



Exposure Draft: Guidelines on area of practice endorsements

Revised September 2010, Issued November 2010

Contents

Introduction	3
Who needs to use these guidelines?	
Summary	
Area of practice endorsement	
1 Endorsement and use of title	4
2 Qualifications for endorsement	5
3 Approved supervised practice (the registrar program) to gain an endorsement	7
4 Board-approved supervisors	12
5 Examination	13
6 Application for endorsement	13
Definitions	14
Attachment A — Extract of relevant sections from the National Law	
Attachment B — Area of practice endorsements standard	
Attachment C — Area of practice endorsements competencies	

Exposure Draft

Background:

The Australian Health Workforce Ministerial Council (“the Ministerial Council”) approved the Psychology Board of Australia area of practice endorsements registration standard on 31 March 2010 and the standard has been in place since 1 July 2010 (see Attachment B).

The Board does not propose to change the approved standard and has developed and published the *Guidelines on area of practice endorsements* detailing how the standard applies. Since the guidelines were published, the Board has received feedback on how they may affect prospective and current Doctorate and PhD candidates. The Board aims to continuously improve standards in the profession and wishes to encourage students who choose to complete a higher level of education than the minimum requirement. As a result, the Board issued a consultation paper in August 2010 proposing revisions to the Guidelines which are intended to be fairer for Doctorate and PhD candidates. More than 60 submissions were received from individuals, groups and organisations. The Board greatly appreciates the comments and input from stakeholders and has made a number of changes to accommodate stakeholder feedback. This exposure draft includes the revisions and the Board proposes to adopt this draft as the new guidelines.

The Board now seeks final stakeholder feedback to this exposure draft. The draft will be available for six week and the Board will finalise these guidelines after reviewing stakeholder responses.

The exposure draft has been issued by the Psychology Board of Australia under the authority of Professor Brin Grenyer, Chair, 12 November 2010.

If you wish to provide comments on this paper, please lodge a written submission in electronic form, marked ‘Attention: Chair, Psychology Board Endorsement Guidelines’ to chair@psychologyboard.gov.au by close of business on Wednesday 22 December 2010. Please note that your submission will be placed on the Board’s website unless you indicate otherwise.

<http://www.psychologyboard.gov.au>

Introduction

These guidelines have been developed by the Psychology Board of Australia (the Board) under s. 39 of the National Law.¹ The guidelines supplement the requirements:

- set out in the Board's area of practice endorsements registration standard
- in the National Law as set out under ss. 15, 98 and 99.

These guidelines supersede any previous guidelines issued from the date of Board approval and publication on the Board's website.

The relevant sections of the National Law are set out in Attachment A. The Board's 'Area of practice endorsements registration standard' is at Attachment B.

Who needs to use these guidelines?

These guidelines are developed to provide guidance to applicants for general registration and to registered psychologists applying for endorsement in an approved area of practice.

These guidelines address the qualification and supervision requirements to be completed to become eligible for endorsement.

Summary

Pursuant to s.15 of the National Law, the Ministerial Council has approved seven areas of practice for endorsement. The endorsement function allows the Board to grant endorsement of registration to a psychologist with additional qualifications and advanced practice in an approved area of practice. Health professionals and members of the public will be able to identify psychologists who are qualified and skilled to practise in the endorsed areas of practice.

The endorsed areas of practice are:

- (a) clinical psychology
- (b) counselling psychology
- (c) forensic psychology
- (d) clinical neuropsychology
- (e) organisational psychology
- (f) sport and exercise psychology
- (g) educational and developmental psychology.

¹ The *Health Practitioner Regulation National Law Act* (the National Law) as in force in each state and territory.

Area of practice endorsement

1 *Endorsement and use of title*

Only psychologists with general registration and with an approved area of practice endorsement may use a title that indicates that they hold those endorsements. For example, a psychologist who has been endorsed to practise in the area of clinical psychology may refer to himself or herself as a 'clinical psychologist'. A person who does not have an endorsement for clinical psychology must not use the title 'clinical psychologist' or any other title that may lead the public to believe that the person holds such an endorsement. This applies to each of the seven areas of practice approved for endorsement.

Titles associated with the approved areas of practice are: clinical psychologist, counselling psychologist, forensic psychologist, clinical neuropsychologist, organisational psychologist, sport and exercise psychologist, and educational and developmental psychologist.

Psychologists should avoid using the word endorsed in their titles (i.e. should not use a title such as 'endorsed clinical psychologist').

The title 'registrar' is not a protected title under the National Law, but Board's view is that the title 'registrar' may only be used in relation to the practice of psychology by candidates currently undertaking Board approved supervised practice (the registrar program) for the purpose of gaining an endorsement in an approved area of practice. Psychologists must ensure they do not use the title in such a way that it may lead a person to believe that they currently hold an endorsement. Examples of acceptable titles are 'registrar in clinical psychology' 'registrar (clinical psychology)' or 'clinical psychology registrar'.

Candidates undertaking Masters or Doctorate degrees who have general registration, but not an endorsement, may only refer to themselves as a 'psychologist' or 'registered psychologist'. Registered general psychologists have unrestricted rights to use the title 'psychologist' and may undertake any work using that title as long as they maintain general registration.

Pursuant to s. 119 of the National Law, claiming to hold an endorsement of registration for an approved area of practice when one does not hold that endorsement may constitute behaviour for which health, conduct or performance action may be taken (maximum penalty \$30,000).

Further information about use of titles by psychologists is included in the Board's *'Guidelines for Advertising of Regulated Health Services'*.

2 Qualifications for endorsement

2.1 General

To be eligible for endorsement in one of the approved areas of practice, a psychologist must have:

- (a) an accredited Doctorate in one of the approved areas of practice and at least one year of approved, supervised, full-time equivalent practice with a Board-approved supervisor; or
- (b) an accredited Masters degree in one of the approved areas of practice and a minimum of two years of approved, supervised, full-time equivalent practice with a Board-approved supervisor; or
- (c) another qualification that, in the Board's opinion, is substantially equivalent to (a) or (b).

