draft endorsement

The following draft endorsement in relation to area of practice puts forward the proposed requirements of the Psychology Board of Australia.

<table>
<thead>
<tr>
<th>Psychology Board of Australia</th>
</tr>
</thead>
<tbody>
<tr>
<td>Endorsement in relation to area of practice</td>
</tr>
</tbody>
</table>

**Scope**

Endorsement as a psychology supervisor is to apply to those with the following registration:

(a) general  
(b) specialist.\(^5\)

**Wording to appear on the register**

Endorsement as psychology supervisor.

**Application**

A psychology supervisor must have:

- held general registration for at least three years before applying for endorsement
- successfully completed a Board approved training program in psychology supervision
- not been subject to conditions on their registration. Endorsed psychology supervisors must maintain CPD relevant to the endorsement on an annual basis to maintain the endorsement.

A psychology supervisor providing supervision for a psychologist undertaking specialist training must have held unconditional specialist registration for two years. Specialist registration should be in the specialist area for which supervision is sought.\(^6\)

**Exemptions**

This requirement is not intended to apply to:

- academics supervising research dissertations, or
- those in line supervisor roles taken to mean administrative or management roles in businesses, organisations or groups.

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\(^5\) Note that the proposal for specialist registration is contingent on the Ministerial Council’s approval for specialist registration to operate under the proposed national law for the psychology profession (see Proposal on specialist registration in this paper)

\(^6\) As for footnote 5
**Area of practice of endorsement**

The endorsed area of practice under this standard refers to supervision that is provided to meet the training requirements of general psychologists and specialist psychologists. Supervision is a critical component in the training and ongoing safe practice of psychology. Supervisors play a key role in training and assessing professional competencies. In order to provide effective supervision, supervisors must have demonstrated proficiency in the areas of professional practice in which the supervisee is engaged, as well as possessing demonstrated skill in the provision of supervision.

Endorsement of supervisors enables the Board to set minimum standards for the qualifications, experience, training and demonstrated skills required to provide supervision for the purposes of general and specialist registration. Endorsement enables the Board to act against supervisors providing supervision below acceptable standards, or those who have not maintained continuous professional development required for maintaining minimum standards of practice as a supervisor.

**References**

Attachment D — Endorsement of psychology supervisors background paper

**Review**

This endorsement will commence on 1 July 2010. The Board will review this endorsement within three years of operation.
5.2 Assessment against the Procedures for Development of Registration Standards

The Board has used a process to develop these proposed endorsements consistent with the requirements set out by the Australian Health Practitioner Regulation Agency in the document *Procedures for the Development of Registration Standards* (see [www.ahpra.gov.au](http://www.ahpra.gov.au)). The Board has made the following assessments, against the three elements outlined in the procedures.

<table>
<thead>
<tr>
<th>The proposal takes into account the objectives and guiding principles in the legislation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Board comment</strong></td>
</tr>
<tr>
<td>This proposal meets objective 1(c) by facilitating high-quality training of health practitioners by requiring all supervisors to meet minimum standards for their qualifications, experience, training and demonstrated skills in supervision. The proposal takes into account guiding principle (c), recognising that the practice of supervision in a training environment should be restricted to endorsed practitioners to ensure health services are provided safely and are of high quality.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>The proposal meets the consultation requirements in the legislation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Board comment</strong></td>
</tr>
<tr>
<td>The Board has ensured that the proposal has had public exposure through publication on the websites of the Psychology Board of Australia, State boards and the Australian Psychological Society and through open consultation meetings in each State and Territory. Specific parties consulted include the Council of Psychology Registration Boards, major employers of psychologists, the Australian Psychology Accreditation Council, the Australian Psychological Society, and the Head Of Department and School of Psychology Association (HODSPA), and other relevant psychology organisations and groups.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>The development of the proposal takes into account the COAG principles for best practice regulation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Board comment</strong></td>
</tr>
<tr>
<td>The Board considered COAG principle (c) regarding the cost and benefit of endorsement of supervision. The cost of supervisor training is borne by the registrant. However, it was concluded that the benefit to the public that results from better quality training of psychologists and psychology supervisors outweighs the cost.</td>
</tr>
</tbody>
</table>
Health Practitioner Regulation National Law Bill 2009 provides for the Psychology Board of Australia (‘the Board’) to develop registration standards for approval by the Ministerial Council. Under the legislation, boards need to develop a registration standard on the following mandatory requirements:

- criminal history
- English language skills
- professional indemnity insurance
- continuing professional development
- recency of practice.

Proposals for English language standard and criminal history standard

Where possible, the Board recommends the same and criminal history and English language standards adopted by the other national boards in the scheme. The development of these standards is a mandatory requirement of the Board. For psychology, spoken and written communication is integral to the profession and its work, and the English standard proposed is consistent with those used by State and Territory psychology boards and university departments and schools. The criminal history standard represents a balance of fairness and probity in considering an application for registration.

Proposal for professional indemnity insurance arrangements standard

Purpose

The purpose of professional indemnity insurance (PII) is to protect the interests of the public and the registered psychologist by ensuring that the registered psychologist is appropriately covered by professional indemnity insurance arrangements that arise out of any breach or alleged breach of professional duty of care; this includes, but is not limited to, compensation claims or complaints related to a breach of boundaries, breach of professional codes of conduct or ethics or a breach of any legislative mandates.

Individuals in professions such as health and law who provide services to clients are required by legislation to hold professional indemnity insurance.
### Current practices/policies within the Australian State and Territory registration boards

#### Psychology

<table>
<thead>
<tr>
<th>State and Territory boards</th>
<th>Current PII requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>WA</td>
<td>Mandatory for services provided – not prescriptive. Given 30 days from date of registration to provide evidence of insurance.</td>
</tr>
<tr>
<td>NSW</td>
<td>Mandatory, not prescriptive.</td>
</tr>
<tr>
<td>VIC</td>
<td>Not mandatory.</td>
</tr>
<tr>
<td>SA</td>
<td>Recommended, not mandatory.</td>
</tr>
<tr>
<td>QLD</td>
<td>Recommended, not mandatory.</td>
</tr>
<tr>
<td>TAS</td>
<td>Mandatory, not prescriptive.</td>
</tr>
<tr>
<td>NT</td>
<td>Mandatory, not prescriptive.</td>
</tr>
<tr>
<td>ACT</td>
<td>Mandatory, not prescriptive.</td>
</tr>
</tbody>
</table>

#### Victorian health profession registration boards

<table>
<thead>
<tr>
<th>Board</th>
<th>Current PII requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Practitioners Board of Victoria</td>
<td>Mandatory, minimum $5 million for any one claim.</td>
</tr>
<tr>
<td>Nurses Board of Victoria</td>
<td>Recommended, not mandatory.</td>
</tr>
<tr>
<td>Pharmacy Board of Victoria</td>
<td>Mandatory, minimum $10 million for any one claim.</td>
</tr>
<tr>
<td>Dental Practice Board of Victoria</td>
<td>Mandatory, minimum requirements are:</td>
</tr>
<tr>
<td></td>
<td>• unlimited retroactivity of cover</td>
</tr>
<tr>
<td></td>
<td>• ‘run-off’ cover for retirement or death</td>
</tr>
<tr>
<td></td>
<td>• civil liability cover for $10 million for any one claim</td>
</tr>
<tr>
<td></td>
<td>• two automatic reinstatements during the period of cover.</td>
</tr>
<tr>
<td>Physiotherapists Registration Board of Victoria</td>
<td>Mandatory, minimum $5 million for any one claim.</td>
</tr>
<tr>
<td>Chinese Medicine Registration Board of Victoria</td>
<td>Mandatory, minimum $2 million for any one claim.</td>
</tr>
<tr>
<td>Chiropractors Registration Board of Victoria</td>
<td>Mandatory, minimum $10 million for any one claim.</td>
</tr>
<tr>
<td>Osteopaths Registration Board of Victoria</td>
<td>Mandatory, minimum of $5 million for any one claim.</td>
</tr>
<tr>
<td>Optometrists Registration Board of Victoria</td>
<td>Mandatory, minimum of $5 million for any one claim.</td>
</tr>
<tr>
<td>Podiatrists Registration Board of Victoria</td>
<td>Mandatory, minimum of $5 million for any one claim.</td>
</tr>
</tbody>
</table>
### Other Australian State and Territory health registration boards

<table>
<thead>
<tr>
<th>Board</th>
<th>Current PII requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>New South Wales Medical Board</td>
<td>Mandatory, not prescriptive.</td>
</tr>
<tr>
<td>Medical Board of Queensland</td>
<td>Recommended, not mandatory.</td>
</tr>
<tr>
<td>Medical Board of Western Australia</td>
<td>Mandatory, not prescriptive.</td>
</tr>
<tr>
<td>Medical Board of Northern Territory</td>
<td>Mandatory, not prescriptive.</td>
</tr>
<tr>
<td>Medical Board of South Australia</td>
<td>Mandatory, not prescriptive.</td>
</tr>
<tr>
<td>Medical Council of Tasmania</td>
<td>Not mandatory.</td>
</tr>
<tr>
<td>Nurses and Midwives Board – New South Wales</td>
<td>Not mandatory.</td>
</tr>
<tr>
<td>Queensland Nursing Council</td>
<td>Not mandatory.</td>
</tr>
<tr>
<td>Nursing and Midwifery Board of South Australia</td>
<td>Not mandatory.</td>
</tr>
<tr>
<td>Nursing and Midwifery Board of Northern Territory</td>
<td>Mandatory, not prescriptive.</td>
</tr>
<tr>
<td>Nurses and Midwives Board of Western Australia</td>
<td>Not mandatory.</td>
</tr>
<tr>
<td>Nursing Board of Tasmania</td>
<td>Not mandatory.</td>
</tr>
<tr>
<td>Dental Board of New South Wales</td>
<td>Mandatory, not prescriptive.</td>
</tr>
<tr>
<td>Dental Board of South Australia</td>
<td>Mandatory, with minimum requirements of $10 million per any one claim and $20 million in aggregate. Onus is on practitioner to ensure he or she is covered appropriately to his or her individual level of risk.</td>
</tr>
<tr>
<td>Dental Board of Western Australia</td>
<td>Not mandatory.</td>
</tr>
<tr>
<td>Dental Board of Northern Territory</td>
<td>Mandatory, not prescriptive.</td>
</tr>
<tr>
<td>Dental Board of Tasmania</td>
<td>Mandatory, not prescriptive.</td>
</tr>
</tbody>
</table>

### Other Australian professions

<table>
<thead>
<tr>
<th>Organisation</th>
<th>Current PII requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legal Services Board Victoria</td>
<td>Mandatory civil liability insurance, minimum $2 million.</td>
</tr>
<tr>
<td>Architects Registration Board of Victoria</td>
<td>Mandatory, minimum requirements:</td>
</tr>
<tr>
<td></td>
<td>* not less than $1 million plus not less than $200 000 or 20 per cent for defence costs.</td>
</tr>
<tr>
<td></td>
<td>* one automatic re-instatement.</td>
</tr>
</tbody>
</table>
Benchmarking/comparisons with professional bodies and international standards

Many professional organisations recommend PII to their members. The Australian Psychological Society, New Zealand Psychological Society and the British Psychological Society have arrangements in place with a preferred insurer or broker and each recommend an appropriate insurance scheme to their members.

Australian Psychology Society Ltd (APS)
AON Risk Services have developed a ‘Psychologists Registration Policy’ for APS members, which is a combined policy that covers ‘malpractice, public and products liability’ into one policy. The 2009–2010 AON Risk Services policy provides flexibility from minimum level of coverage of $2 million up to $20 million and includes retro-active cover and run-off cover.

New Zealand Psychological Society (NZPS)
The NZPS offer a policy to registered psychologists in respect of civil liability incurred as a result of the provision or failure to provide professional healthcare services in the conduct of practising as a registered psychologist. The policy includes cover for defence costs incurred in relation to any claim not in excess of the limit of the indemnity. Additional extensions such as run-off cover are available. The policy arranged allows the registered psychologist to select cover from a minimum of $250,000 to a maximum of $2 million.