Note on Doctoral degrees:

Only accredited professional doctorates that include both coursework and placement components are approved under 2.1(a) above (i.e. DPsync or PsyD). Combined PhD/Masters programs (or PhD programs with Masters degree equivalent coursework and placements) are recognised as equivalent to 2.1(b). This is because the additional coursework and hours of supervision required in professional doctorates is not included in the requirements for these programs. The Board will provide some concession for practical work undertaken in the PhD (see 3.1.2 of these guidelines). Overseas PhD or DPsync/PsyncD programs with coursework will be assessed under 2.1(c).

2.2 Multiple endorsements

A psychologist who already has one or more endorsements and is undertaking further training for another endorsement must complete 75% of the supervision hours required for that new endorsement after completing their postgraduate studies. For example, a psychologist seeking a second endorsement that would normally require two years of supervised practice must complete 18 months of further supervised practice. A doctorate applicant who is normally required to undertake 12 months of supervised practice must complete nine months of supervised practice to gain the second endorsement.

A psychologist who is not endorsed, but is simultaneously seeking two endorsements (e.g. through a higher degree program associated with two areas of practice or a dual-degree program) is required to undertake 75% of the supervision required for each endorsement. For example, a psychologist who would normally be required to undertake two years of supervised practice in a dual professional doctorate (one year for each area of practice), must undertake nine months in each area (i.e. 1.5 years of supervision).

Accredited qualifications are listed at <http://www.psychologyboard.gov.au> .

2.3 Equivalence guidelines

When considering an application for endorsement under the National Law and the approved area of practice endorsement registration standard on the basis of a qualification under section 2.1(c) of these guidelines, the Board will use the following guide. Qualifications that are considered to be substantially equivalent to an accredited Doctorate or Masters degree in one of the approved areas of practice are:

- psychology qualifications gained overseas that have been assessed by the Board or an authority authorised by the Board as equivalent to an accredited Doctorate, followed by a minimum of one year of supervised, full-time equivalent practice acceptable to the Board.
- psychology qualifications gained overseas that have been assessed by the Board or an authority authorised by the Board as being equivalent to an accredited Masters degree followed by a minimum of two years of supervised, full-time equivalent practice acceptable to the Board.
- postgraduate psychology qualifications gained in Australia before the Australian Psychology Accreditation Council (APAC) began accrediting postgraduate professional degrees, that have been assessed by the Board or an authority authorised by the Board as being equivalent to an accredited Masters or Doctorate degree, followed by supervised, full-time equivalent practice acceptable to the Board.

Psychologists who have an endorsement and want to practise in a second endorsed area are advised to apply to educational institutions offering accredited programs. Applicants may wish to request advanced standing or credit for work already undertaken. Under these equivalence guidelines, the Board will consider accredited university postgraduate bridging programs as they become available after consultation with the accreditation council about the status of such programs. Graduates of such accredited courses must have the depth and breadth of supervised experience and training in the area of practice equivalent to other accredited sequences of study.

2.4 Maintaining endorsement

To maintain endorsement in an approved area of practice, a psychologist must meet the requirements of the Board's continuing professional development (CPD) registration standard. Requirement 3 of the standard states:

'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'.

This means that psychologists are expected to obtain the majority of their CPD within their endorsed area(s) of practice, therefore:

- A psychologist with one area of practice endorsement must complete a minimum of 16 hours of CPD within that area of practice and the other 14 hours required may be in any area relevant to their practice (i.e. 30 hours total).
- A psychologist with two area of practice endorsements must complete a minimum of 15 hours of CPD within each area of practice (i.e. 30 hours total).

- A psychologist with three area of practice endorsements must complete a minimum of 10 hours of CPD within each area of practice (i.e. 30 hours total).

The Board does not require endorsed psychologists to obtain additional CPD hours over and above the Board's general CPD standard of 30 hours per year.

3 *Approved supervised practice (the registrar program) to gain an endorsement*

In addition to holding an approved qualification for general registration, a candidate must complete a period of supervised practice (the registrar program) to be eligible to apply for an endorsement. The total duration of the registrar program must not exceed five years from the date the Board approves the registrar program to the date the registrar lodges an application for an area of practice endorsement with the Board. The Board will grant endorsement when the candidate has graduated from their accredited higher degree, obtained general registration and completed the Board approved registrar program.

3.1 Entry into the Registrar Program

1. Masters candidates may apply to enter the registrar program after a minimum of two years full-time enrolment in postgraduate study, and must complete all higher degree components (coursework, practicum, and thesis) and provide an official academic transcript showing the degree has been completed. The applicant must have general registration. General registration, and entry into the registrar program, may occur before formally graduating (i.e. attending the graduation ceremony).
2. Doctorate candidates (DPsyc, PsycD) may apply to enter the registrar program after a minimum of three years full time enrolment in postgraduate study, and upon completion of all doctoral coursework and placements (including the extra hours for the doctorate), and sufficient progress on the thesis has been made. The candidate must have general registration. General registration is available upon submission of an official transcript and letter from the Head of School (or their nominee) on a Psychology Board of Australia form that certifies the candidate has completed all coursework and practicum placements at the level of in the Masters program and that the thesis has progressed sufficiently as to be equivalent to a Masters thesis and would be eligible for submission as a Masters thesis at that institution.
3. Combined Masters/PhD candidates may apply to enter the registrar program after a minimum of two years full-time enrolment in postgraduate study, upon completion of all coursework and placement requirements at the level of a Masters, and sufficient progress on the thesis has been made. The candidate must have general registration. General registration is available upon submission of an official transcript and letter from the Head of School (or their nominee) on a Psychology Board of Australia form that certifies the candidate has completed all coursework and practicum placements at the level of in the Masters program and that the thesis has progressed sufficiently as to be equivalent to a Masters thesis and would be eligible for submission as a Masters thesis at that institution.

3.1.1 General requirements of registrars during the registrar program

The Board expects registrars to develop the capacity for continuing self-appraisal and to seek appropriate supervision and peer consultation over the course of the registrar program. In particular the Board expects registrars to:

1. Identify the limit of their competence in any given situation and
 - (a) consult with their supervisor regularly with regard to competence of the registrar
 - (b) in consultation with their supervisor arrive at a mutually agreed course of action when competence is limited
 - (c) implement the agreed upon course of action (which may include seeking other professional opinion).
2. Identify broader areas in which they require CPD and
 - (a) formulate a plan to develop these areas, in consultation with their supervisor
 - (b) monitor their progress in these areas and readjust the plan as necessary, in consultation with their supervisor (see Section 3.4 of these guidelines).

3.1.2 Content of the registrar program

The registrar program consists of three components:

- psychological practice
- supervision with a Board approved supervisor
- active continuing professional development.

The qualification held by the applicant for endorsement determines the level of each component required, as set out in Table 1.

Table 1 Registrar program requirements for area of practice endorsement

Qualification	Duration of psychological practice	Total number of hours of psychological practice	Total supervision required during psychological practice	Total active professional development required during psychological practice
DPsych/PsyD degree	One year FTE	1540 hours	40 hours*	40 hours*
Combined MPsy/PhD degree	1.5 years FTE	2310 hours	60 hours*	60 hours*
Masters degree	Two years FTE	3080 hours	80 hours*	80 hours*

FTE: Full time equivalent

* The continuing professional development (CPD) and supervision hours in this table include the 30 total hours of CPD per year required for the CPD registration standard (10 hours supervision [peer consultation] and 20 hours CPD) and are not additional to the hours shown in the table.

The following forms are available and are required to be lodged to the Board when applicable:

- Application for approval of registrar program in an endorsed area of practice as a psychology registrar (AEAP-76)
- Progress report for registrar program for endorsement in an approved area of practice (PREA-10)
- Application to change supervisor for a psychology registrar program (ACSP-10)
- Application to change practice site for a psychology registrar program (ACPS-10)
- Application for endorsement for an area of practice as a Psychologist on completion of approved registrar program (AECR-76)

Before beginning a registrar program, the psychologist must submit an application for approval of a registered program (Form AEAP-76) to the Board for approval. This includes details of the supervision arrangements for the registrar program. The Board must grant approval before the registrar begins the registrar program and the supervision must begin within 28 days of the date the registrar program is approved by the Board.

Six-monthly progress reports must be submitted (Form PREA-10). Approval must be sought from the Board before any substantial change is made to the registrar program including changes to the work role (Form ACPS-10) or the supervisor (Form ACSP-10).

On completion of the registrar program the psychologist is required to submit a final progress report (PREA-10) along with the application for endorsement (AECR – 76) to the Board.

The registrar program must address the core capabilities (Section 3.1.3) and incorporate the supervision and CPD requirements set out in Table 1.

3.1.3 Core competencies

For a registrar seeking practice endorsement, the candidate must be able to demonstrate that the core competencies relevant to the area of practice, as described in the following sections, have been met at a level consistent with the depth and expertise expected of a registrar after postgraduate training. The specific competencies for each of the areas of practice are detailed in Appendix C.

The core competencies are:

- (a) knowledge of the discipline, including:
 - i. psychological theories and models
 - ii. the empirical evidence for the theories and models
 - iii. the major methods of inquiry.
- (b) ethical, legal and professional matters, including detailed knowledge and understanding of ethical, legal and professional issues relevant to the area of practice

- (c) psychological assessment and measurement relevant to the area of practice
- (d) intervention strategies relevant to the area of practice
- (e) research and evaluation, including the systematic identification, critical appraisal and application of relevant research evidence
- (f) communication and interpersonal relationships, including the ability to communicate in written and oral form from a psychological perspective in a style appropriate to a variety of different audiences, and to interact professionally with a wide range of client groups and other professionals
- (g) working in a cross-cultural context, including demonstrating core capabilities to adequately practise with clients from cultures and lifestyles different from the psychologist's own
- (h) practice across the lifespan, which involves demonstrating the core capabilities with clients in childhood, adolescence, adulthood and late adulthood relevant to the area of practice.

During the course of the registrar program, regular assessment of these competencies must be made and comments included on the six-monthly progress reports (Form PREA-10). At the conclusion of the registrar program a final assessment of competencies form must be submitted. All competencies must be achieved before the registrar is eligible to apply for endorsement of registration.

3.2 Psychological practice

Psychological practice is defined in the registrar program as follows:

Practice means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a psychologist in their profession. In accordance with the Board's recency of practice registration standard, practice is not restricted to the provision of direct clinical care. It also includes using professional knowledge in a direct nonclinical relationship with clients, working in management, administration, education, research, advisory, regulatory or policy development roles, and any other roles that impact on safe, effective delivery of services in the profession.

To be approved by the Board for the purpose of the registrar program, the psychological practice must:

- be within an area of practice approved for endorsement
- consist of a minimum of 176 hours per annum of direct client contact. Client contact means direct client contact performing specific tasks of psychological assessment, intervention and prevention
- be completed and an application for endorsement lodged within five years of the date the Board approves the registrar program
- include a minimum of 30 hours of CPD per year to meet the Board's CPD standard.

Full time psychological practice for the purpose of the registrar program is 35 hours per week over a 44 week year (allowing eight weeks of annual and personal leave). Therefore, a two year full time registrar program consists of 3080 hours of practice, a one year registrar program 1540 hours of practice, and an 18 month program 2310 hours. These total hours can be spread over a maximum of five years. There must be a minimum of 176 direct client contact hours each year. The total Professional Development requirement is included in Table 1. For a registrar with a Masters qualification, this is a total of 160 hours PD (80 hours supervision, 80 hours active CPD) spread over the course of the registrar program, with a minimum of 30 hours per year (10 hours supervision and 20 hours active CPD) to meet the Board's CPD registration standard. It is important to note that registrars cannot do only the minimum supervision required per annum in every year of their supervision program because that would not allow them to complete the total supervision hours required within 5 years.