British Psychological Society (BPS)
The BPS policy scheme provides cover (from two different insurers) for professional indemnity, public liability, product liability and libel and slander. The policy includes legal costs (both the psychologist’s own costs and any other side’s costs that may be awarded against the psychologist), awards of damages, the legal costs involved in representing the psychologist at disciplinary proceedings in cases of professional misconduct; legal advice on any personal, professional conduct or business matter. The November 2006 ‘Professional Liability Insurance’ document does not provide information on minimum or maximum cover available.

Other psychology organisations not listed above may have similar arrangements.
**Proposed professional indemnity arrangements registration standard**

Based on the requirements of the proposed legislation and the professional indemnity standards of other registration authorities and professional organisations, the Psychology Board of Australia proposed a registration standard that it believes meets the minimum requirements to cover a psychologist’s professional duty of care. It should be noted that the standard proposes the minimum requirements that are common in an appropriate professional indemnity insurance policy and recommends that a registered psychologist should ensure that any policy covers his or her individual practice requirements.

**Proposal for continuing professional development standard**

**Purpose**

It is widely acknowledged that health professionals have a responsibility to ensure that they both improve and maintain their knowledge and skills throughout their working lives. Many professions are required either by legislation or as a requirement for membership of a professional association to participate in continuing professional development programs.

Consumers also have an expectation that registered health practitioners providing professional services do so in a competent and contemporary manner.

The proposed legislation supports this view and provides for mandatory continuing professional development (CPD).

**Current practices/policies within the Australian State and Territory and overseas registration boards**

**Psychology**

<table>
<thead>
<tr>
<th>State &amp; Territory boards</th>
<th>Current CPD requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>WA</td>
<td>Not mandatory.</td>
</tr>
<tr>
<td>NSW</td>
<td>Mandatory, not prescriptive.</td>
</tr>
<tr>
<td>VIC</td>
<td>Not mandatory.</td>
</tr>
<tr>
<td>SA</td>
<td>Not mandatory.</td>
</tr>
<tr>
<td>QLD</td>
<td>Mandatory, part of recency of practice requirement. Follows CPD requirements of Australian Psychological Society or equivalent. Registrants may be audited to determine compliance.</td>
</tr>
<tr>
<td>TAS</td>
<td>Not mandatory.</td>
</tr>
<tr>
<td>NT</td>
<td>Mandatory.</td>
</tr>
<tr>
<td>ACT</td>
<td>Mandatory, not prescriptive. Recommend 25 hours annually of CPD activities. Log books must be maintained and CPD activities may be audited by the registration authority.</td>
</tr>
</tbody>
</table>
CPD programs for psychologists in other jurisdictions

<table>
<thead>
<tr>
<th>Jurisdiction</th>
<th>Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Psychology – California</td>
<td>36 hours every two years</td>
</tr>
<tr>
<td>Council of Psychologists of British Columbia - Canada</td>
<td>40 hours annually– prescriptive program:</td>
</tr>
<tr>
<td></td>
<td>• 12 hours direct participatory, formal programs</td>
</tr>
<tr>
<td></td>
<td>• 11 hours self-study</td>
</tr>
<tr>
<td></td>
<td>• 12 hours structured interactive activities</td>
</tr>
<tr>
<td></td>
<td>• 5 hours ethics</td>
</tr>
<tr>
<td>New Zealand Psychologists Board</td>
<td>Annual CPD requirement, not prescriptive. However, guidance provided in regard to CPD objectives and expectations.</td>
</tr>
<tr>
<td>Health Professions Council – United Kingdom</td>
<td>Biennial CPD requirement, not prescriptive however set of standards provided as to what should be included in a CPD program.</td>
</tr>
</tbody>
</table>

Benchmarking/comparisons with professional bodies and international standards

CPD programs established by regulatory authorities or professional associations may be prescriptive or flexible with the onus on the professional to determine the best learning options for his or her practice.

Australian Psychological Society Ltd (APS)
The APS has a biennial CPD program requirement for its members. APS Members and Associate members (excludes college specific membership) must attain 90 CPD points every two years, which may consist of a combination of generalist points or specialist points.

An APS college member must attain in a minimum of 90 CPD points every two years, of which a minimum of 45 needs to be specialist points. For each additional specialisation, an additional 45 specialist points must be attained.

The majority of CPD activities are calculated by the formula of one hour of CPD activity equals one CPD point, with a maximum of 7 points per day. Some activities accrue 2 points per hour; these involve more active learning.

Psychologists are required to maintain a record of CPD activities that may be audited by the APS.

New Zealand Psychologists Board (NZPB)
In 2009, the NZPB introduced a mandatory Continuing Competence Program (CCP) for its registered psychologists. ‘The CCP requires each psychologist to engage annually in a self-reflective review (with the assistance of their supervisor or mentor) of their practice to identify their own continuing competence needs and to ascertain how these goals can best be met.’
The NZPB CPD program is not prescriptive and requires a registered psychologist to make a self-assessment of his or her learning needs and implement a learning activity plan. The NZPB program has the following set of guiding principles:

1. Accountability: As a health professional, a practitioner bears the ultimate responsibility both for maintaining and for demonstrating professional competence to practise (as guided by a range of professional standards, codes of ethics and codes of conduct).

2. Lifelong continuous learning and improvement is essential to the professional psychologist. Self-reflection, self-assessment and evaluation are intrinsic to the psychologist’s role, both for quality assurance and for professional self-care. There is also a need to keep abreast of evolving fields of knowledge as the psychology discipline moves forward.

3. Psychologists at different stages of their career have quite different professional development needs. Maintaining competence is a process that continues over the entire course of a career, adapting to changes in practice environments, professional domains and consumer needs.

4. Flexibility in maintaining competence: There is no one best way to maintain competence. The range of activities selected will vary according to individual learning style, identified needs, timing, availability, and context. Other life experiences may also contribute to professional competence.

5. Easy to follow, understand and economical: It is envisaged that the CCP can be readily integrated with regular workplace requirements and professional tasks and roles, rather than being extra/extraordinary. The self-reflective review should be tailored to individual needs to make it a useful and personally meaningful exercise. Recording of continuing competence activities should be clear but brief.

The NZPB will also be conducting random general and targeted audits of registered psychologists.