3.3 Supervision

To be approved by the Board for the purpose of the registrar program, the supervision must be:

- provided by a Board approved supervisor who is endorsed to practise in the same area of practice as the registrar program. A Board approved supervisor who is endorsed to practise in a different area is allowed to supervise for a maximum of 25% of the registrar program
- provided at least fortnightly when practising, regardless of how many hours have been provided previously and regardless of the number of hours per week of psychological practice completed
- at least one hour per session
- on an individual (one on one) basis
- provided at a minimum rate of 40 hours per full-time equivalent year of psychological practice, and must not go below 10 hours a year (i.e. for registrars taking a leave of absence for part of the year)
- provided face-to-face or via an alternative delivery (e.g. Skype, telephone)
- relevant to the application of core competencies (a) through (h) as listed in Attachment C

The registrar must submit a report from their Board approved supervisor to the Board every six months using Form PREA-10.

3.4 Continuing professional development

Continuing professional development (CPD) for the purposes of gaining endorsement must meet the requirements of 'active continuing professional development'. This means written or oral activities that engage the psychologist in active training designed to enhance and test learning. Examples of active CPD include:

- attending seminars where there is a written test
- reading a structured series of professional psychology articles followed by completion of an online assessment
- giving an oral presentation or tutorial to a group of peers on a new topic in psychology
- attending a workshop that requires role play of skills
- studying a new technique, then trialling this technique in the workplace, and a review and evaluation of the effectiveness and implementation of that technique.

Where activities are not inherently active, the supervisor must be involved to ensure that the activities become active. For example, if CPD activities are not inherently active, the supervisor must set written work or another activity (e.g. an oral report) to meet the active requirement.

In consultation with the supervisor, the registrar should:

- design a CPD program with clear learning aims and objectives that meet the registrar's practise requirements, as well as the requirements of these guidelines and the Board's CPD registration standard
- ensure any workshops are directly relevant to the area of practice related to the registrar program
- abide by the recording requirements set out in the Board's template for CPD.

4 *Board-approved supervisors*

4.1 General

The Board will approve a psychologist to provide supervision for the purposes of endorsement in an approved area of practice, when the supervisor:

- holds general registration as a psychologist; and
- holds endorsement in the approved area of practice for at least two years before commencing supervision and continues to be endorsed throughout the period of supervision (note: transitional provisions apply to this requirement until 30 June 2013); and
- has completed a Board-approved training program in psychology supervision and is currently approved (note: transitional provisions to enable supervisors to complete an approved training program apply until 30 June 2013); and
- is not a member of the supervisee's immediate family or household; and
- has not been or be currently engaged in a therapeutic relationship with the supervisee.

4.2 Maintaining approved supervisor status

An approved supervisor will be required to renew their status every five years. When applying for renewal, the supervisor will be required to provide a declaration about the number of psychologists they have supervised in the preceding five-year period, how their supervised practice and professional development have been maintained, and evidence of completion of a Board-approved supervision revision course.

4.3 General requirements of supervisors during the registrar program

It is the supervisor's responsibility to:

1. Ensure the registrar has adequate knowledge of relevant research, theory and policy before intervention.
2. Ensure the registrar has access to appropriate intervention models, so there is no undue intervention bias as a consequence of the supervisory relationship.
3. Bring to the registrar's attention any limitations of competence, ethical difficulty, personal bias or aspect of personal development in the registrar that the supervisor perceives to be affecting the registrar's professional development and/or professional application.
4. Offer sufficient supervision opportunities to enable evaluation of applications of the core competencies on a regular basis. Supervisors are expected to keep monthly documentation.
5. Directly observe registrar's work as part of the supervision process, this may include observation via by video or audio recording.
6. View active client files of the registrar intermittently as part of the supervision process.

5 Examination

The Board may require the psychologist to pass an examination after completing the registrar program, before accepting a final endorsement application.

6 Application for endorsement

On completion of the registrar program, the candidate must submit a final progress report (PREA-10) and final assessment of competencies form, that have been completed and signed by their supervisor and lodge an application for endorsement (AECR-76) with the Board. The Board will only grant endorsement to psychologists with general registration who have graduated with the relevant qualifications and have completed the registrar program. The application for endorsement must be lodged with the Board within five years of the date of approval of the registrar program, or the approval of the registrar program will lapse.

Definitions

Area of Practice Endorsement is a mechanism provided for by section 98 of the National Law through which additional qualifications and supervised practice recognised by a board can be identified to the public, employers and other users of the public online register of practitioners. Practitioners with an area of practice endorsement have that area of practice notated on the public register, and can use the title associated with that area of practice.

Client contact means direct client contact performing specific tasks of psychological assessment, intervention and prevention.

The Board means the Psychology Board of Australia.

National Law means the *Health Practitioner Regulation National Law Act 2009*, as adopted in participating jurisdictions.

Ministerial Council means the Australian Health Workforce Ministerial Council comprising Ministers of the governments of the participating jurisdictions and the Australian Government with portfolio responsibility for health.

Registrar means a generally registered psychologist who has completed a Masters or equivalent qualification in an endorsed area of practice, who is currently undertaking a Board approved supervised practice program (a registrar program) for the purpose of gaining an endorsement in an approved area of practice.

Registrar program means a Board approved supervised practice program for the purpose of gaining an area of practice endorsement with a Board approved supervisor

Standard means a registration standard approved by the Ministerial Council. In this guideline, the standard is for area of practice endorsements.

Active continuing professional development means professional learning activities in the endorsed area of practice that engage the participant in active training through written or oral activities designed to enhance and test learning.

References

Psychology Board of Australia (2010). *Area of practice endorsements registration standard*, Psychology Board of Australia, Melbourne.

Date of issue: 1 July 2010; revised November 2010
Date of review: This guideline will be reviewed at least every three years
Last reviewed: September 2010

Attachment A — Extract of relevant sections from the National Law²

General provisions

Part 5, Division 3 Registration standards and codes and guidelines

39 Codes and guidelines

A National Board may develop and approve codes and guidelines —

- (a) to provide guidance to the health practitioners it registers; and
- (b) about other matters relevant to the exercise of its functions.

Example. A National Board may develop guidelines about the advertising of regulated health services by health practitioners registered by the Board or other persons for the purposes of section 133.

40 Consultation about registration standards, codes and guidelines

- (1) If a National Board develops a registration standard or a code or guideline, it must ensure there is wide-ranging consultation about its content.
- (2) A contravention of subsection (1) does not invalidate a registration standard, code or guideline.
- (3) The following must be published on a National Board's website —
 - (a) a registration standard developed by the Board and approved by the Ministerial Council;
 - (b) a code or guideline approved by the National Board.
- (4) An approved registration standard or a code or guideline takes effect —
 - (a) on the day it is published on the National Board's website; or
 - (b) if a later day is stated in the registration standard, code or guideline, on that day.

41 Use of registration standards, codes or guidelines in disciplinary proceedings

An approved registration standard for a health profession, or a code or guideline approved by a National Board, is admissible in proceedings under this Law or a law of a co-regulatory jurisdiction against a health practitioner registered by the Board as evidence of what constitutes appropriate professional conduct or practice for the health profession.

Specific provisions

15 Approval of areas of practice for purposes of endorsement

The Ministerial Council may, on the recommendation of a National Board, approve an area of practice in the health profession for which the Board is established as being an area of practice for which the registration of a health practitioner registered in the profession may be endorsed.

Note: See section 98 which provides for the endorsement of health practitioners' registration in relation to approved areas of practice.

² The National Law is contained in the schedule to the *Health Practitioner Regulation National Law Act 2009* (Qld).

98 Endorsements in relation to approved areas of practice

- (1) A National Board established for a health profession may, in accordance with an approval given by the Ministerial Council under section 15, endorse the registration of a registered health practitioner registered by the Board as being qualified to practise in an approved area of practice for the health profession if the practitioner —
 - (a) holds either of the following qualifications relevant to the endorsement —
 - (i) an approved qualification
 - (ii) another qualification that, in the Board's opinion, is substantially equivalent to, or based on similar competencies to, an approved qualification; and
 - (b) complies with an approved registration standard relevant to the endorsement.
- (2) An endorsement under subsection (1) must state —
 - (a) the approved area of practice to which the endorsement relates; and
 - (b) any conditions applicable to the practice by the registered health practitioner in an approved area of practice.

99 Application for endorsement

- (1) An individual may apply to a National Board for endorsement of the individual's registration.
- (2) The application must —
 - (a) be in the form approved by the National Board; and
 - (b) be accompanied by the relevant fee; and
 - (c) be accompanied by any other information reasonably required by the Board.
- (3) For the purposes of subsection (2)(c), the information a National Board may require an applicant to provide includes —
 - (a) evidence of the qualifications in the health profession the applicant believes qualifies the applicant for endorsement; and
 - (b) evidence of successful completion of any period or supervised practice required by an approved registration standard; and
 - (c) if the applicant is required to complete an examination or assessment set by or on behalf of the Board, evidence of the successful completion of the examination or assessment.

Attachment B — Area of practice endorsements standard

Psychology Board of Australia Area of practice endorsements registration standard



Authority

This standard has been approved by the Australian Health Workforce Ministerial Council on 31 March 2010 pursuant to the *Health Practitioner Regulation National Law (2009)* (the National Law) with approval taking effect from 1 July 2010.

Summary

Registered psychologists who practice in certain areas of psychology may be eligible for endorsement in an approved area of practice.

The approved areas of practice for endorsement of registration are:

- a). clinical psychology
- b). counselling psychology
- c). forensic psychology
- d). clinical neuropsychology
- e). organisational psychology
- f). sport and exercise psychology; and
- g). educational and developmental psychology.

Scope of application

This standard applies to all applicants for general registration and registered psychologists who have general registration. It does not apply to any other category of registration.

Requirements

To be eligible for endorsement in one of the approved areas of practice a registered psychologist must have:

- (a) an accredited doctorate in one of the approved areas of practice, and a minimum one year of approved supervised full-time equivalent practice with a Board approved supervisor; or
- (b) an accredited Masters in one of the approved areas of practice, and a minimum of two years of approved supervised full-time equivalent practice with a Board-approved supervisor; or
- (c) another qualification that, in the Board's opinion, is substantially equivalent to (a) or (b).

References

Psychology Board of Australia Endorsement Guidelines are available on the Board's website.

Review

This standard will commence on 1 July 2010. The Board will review this standard at least every three years.