Health Professions Council - United Kingdom (HPC)

In 2008, the HPC implemented a mandatory CPD program that is linked to biennial renewal of registration. The HPC CPD program is not prescriptive; however, the HPC requires registered psychologists to participate in CPD activities that meet the standards set by the HPC.

The HPC standards state that registrants must:

- maintain a continuous, up-to-date and accurate record of their CPD activities;
- demonstrate that their CPD activities are a mixture of learning activities relevant to current or future practice;
- seek to ensure that their CPD has contributed to the quality of their practice and service delivery;
- seek to ensure that their CPD benefits the service user; and
- present a written profile containing evidence of their CPD upon request.
To meet standards, registrants need to make their own professional decisions about the kinds of CPD activity they need to undertake to develop and improve their skills and knowledge.

The standards are concerned with quality and outcomes, not with time spent on CPD activities; the standards advise registrants that when planning or undertaking CPD they need to make sure it is relevant to their type of practice.

The HPC conduct biennial audits and may refuse registration if standards are not met.

**Proposed registration standard for continuing professional development**

As mandatory CPD is a new legislative requirement for the majority of registered psychologists in Australia, the Board proposes a structured program be implemented to assist registered psychologists in meeting this requirement. Because supervision is critical to safe and effective psychology practice throughout a professional career, a component of CPD is mandated as supervision, amounting to some one hour per month as a minimum (10 hours/year). Supervision, as defined, applies to all forms of psychological practice from clinical to industrial. It is defined as peer consultation with a psychologist for the purposes of professional development and support in the practice of psychology, and includes a critically reflective focus on the practitioner’s own practice.

The Board’s thinking is that isolation and practising alone represent critical risks to safe and effective practice, and experience with regulating psychology and handling complaints of malpractice impress upon it the need for prevention. Supervision is a critical and powerful method of supporting and fostering quality practice. Supervision provides the opportunity for psychologists to reflect actively on their individual practice and obtain peer review. Supervision also provides a forum for reflection on ethical and professional issues. The Board's view is that attending training workshops and other CPD activities will not in themselves provide the necessary support that will provide this safety. One hour a month is considered a minimum requirement only, but is provided to set down a basic benchmark to the profession which can be reviewed.

The Board is sympathetic to alternative modes of delivery in regional and remote areas. One-on-one includes provision for teleconference or alternative modes of delivery other than face-to-face. It is understood that most practitioners will already have established supervisory arrangements, and therefore such a requirement for formal peer consultation should not be considered an unreasonable responsibility. The Board considers the arrangement for mutual provision of consultation within a group arrangement allows for maximum flexibility in arrangements for critically reflective practice. Where group supervision is undertaken in satisfaction of this standard, the psychologist must ensure a minimum of 10 hours is devoted to the practitioner’s own practice. For instance, in a supervision group of three, a minimum of 30 hours in any one year would be required, to allow each practitioner to meet minimum standards of reflective practice. The requirement that the supervisor be a psychologist relates to issues of professional identity and peer-review, which is a benchmark of professional practice. Supervision hours must be actual hours. Ethics and professional practice issues should be one focus of supervision within CPD. The Board will accept CPD programs from professional associations as long as the supervision requirement is met.
Proposal for recency of practice standard

Purpose

The public have an expectation that registered psychologists continue to be involved in active practice, as a means of maintaining and improving their professional competence. On this basis, and in conjunction with the continuing professional development standard proposed previously in this paper, registered psychologists are expected to have participated in recent practice to ensure ongoing/continued competence to practice.

Current practices/policies within the Australian State and Territory and overseas registration boards

<table>
<thead>
<tr>
<th>Psychology</th>
<th>Recently practice required at time of application for registration or renewal of registration</th>
</tr>
</thead>
<tbody>
<tr>
<td>WA</td>
<td>Recent practice within 5 years of application.</td>
</tr>
<tr>
<td>NSW</td>
<td>Recent practice within 3 years of application.</td>
</tr>
<tr>
<td>VIC</td>
<td>Recent practice within 2 years of application.</td>
</tr>
<tr>
<td>SA</td>
<td>Implemented on case-by-case basis.</td>
</tr>
<tr>
<td>QLD</td>
<td>Recent practice within 5 years of application.</td>
</tr>
<tr>
<td>TAS</td>
<td>Recent practice within 5 years of application.</td>
</tr>
<tr>
<td>NT</td>
<td>Recent practice within 5–10 years of application.</td>
</tr>
<tr>
<td>ACT</td>
<td>Recent practice within 5 years of application.</td>
</tr>
</tbody>
</table>

Recent practice requirements for psychologists in other jurisdictions

<table>
<thead>
<tr>
<th>Jurisdiction</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>College of Psychologists of British Columbia</td>
<td>5 years of consecutive practice prior to application.</td>
</tr>
<tr>
<td>Board of Psychology — California</td>
<td>Recent practice within 3 years of application.</td>
</tr>
<tr>
<td>New Zealand Psychologists Board</td>
<td>Recent practice within 3 years of application.</td>
</tr>
<tr>
<td>Health Professions Council — United Kingdom</td>
<td>Recent practice within 2 years of application.</td>
</tr>
</tbody>
</table>
Benchmarking/comparisons with professional bodies and international standards

The expectation of the profession and the public is that registered psychologists are competent and safe to practise. Therefore, via a combination of legislative requirements that include continuing professional development and recent practice, the Board ensures that it achieves its legislative mandate of protecting the public.

The requirement for recent practice is a standard that has been implemented by a majority of registration boards here in Australia and overseas.

Proposed registration standard for recent practice

Based on the standards of Australian and overseas jurisdictions the Board has determined that applications for registration (including restoration of registration) or renewal of registration must demonstrate recent practice within three years of an application for registration or renewal of registration.
In the general registration standard, internships provide one mechanism for obtaining general registration. Details of the proposed registration standards for interns completing a Psychology Board of Australia (‘the Board’) approved supervised practice program are set out in this consultation paper. A supervised practice program is an alternative equivalent to the standard professional master’s route of entry to the profession of psychology. Supervised practice is completed after accredited university training (of four or five years duration) in order to bring the equivalent experience up to the minimum six years of training required for general registration. Although there are no changes here from what currently applies across Australia, there are small differences in the way the intern practice program is structured between States and Territories. This consultation paper therefore proposes a single internship model to be applied nationally. The Board will issue a guideline on the detailed requirements of the supervised practice program including the format of log-books, competency certificates, supervisor responsibilities and the forms of assessment and examination.