Attachment C

Area of practice endorsement competencies

Competencies Required For Clinical Neuropsychology Endorsement

Clinical neuropsychologists specialise in the assessment, diagnosis and treatment of cognitive, emotional, behavioural and broader psychological issues associated with conditions affecting the brain. The core competencies that must be achieved by an endorsed clinical neuropsychologist, at a level of depth and expertise appropriate to clinical neuropsychology following on from post-graduate training, are:

- a) knowledge of the discipline – this includes:
 - i. Knowledge of psychological theories and models
 - ii. Knowledge of the empirical evidence for the theories and models
 - iii. Knowledge of the major methods of inquiry
 - iv. Ability to analyse accurately the functions of a clinical neuropsychologist in particular settings
 - v. Capacity to work as a scientist practitioner, engaging knowledge in relevant psychological and social areas
 - vi. Knowledge of the roles of other professions and the capacity to report to other professionals appropriately and work collaboratively.
- b) ethical, legal and professional matters – this includes detailed knowledge and understanding of ethical, legal and professional issues and statutory requirements relevant to clinical neuropsychology:
 - i. Conduct consistent with the code of ethics and relevant statutory requirements
 - ii. Understanding of how ethical principles and relevant statutory requirements are used to guide professional practice
 - iii. Clear and consistent use of informed consent procedures
 - iv. Knowledge of limits of competence and personal limitations that may affect work with clients.
- c) psychological assessment and measurement
 - 1. Competent to administer, interpret and integrate a range of assessment devices including:
 - i. clinical interviews
 - ii. behavioural observations and assessments
 - iii. intellectual assessment
 - iv. neurobehavioural assessment
 - v. memory, executive/adaptive, perception, spatial behaviour, language, motor/sensory, attention/concentration, praxis-assessment
 - vi. personality, emotional and behavioural assessment
 - vii. educational attainment assessment.

2. Demonstrated competency in the following areas:
 - i. Selection of appropriate assessment techniques or instruments with proper consideration of issues of reliability and validity
 - ii. Knowledge of and competency with interview and lifespan development
 - iii. Knowledge of and competency with psychometrics and test construction
 - iv. Behavioural observation and functional analysis (where appropriate)
 - v. Knowledge of neuroanatomy, neurology, neuropathology and neuroradiological assessments
 - vi. Knowledge of neuropsychiatry, psychopathology and understanding and use of diagnostic classification systems (DSM and ICD)
 - vii. Knowledge of pharmacology and neurotoxicology.
 3. Competent in formulation procedures, including information from context of referral, interview, assessment information, diagnosis, and providing the indications for interventions.
- d) intervention strategies
1. Competent in intervention procedures demonstrated by the ability to:
 - i. Work as a scientist practitioner
 - ii. Draw from appropriate knowledge background of research and evaluation
 - iii. Review documents of policy and practice relevant to the task and setting
 - iv. Skills and knowledge of methods and techniques of rehabilitation for cognitive and behavioural disorders
 - v. Individual and family counselling within the context of neuropsychological impairment
 - vi. Skills and knowledge of approaches to environmental and behavioural learning to modify a wide range of behavioural dysfunction associated with brain impairment
 - vii. Evaluate outcome appropriately.
 2. Skilful and appropriate application of intervention processes in context of neuropsychological impairment
 - i. Forms a positive working alliance with a variety of clients
 - ii. Provide consultative service to other professionals regarding clinical neuropsychological problems

- e) research and evaluation – this includes the systematic identification, critical appraisal and application of relevant research evidence to clinical neuropsychology
 - i. Ability to develop research and evaluation and report outcomes
 - ii. Capacity to understand evidence and appropriately handle data
 - iii. Ability to synthesise research literature and apply to practice.
- f) communication and interpersonal relationships – this includes the ability to communicate in written and oral format from a psychological perspective in a style appropriate to a variety of different audiences, and to interact professionally with a wide range of client groups and other professionals.
 - i. Ability to communicate adequately with clients, within the profession, with other professionals, and with the general public
 - ii. Capacity to appear as an expert witness, including knowledge of Court systems, presentation in Court, and relevant policies and practices
 - iii. Ability to write adequate neuropsychological reports for a range of audiences
 - iv. Ability to write adequate neuropsychological reports for the legal system
 - v. Ability to keep appropriate records and case notes in accordance with the requirements of the professional setting.
- g) working within a cross-cultural context – this includes demonstrating core competencies to adequately practise with clients from cultures different from the psychologist's own.
- h) practice across the lifespan – this involves demonstrating the core competencies with clients in childhood, adolescence, adulthood and late adulthood, as relevant to the work of a clinical neuropsychologist in the context in which the psychologist is employed.

Competencies Required For Clinical Psychology Endorsement

Clinical psychologists specialise in the assessment, diagnosis, formulation and treatment of psychological problems and mental illness, using evidence based therapies. The core competencies that must be achieved by an endorsed clinical psychologist, at a level of depth and expertise appropriate to clinical psychology following on from post-graduate training, are:

- a) knowledge of the discipline – this includes
 - i. Knowledge of psychological theories and models
 - ii. Knowledge of the empirical evidence for the theories and models
 - iii. Knowledge of the major methods of inquiry
 - iv. Ability to analyse accurately the functions of a clinical psychologist in particular settings
 - v. Capacity to work as a scientist practitioner, engaging knowledge in relevant psychological and social areas
 - vi. Knowledge of the roles of other professions and the capacity to report to other professionals appropriately and work collaboratively.
- b) ethical, legal and professional matters – this includes detailed knowledge and understanding of ethical, legal and professional issues and statutory requirements relevant to clinical psychology:
 - i. Conduct consistent with the code of ethics and relevant statutory requirements
 - ii. Understanding of how ethical principles and relevant statutory requirements are used to guide professional practice
 - iii. Clear and consistent use of informed consent procedures
 - iv. Knowledge of limits of competence and personal limitations that may affect work with clients.
- c) psychological assessment and measurement
 - 1. Competent to administer, interpret and integrate a range of assessment devices including:
 - i. clinical interviews
 - ii. behavioural observations
 - iii. tests of intelligence and social functioning
 - iv. appraisals of cognitive functioning
 - v. personality tests

2. Demonstrated competency in the following areas:
 - i. Selection of appropriate assessment techniques or instruments with proper consideration of issues of reliability and validity
 - ii. Knowledge of and competency with interview and developmental case history.
 - iii. Clinical interviews to include:
 - Developmental and family history
 - Psychosocial functioning
 - Cognitive functioning
 - Behavioural functioning
 - Biological considerations (e.g. medical conditions, drug usage)
 - Mental State Examination (where appropriate)
 - iv. Psychometric and psychodiagnostic testing (where appropriate)
 - v. Behavioural observation and functional analysis (where appropriate)
 - vi. Knowledge of psychopathology and critical understanding of the use of various diagnostic classification systems (DSM and ICD)
3. Competent in formulation procedures, including information from context of referral, assessment information, diagnoses: providing the guidelines and framework for intervention with demonstrated knowledge of the implications of different forms of intervention for the case.

d) intervention strategies

1. Competent in intervention procedures as demonstrated by ability to work as a scientist practitioner to:
 - i. Draw from appropriate research literature
 - ii. Review documents of departmental and professional practice relevant to the intervention
 - iii. Formulate and test hypotheses
 - iv. Draw from knowledge of a range of intervention procedures
 - v. Design or select appropriate intervention
 - vi. Evaluate outcome appropriately
2. Skilful application of intervention processes:
 - i. Understands intervention processes (engagement, maintenance, termination, etc)
 - ii. Forms a positive working alliance with a variety of clients
 - iii. Able to utilise psychotherapy and/or behaviour therapy with individuals, couples, families and groups
 - iv. Provide consultative service to other professionals and carers regarding clinical psychological problems

- e) research and evaluation – this includes the systematic identification, critical appraisal and application of relevant research evidence to clinical psychology
 - i. Ability to develop research and evaluation and report outcomes
 - ii. Capacity to understand evidence and appropriately handle data
 - iii. Ability to synthesise research literature and apply to practice
- f) communication and interpersonal relationships – this includes the ability to communicate in written and oral format from a psychological perspective in a style appropriate to a variety of different audiences, and to interact professionally with a wide range of client groups and other professionals
 - i. Ability to communicate adequately with clients, within the profession, with other professionals, and with the general public
 - ii. Capacity to appear as an expert witness, including knowledge of Court systems, presentation in Court, and relevant policies and practices
 - iii. Ability to write adequate neuropsychological reports for a range of audiences
 - iv. Ability to write adequate neuropsychological reports for the legal system
 - v. Ability to keep appropriate records and case notes in accordance with the requirements of the professional setting
- g) working within a cross-cultural context – this includes demonstrating core competencies to adequately practise with clients from cultures different from the psychologist's own
- h) practice across the lifespan – this involves demonstrating the core competencies with clients in childhood, adolescence, adulthood and late adulthood, as relevant to the work of a clinical psychologist in the context in which the psychologist is employed.

Competencies Required For Counselling Psychology Endorsement

Counselling psychologists specialise in the provision of psychological therapy, and provide psychological assessment and psychotherapy for individuals, couples, families and groups, and treat a wide range of psychological problems and mental health disorders. The core competencies that must be achieved by an endorsed counselling psychologist at a level of depth and expertise appropriate to counselling psychology following on from post-graduate training are:

- a) knowledge of the discipline – this includes:
 - i. Knowledge of psychological theories and models
 - ii. Knowledge of the empirical evidence for the theories and models
 - iii. Knowledge of the major methods of inquiry
 - iv. Ability to analyse accurately the functions of a counseling psychologist in particular settings
 - v. Capacity to work as a scientist practitioner, engaging knowledge in relevant psychological and social areas
 - vi. Knowledge of the roles of other professions and the capacity to report to other professionals appropriately and work collaboratively.
- b) ethical, legal and professional matters – this includes detailed knowledge and understanding of ethical, legal and professional issues and statutory requirements relevant to counselling psychology
 - i. Conduct consistent with the code of ethics and relevant statutory requirements
 - ii. Understanding of how ethical principles and relevant statutory requirements are used to guide professional practice
 - iii. Clear and consistent use of informed consent procedures
 - iv. Knowledge of limits of competence and personal limitations that may affect work with clients.
- c) psychological assessment and measurement
 - 1. Administer, interpret and integrate a range of assessment devices including:
 - i. interviews
 - ii. behavioural observations
 - iii. tests of intelligence and social functioning
 - iv. appraisals of cognitive skills
 - v. personality tests.

2. Demonstrated competency in the following areas:
 - i. selection of appropriate assessment techniques or instruments with proper consideration of issues of reliability and validity
 - ii. knowledge of and competency with interview and developmental case history
 - iii. behavioural observations
 - iv. knowledge of psychopathology and understanding and use of diagnostic classification systems (DSM and ICD)
 - v. psychometric and psychodiagnostic assessment (where appropriate).
 3. Synthesise psychological knowledge in the research literature to develop assessment procedures for unique client populations.
 4. Competent in clearly formulating a treatment plan.
- d) intervention strategies
1. Demonstrate competence in intervention procedures
 2. Knowledge of a wide range of therapeutic procedures appropriate for clients who normally seek assistance, which would include understanding of:
 - i. dyadic therapy
 - ii. family therapy
 - iii. couples therapy
 - iv. the design of therapeutic groups for specified problems and populations
 3. Demonstrate a wide range of counselling skills, including the ability to:
 - i. understand intervention processes (engagement, maintenance, termination etc)
 - ii. form a positive working alliance with a variety of clients
 - iii. utilise psychotherapeutic interventions with
 - individuals
 - children
 - adolescents
 - adults
 - couples
 - families
 - iv. lead and/or co-lead therapeutic groups.