Definitions

‘Intern psychologist’ means a provisionally registered psychologist who has completed an APAC accredited four-year sequence of study and who is undertaking further years of university training or a supervised practice program for the purpose of applying for general registration as a psychologist.

Purpose

Provisional registration may be granted for the purpose of undertaking a supervised practice program approved by the Board. The Board accepts the requirement to engage in wide ranging consultation regarding training standards associated with supervised practice programs, including requirements pertaining to hours of supervised practice.


**Current practices and policies within the Australian State and Territory psychology registration boards**

**Core competencies of the supervised practice program**

Currently, across Australia, the training of intern psychologists undertaking a supervised practice program (also known as an industry-based internship) is based upon the acquisition of psychological knowledge, skills and training set out under what are usually clearly defined and interconnected ‘Competency’ requirements (also ‘statements’ or ‘certificates’).

The Board accepts the core capabilities and attributes (and knowledge underpinning them), which must be addressed in any professional program at the fifth and sixth year, established by the Australian Psychology Accreditation Council (*APAC Rules for Accreditation and Accreditation Standard for Psychology Courses*, Section 5.1.12, pages 50-55, August 2009; [www.apac.psychology.org.au](http://www.apac.psychology.org.au)) being:

(a) knowledge of the discipline  
(b) ethical, legal and professional matters  
(c) psychological assessment and measurement  
(d) intervention strategies  
(e) research and evaluation  
(f) communication and interpersonal relationships.

(See *APAC Rules for Accreditation and Accreditation Standards for Psychology Courses* 5.1.12 (a), (b), (c) and (f)

with the addition of

(g) working within a cross-cultural context  
(h) practice across the lifespan.

A Board-approved internship program must be designed to meet these eight competencies. Assessment of these competencies, and certification of completion of that achievement, is a mandatory requirement of the Board.

**Hours of supervised practice**

The Board is proposing that, consistent with current State and Territory practice, the supervised practice program must be undertaken over a minimum of two years for those commencing with an accredited four-year academic sequence, or a minimum of one year for those with an accredited five-year academic sequence. In line with the majority of jurisdictions, the program must be completed within a maximum of five years from commencement. Jurisdictions currently differ in terms of the required hours of supervised practice as set out in the table below:

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*Psychology Board of Australia: Consultation paper (27 October 2009)*  
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Two-year programs of supervised practice — States and Territories

<table>
<thead>
<tr>
<th>State/Territory</th>
<th>Minimum hours</th>
<th>Specifications</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACT</td>
<td>1600 approx.</td>
<td>Min. 20 hours per week for 2 years</td>
</tr>
<tr>
<td>NSW</td>
<td>1600 approx.</td>
<td>Min. 20 hours per week for 2 years</td>
</tr>
<tr>
<td>NT</td>
<td>1600</td>
<td>Min. of 800 hours of client contact</td>
</tr>
<tr>
<td>Queensland</td>
<td>1600</td>
<td>Hours can include 600 hours academic teaching and/or research</td>
</tr>
<tr>
<td>SA</td>
<td>3600 approx.</td>
<td>35–40 hours per week for 2 years</td>
</tr>
<tr>
<td>Tas</td>
<td>3450 approx.</td>
<td>Full-time practice for 92 weeks</td>
</tr>
<tr>
<td>VIC</td>
<td>3600</td>
<td>Full-time practice for 2 years for 96 weeks</td>
</tr>
<tr>
<td>WA</td>
<td>3600</td>
<td>37.5 hours per week for 2 years</td>
</tr>
</tbody>
</table>

Psychology Board of Australia proposal for supervised practice

<table>
<thead>
<tr>
<th>National board</th>
<th>Minimum hours</th>
<th>Specification</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>3080</td>
<td>35 hours a week for 2 years</td>
</tr>
</tbody>
</table>

Proposal

In order to achieve national consistency, the following consultation paper puts forward a set of minimum standards for supervised practice programs in psychology.

The supervised practice program requires the trainee to learn by supervised, ‘hands-on’ experience performing tasks of graduated complexity over time, with opportunities for reflecting on and refining that experience. The supervised practice program is designed to achieve the eight competencies and equip interns for independent psychological practice. Training and supervision are integral to the workplace internship.

The Board proposes that a supervised practice program is based on a 35-hour week and a seven-hour day with a maximum eight weeks provision for annual and personal leave per year (to be consistent with Northern Territory leave provisions). The Board proposes that two hours of supervision must occur per week of supervised practice. Over the year, two-thirds must be individual supervision, with the rest either being individual or group supervision. Supervision is critical to the success of intern training and where much of the learning occurs. It is also the primary mechanism for protecting the public whilst an intern is in training.

During the program, 120 hours of professional development (workshops or training programs) designed to meet the eight competencies must occur per year of supervised practice, and within those hours of practice. This is required to meet equivalence standards. This equates to approximately three hours per week of formal training.
The proposed training model is based on the common assumption that 40 per cent of psychological practice involves direct client contact (performing the specific tasks of psychological assessment, intervention and prevention) and 60 per cent involves client-related activities (including reading and researching to assist problem formulation and diagnosis, case consultation with colleagues, formal and informal reporting and professional development).

**Work roles**

The Board proposes that appropriate work roles for interns are those that involve the application of psychological knowledge, methodology, principles, techniques and ethical standards to individual clients, groups or organisations across a broad spectrum. Training hours can only be accrued for work with clients that is of a psychological nature and involves direct client contact (i.e. performing the specific tasks of psychological assessment, evaluation, intervention and prevention) and client-related activities (including reading and researching to assist problem formulation and diagnosis, case consultation with colleagues, and formal and informal written and oral reporting). Also included is time related to integrating services within the organisational context, and consulting both employers and clients. Psychological work not meeting this framework will be limited by the Board. In order to ensure continuity and consolidation of training, work role(s) must require a minimum of 15 hours per week of psychological practice.

**Supervisors**

Each intern will be supervised by a principal psychology supervisor endorsed by the Board. All interns will nominate a secondary supervisor to ensure that the provisional psychologist remains under supervision at all times and receives training in areas of practice outside the scope of practice of the principal supervisor. Secondary supervisors may provide up to one quarter the total number of supervision hours.

**Transition arrangements**

All provisional psychologists registered with the relevant State or Territory board who are participating in supervised practice programs must complete those programs to the standards and requirements of the relevant Board. The above requirements will apply to all new applications for provisional registration received from the participation day.
The Psychology Board of Australia (‘the Board’) believes it is in the public interest to be informed about a practitioner’s specialist qualifications according to the title of that qualification. The Board’s view is that specialist titles should be regulated to prevent nonqualified practitioners from ‘holding themselves out’ as having these qualifications. Specialist title regulation will ensure that the public is fully informed about the extent and type of qualifications possessed by a practitioner as well as the area of practice in which the psychologist has expertise.

**Purpose**

The Board believes it is in the public interest that a single mechanism exists for specialist registration. Currently, specialist areas of practice are recognised by a number of professional bodies, state and federal governments, statutory authorities, and one state board, all of whom use different criteria and recognise different specialties. The proposal to have a single system of specialist recognition addresses the current problems that have the potential to confuse consumers.

Specialist areas of psychology are well established with specialist competencies being acquired and developed through accredited postgraduate professional doctorate programs. The Australian Psychology Accreditation Council (APAC) regularly accredits these programs to ensure the provision of a high standard of specialist training.

The APAC Accreditation Standards for postgraduate professional doctorate programs set out detailed requirements to prepare candidates for the specialist practice of psychology. The education must be at an advanced level, building on and extending the knowledge and skills of the general registration sequence. The latter provides a thorough education in the scientific discipline of psychology and an introduction to the application of the discipline. At doctoral levels, education in psychology includes full coverage and mastery of knowledge and skills required in a specific specialist area. This is achieved through a combination of intensive coursework, supervised placement and an extensive applied research project in the specialist area.

Specialist title and competency are currently recognised through a number of mechanisms, both legislative and professional (e.g. through Medicare, victims of crime compensation schemes, workers compensation, courts, and WA Specialist Registration of Psychologists). All employ different criteria for membership of the specialisation, resulting in confusion among the public, the health profession, government and stakeholders. For example, the Australian Psychological Society recognises nine specialist areas of practice through its college structure. Statutory authorities such as Medicare Australia have based funding for psychological services, in part, on eligibility for college membership. By contrast, in Western Australia, specialist title is recognised under legislation and only seven specialist areas are recognised. The proposal to recognise title based on qualifications is parsimonious. Under the APS college structure, multiple college memberships can be acquired despite qualifications being in only a single area of specialty. Under the college structure, an individual could gain
membership of all colleges, which undermines the notion of a specialist. Psychology is an enabling discipline, and reaches deeply into many areas of Australian society. It is therefore appropriate to recognise qualifications as the basis for the specialty. To impose artificial limits on the capacity for psychology as a science and discipline to define its specialties would be an unnecessary restriction of trade.

Specialist registration protects the public interest by ensuring the public is fully informed about the extent and type of qualifications possessed by a practitioner. It will prevent nonqualified practitioners from ‘holding themselves out’ as having expertise in specialist areas and gives the Board the ability to act against nonqualified practitioners in these cases. It will promote efficiency in service delivery as both the public and other health professionals are able to identify appropriate specialist practitioners to suit their purpose.

There is legislative precedent for endorsement of specialist title in Western Australia. As was the case in Western Australia, workforce flexibility should not be reduced nor should there be any narrowing in the ability of currently qualified professionals to continue delivering services resulting from specialist registration.

Under current state acts except Western Australia, there is no title protection for those possessing higher specialist qualifications. As a result, there is a proliferation of titles psychologists can hold themselves out to have (e.g. ‘clinical psychologist’ can be used by any general psychologist without fear of sanction). Title protection would allow the public to be properly informed about the qualifications of the psychologists they are consulting. In many instances this is important, because specialist psychologists are recognised as having qualifications that make them particularly suited to providing particular services. For instance, Medicare Australia currently funds items that can only be used by psychologists possessing specialist qualifications in clinical psychology (item numbers 80000, 80005, 80010, 80015, 80020). Title protection is therefore seen as being consistent with the Board’s aim of protecting the public.

**Current practices/policies within the Australian State and Territory psychology registration boards**

Only Western Australia currently recognises specialities within the regulatory scheme.

**Proposed list of specialist areas**

Based on the requirements of Health Practitioner Regulation National Law Bill 2009 and the standards for specialist recognition of other registration authorities and professional organisations, the Board proposes that the following be recognised specialty areas:

- Clinical geropsychology
- Clinical neuropsychology
- Clinical psychology
- Community psychology
- Counselling psychology
- Educational and developmental psychology
- Forensic psychology
- Health psychology
- Industrial and organisational psychology
- Sport psychology

*Psychology Board of Australia: Consultation paper (27 October 2009)*
These reflect the specialist areas covered by the currently accredited postgraduate professional degrees. The Board welcomes comments on this approach and recognises there is a diversity of views in relation to how specialist titles could be determined.

**Operation of the proposed titles:**

The specialist titles are protected by law. The actual titles or their derivations that might lead a person reasonably to believe they have specialist registration are protected. For example, 'Specialist Clinical Psychologist'; 'Specialist in Clinical Psychology', and 'Clinical Psychologist', would all be protected titles. The generic 'Psychology Specialist' or 'Specialist in Psychology' would require the appropriate qualifying title and would not be acceptable.

There are three options for consultation regarding the requirements for specialist registration in each area:

**Option 1: Adopt the Western Australia specialist registration standard**

Option 1 is the Western Australian requirements. Eligibility for specialist registration in Western Australia requires the applicant to possess an APAC accredited postgraduate degree offered by coursework at minimally a fifth and sixth year of study in one of the above relevant specialist areas, which is followed by a minimum of two years of full-time (or part-time equivalent) supervised relevant practice pre-approved by the Board. Where an applicant possesses an APAC accredited doctorate in one of the above relevant specialist areas, the two-year supervision period might be reduced to 18 months.

**Option 2: Adopt the APS college requirements**

Option 2 is based on the colleges of the Australian Psychological Society.

Eligibility for specialist registration requires the applicant to meet the requirements for membership of the relevant APS college. College membership may be achieved via any of six pathways:

(a) Completion of a doctor of psychology program that has been accredited by APAC and approved by the society in the specialist field of the college.

(b) Completion of a master’s program that has been accredited by APAC and approved by the society in the specialist field of the college, and at least 80 hours of college stipulated professional development specified in the APS college-specific rules and approved by the board of directors.

(c) Completion of the coursework and placement requirements of a postgraduate training course equivalent to a fifth and sixth-year program of study that has been approved by APAC according to the standards for accreditation of Australian psychology programs and approved by the society according to the APS Course Approval Guidelines, in the specialist field of the college, and completed a further 80 hours of college-stipulated professional development specified in the APS college-specific rules and approved by the board of directors, and completed a PhD dissertation in the specialist field of the college.

(d) Completed the requirements set out in any of subparagraphs (I), (II) or (III) in the specialist field of one college and completed an APAC-accredited and society-approved graduate certificate or diploma in psychology in the specialist field of another
college and completed at least 80 hours of college-approved professional development specified in the APS college-specific rules and approved by the board of directors for the second college, if by completing these requirements applicants will have completed all of the requirements for membership of the second college.

(e) Passed an equivalent level competency-based assessment and supervised training in the specialist field of the college comprising:

(i) submission of an application in a format detailed by the relevant college; in addition the college may request the following:

(ii) a folio with practice, research and supervised experience components as determined by the college; if the examination committee of a college finds inadequacies in the portfolio, they may request additional assignments and/or research reports and/or supervised experience to demonstrate that the specialist knowledge and skills of the candidate reflect a standard commensurate with those of an applicant in (I), (II) or (III);

(iii) if necessary an examination (which may be written and/or oral) covering perceived gaps in material submitted in steps (i) and (ii).

(f) Colleges may develop specific criteria relating to (e), subject to approval by the Board.

More details can be found at the Australian Psychological Society website at http://www.psychology.org.au/Content.aspx?ID=1389

Option 3

Under this proposal, eligibility for specialist registration is defined as follows. The minimum qualification for specialist registration is an accredited professional doctorate in psychology in the specialty plus one year of approved supervised practice (comprising 35 hours of individual supervision with an endorsed supervisor), or equivalent. A PhD in psychology will also meet the standard for specialist registration where all specialist coursework and placements at master’s level have been met and the two additional years of supervision and professional development requirements have been completed.

Equivalence will also include grandparenting current master’s programs for the next six years, as follows. A professional master’s program in the specialty plus a two-year program of approved supervised practice (comprising 70 hours of supervision with an endorsed supervisor, of which two thirds must be individual supervision, with the rest being individual or group supervision) and 120 continuing professional development hours in the specialist area; another sequence of study acceptable to the Board; and/or passing an examination in the specialist area.

The current proposal

The Board is proposing option 3; that is, eligibility for specialist registration requires possession of an APAC-accredited doctorate degree and one year of supervised practice, or equivalent. There are well-established APAC accreditation standards applying to postgraduate training leading to specialist qualifications. The professional doctorate is recognised internationally as the required standard, and provides the highest standard of professional training available in specialist areas. For example, North America requires a
Doctorate programs require advanced coursework and practical experience in the specialty, as well as extensive research in the applied area. It is a qualification recognised as being substantially greater in depth, scope and application than that required for general registration. It is distinguished in that the education and training must be provided by academics recognised by the accreditation agency as possessing qualifications in the specialist area, supervised practice is conducted by practitioners who possess the specialist qualifications and experience, and areas of study are focused on the competencies of the specialty.

In recognition of the current criteria for specialisation in psychology, equivalence will be grandfathered for accredited professional master’s programs plus a two-year program of approved supervised practice and professional development in the specialist area. A six-year period of recognition of equivalence is proposed by the Board. The two-year supervision requirement reflects the precedent set by the Western Australian legislation. It also acknowledges the critical role of supervision in the acquisition, development and maintenance of the specialist competencies. Although professional development also has an important role, it is not sufficient to guarantee the acquisition of a competency. Allowing equivalence with the master’s programs will minimise potential workforce supply concerns as master’s programs are more prevalent across Australian universities at present.

It is acknowledged that many of the colleges of the Australian Psychological Society are well established and therefore this proposal is largely consistent with their requirements. Professional colleges are not legislative bodies and are not subject to the stringent governance and public interest requirements of public bodies. As such, eligibility for college membership is not considered suitable as an ongoing standard for specialist recognition under the new scheme.

Differences between Option 1 and the preferred option

The grandparenting proposal differs minimally from the WA requirements, in only two ways:

(a) Only 12 months of postdoctoral supervised practice (not 18) is required. This is on the basis that the APAC standards for professional doctoral degrees require additional coursework and supervised practice within the degree, which was not standard when the Western Australian legislation was adopted.

(b) It also differs in that those with master’s degrees require additional professional development in addition to supervision for one further year in order to bring their qualifications up to standard.

Differences between Option 2 and the preferred option

The proposal here is consistent with college guidelines in that the professional doctorate is the accepted standard for specialist recognition. It differs in that one year of additional supervised postdoctoral supervised practice is required, to be more consistent with Western Australia legislation and international standards (for example, doctoral qualification plus one-year externship is the required North American standard).
Transition issues

In transitioning to the new scheme, any person who held specialist title immediately before the participation day for a participating jurisdiction will be taken to hold specialist registration under the new law from the participation day.

A number of grandparent clauses will operate for three years from the participation day. This ensures that those currently in the process of meeting requirements for specialist recognition under existing arrangements that will lapse under the new scheme will not be penalised. It will also ensure those who already have recognition as a specialist as it currently applies may apply for registration as a specialist. Registrants from States and Territories apart from Western Australia may apply for specialist registration. APS college membership of the Australian Psychological Society, or those having been assessed as eligible for full membership, will be judged as meeting the equivalence criteria. Those registrants who have been recognised as eligible to use Clinical Psychologist items under Medicare will be taken to meet the equivalence criteria. The Board will consider other applications for equivalence on their merits.

The equivalence qualifications arrangement is proposed to be phased out in six years, depending on workforce needs and provision of university places.
Attachment D
Background paper for endorsement of psychology supervisors

The Psychology Board of Australia (‘the Board’) is proposing that psychology supervision should be an endorsed area of practice. Details of the proposal are set out in this consultation paper.

Purpose

The Board is of the view that psychology supervision intended to meet the requirements of provisional, general and specialist registration should be an endorsed area of practice.

Current practices and policies within the Australian State and Territory psychology registration boards

<table>
<thead>
<tr>
<th>State and Territory boards</th>
<th>Current requirements to provide supervision</th>
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<tbody>
<tr>
<td>ACT</td>
<td>Supervisors must have been unconditionally registered for a minimum of four years.</td>
</tr>
<tr>
<td>NSW</td>
<td>Board-authorised supervisors must have been fully registered as a psychologist for a minimum of three years, participated in a Board-approved supervision training program and achieved a satisfactory standard on a test of supervision knowledge.</td>
</tr>
<tr>
<td>NT</td>
<td>Supervisors must be fully registered as psychologists for a minimum of two years and must be experienced in the supervisee’s field of work or professional activity.</td>
</tr>
<tr>
<td>QLD</td>
<td>An eligible supervisor (i) must have held general registration for at least two years before applying for endorsement, (ii) must successfully complete a Board approved training program in psychology supervision.</td>
</tr>
<tr>
<td>SA</td>
<td>Accredited supervisors must be fully registered and practising psychologists for not less than two years, hold a recognised 6-year course of study in psychology.</td>
</tr>
<tr>
<td>TAS</td>
<td>Approved supervisors should be experienced in the supervisee’s field of work or professional activity, have appropriate experience and/or qualifications to provide supervision, and be registered as a psychologist for three years.</td>
</tr>
<tr>
<td>VIC</td>
<td>Approved supervisors must hold five or more years of full and unconditional registration and have completed professional development with an emphasis on supervision, adult learning and core competencies for registration.</td>
</tr>
<tr>
<td>WA</td>
<td>Approved supervisors must have been fully registered for two years, demonstrate skill and knowledge requisite of a supervisor of conditionally registered psychologists by completion of a supervision course or extensive and relevant professional development.</td>
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Proposal for supervision to be an endorsed area of practice

The process of supervision is critical in the training and ongoing safe practice of psychology. Supervisors play a key role in training and assessing professional competencies. In order to provide effective supervision, supervisors must have demonstrated proficiency in the areas of professional practice in which the supervisee is engaged, as well as possessing demonstrated skill in the provision of supervision.

There is legislative precedent for endorsement of supervision as an area of practice under Queensland legislation. The requirements for endorsement as a supervisor vary across each State and Territory but all recognise that supervisors must be Board approved. The Board considers endorsement essential to ensure that those in supervisory roles have the requisite skills. Because supervision is critical to safe psychology practice, it is in the public interest for supervisors to meet additional requirements to be recognised on the register with this scope of practice.

The proposal is unlikely to have negative workforce implications. Mandatory supervisor training in Queensland and NSW has resulted in a greater supply of trained supervisors, not less. For instance, currently in NSW there are more Board-trained and endorsed supervisors than interns in training.

Endorsement of supervisors enables the Board to set minimum standards in the qualifications, experience, training and demonstrated skills required to provide supervision for the purposes of general and specialist registration. The standard applies to all psychologists providing supervision to (a) provisionally registered psychologists, or (b) generalist psychologists undertaking training in a specialty. It therefore includes supervisors providing training within university internship and placement programs. The current thinking is that it is not intended to apply to psychologists providing supervision within a continuous professional development program, although endorsement in these situations is encouraged. The Board would welcome the views of stakeholders in relation to this matter. As such, the endorsement function accords higher responsibilities on psychologists engaged in training future generalist or specialist practitioners. Endorsement enables the Board to act against supervisors providing supervision below acceptable standards, or those who have not maintained continuous professional development required for maintaining minimum standards of practice as an endorsed supervisor.
The Board is proposing that a Psychology Supervisor must:

(a) have held general registration for at least three years before applying for endorsement
(b) successfully complete a Board approved training program in psychology supervision
(c) not be subject to conditions on their registration
(d) obtain CPD relevant to the endorsement on an annual basis to maintain the endorsement.
(e) hold specialist registration for at least two years before beginning supervision when providing supervision for the purpose of a registered psychologist undertaking a program of training for specialist registration. Specialist registration should be in the specialist area for which supervision is sought. (This requirement is not intended to apply to academics supervising research dissertations and those in line supervisor roles that are administrative or management roles in businesses, organisations or groups.)

Although this proposal requires a shorter period of general registration than existing requirements in some states, the Board is of the view that the addition of high-standard supervision training that is rigorously assessed will ensure supervisors are adequately prepared. In practising as a supervisor, the psychologist must not be a member of the supervisee’s immediate family or household, must not have been and is not currently engaged in a therapeutic relationship with the supervisee, and must not be the supervisee's immediate line manager (except with Board approval) and must uphold the Board's code of ethics.

**Board-approved supervisor training**

Currently Queensland and New South Wales have mandatory training programs for supervisors. The intellectual property of these programs is retained by the Board. Both share similar features, in that they involve two full days of training followed by examination and certification. In addition, approval is time-limited, and applicants after a period of time need to do refresher training to maintain approved supervisor status. The Board will look to these established programs in developing guidelines for approved training. The Board's thinking in this matter is that systematic training in psychology supervision and ongoing professional development in supervision has been demonstrated to be feasible and accepted by the profession, as demonstrated by the success of these two programs and the current developments in other States and Territories implementing similar programs. The CPD requirements will include refresher training and other relevant areas of practice integral to supervision including ethics training.
Transition arrangements

In transitioning to the new scheme, any person who held endorsement as a supervisor or was approved to provide supervision by a state or territory Board immediately before the participation day for a participating jurisdiction will be taken to be endorsed to provide supervision under the new law from the participation day upon application.

Where endorsement or approval to provide supervision is now required in an area where under existing legislation endorsement or approval was not required, supervisors will be granted provisional endorsement to provide supervision for a 24-month period from the date of the participation day upon application, in which time the requirements set out in this proposal must be met to maintain endorsement.