4. Utilise a theoretical system that:
 - i. explains the aetiology and remediation of psychological problems
 - ii. assists clients to develop their understanding of the aetiology and process of their difficulty
 - iii. involves clients in formulating treatment goals and strategies
 - iv. suggests processes or procedures to clients that may be used for addressing their concerns.
5. Understand and employ appropriate research designs to evaluate the effectiveness of therapeutic interventions.
6. Use the research literature to develop plans for therapeutic interventions.
7. Provide consultative service to other professionals regarding psychological problems.
- e) research and evaluation – this includes the systematic identification, critical appraisal and application of relevant research evidence to counselling psychology
 - i. Ability to develop research and evaluation and report outcomes
 - ii. Capacity to understand evidence and appropriately handle data
 - iii. Ability to synthesise research literature and apply to practice.
- f) communication and interpersonal relationships – this includes the ability to communicate in written and oral format from a psychological perspective in a style appropriate to a variety of different audiences, and to interact professionally with a wide range of client groups and other professionals
 - i. Ability to communicate adequately with clients, within the profession, with other professionals, and with the general public
 - ii. Capacity to appear as an expert witness, including knowledge of Court systems, presentation in Court, and relevant policies and practices
 - iii. Ability to write adequate neuropsychological reports for a range of audiences
 - iv. Ability to write adequate neuropsychological reports for the legal system
 - v. Ability to keep appropriate records and case notes in accordance with the requirements of the professional setting
- g) working within a cross-cultural context – this includes demonstrating core competencies to adequately practise with clients from cultures different from the psychologist's own.
- h) practice across the lifespan – this involves demonstrating the core competencies with clients in childhood, adolescence, adulthood and late adulthood, as relevant to the work of a counselling psychologist in the context in which the psychologist is employed.

Competencies Required For Educational and Developmental Psychology Endorsement

Educational and developmental psychologists specialise in how people develop and learn throughout their lives. The core competencies that must be achieved by an endorsed educational and developmental psychologist, at a level of depth and expertise appropriate to educational and developmental psychology following on from post-graduate training are:

- a) knowledge of the discipline – this includes:
 - i. Knowledge of psychological theories and models
 - ii. Knowledge of the empirical evidence for the theories and models
 - iii. Knowledge of the major methods of inquiry
 - iv. Ability to analyse accurately the functions of an educational and developmental psychologist in particular settings
 - v. Capacity to work as a scientist practitioner, engaging knowledge in relevant psychological and social areas
 - vi. Knowledge of the roles of other professions and the capacity to report to other professionals appropriately and work collaboratively.
- b) ethical, legal and professional matters – this includes detailed knowledge and understanding of ethical, legal and professional issues and statutory requirements relevant to educational and developmental psychology
 - i. Conduct consistent with the code of ethics and relevant statutory requirements
 - ii. Understanding of how ethical principles and relevant statutory requirements are used to guide professional and practice
 - iii. Clear and consistent use of informed consent procedures
 - iv. Knowledge of limits of competence and personal limitations that may affect work with clients.
- c) psychological assessment and measurement
 - 1. Administer, interpret and integrate a range of assessment devices including:
 - i. interviews
 - ii. behavioural observations
 - iii. tests of intelligence and social functioning
 - iv. appraisals of cognitive skills
 - v. personality tests.

2. Demonstrated competency in the following areas:
 - i. Selection of appropriate assessment techniques or instruments with proper consideration of issues of reliability and validity
 - ii. Knowledge of and competency with interview and developmental case history
 - iii. Selection of techniques or instruments appropriate to the clients presenting problems and development level
 - iv. Behavioural observations and functional analysis (where appropriate)
 - v. Understanding of diagnostic classification systems (such as DSM and ICD).
 3. Competent in formulation procedures including information from context of referral, assessment information, diagnosis and providing the indications for intervention with demonstrated knowledge of the implications of different forms of intervention for the case.
- d) intervention strategies
1. Knowledge of theory and research to develop appropriate behavioural, educational and/or developmental programmes:
 - i. for individuals
 - ii. for groups
 2. Implements an intervention programme with:
 - i. individuals
 - ii. groups
 3. Evaluates the effectiveness of the intervention/programme
 4. Modifies the intervention in the light of evaluation data and theoretical framework, if necessary
 5. Provides consultative service to schools and other institutions and agencies re behavioural and educational/developmental problems
 6. Negotiates mode of service delivery with client(s)
- e) research and evaluation – this includes the systematic identification, critical appraisal and application of relevant research evidence to educational and developmental psychology
- i. Ability to develop research and evaluation and report outcomes
 - ii. Capacity to understand evidence and appropriately handle data
 - iii. Ability to synthesise research literature and apply to practice

- f) communication and interpersonal relationships – this includes the ability to communicate in written and oral format from a psychological perspective in a style appropriate to a variety of different audiences, and to interact professionally with a wide range of client groups and other professionals
 - i. Ability to communicate adequately with clients, within the profession, with other professionals, and with the general public
 - ii. Capacity to appear as an expert witness, including knowledge of Court systems, presentation in Court, and relevant policies and practices
 - iii. Ability to write adequate neuropsychological reports for a range of audiences
 - iv. Ability to write adequate neuropsychological reports for the legal system
 - v. Ability to keep appropriate records and case notes in accordance with the requirements of the professional setting
 - vi. Communicates rationale and methods of interventions to:
 - a. clients
 - b. service delivery agents.
- g) working within a cross-cultural context – this includes demonstrating core competencies to adequately practise with clients from cultures different from the psychologist's own.
- h) practice across the lifespan – this involves demonstrating the core competencies with clients in childhood, adolescence, adulthood and late adulthood, as relevant to the work of an educational and developmental psychologist in the context in which the psychologist is employed.

Competencies Required For Forensic Psychology Endorsement

Forensic psychologists specialise in the application of psychological theory and skills to the understanding and functioning of the legal and criminal justice system. The core competencies that must be achieved by an endorsed forensic, at a level of depth and expertise appropriate to forensic psychology following on from post-graduate training, are:

- a) knowledge of the discipline – this includes
 - i. Knowledge of psychological theories and models,
 - ii. Knowledge of the empirical evidence for the theories and models
 - iii. Knowledge of the major methods of inquiry
 - iv. Ability to analyse accurately the functions of a forensic psychologist in particular settings
 - v. Capacity to work as a scientist practitioner, engaging knowledge in relevant psychological and social areas
 - vi. Knowledge of the roles of other professions and the capacity to report to other professionals appropriately and work collaboratively
- b) ethical, legal and professional matters – this includes detailed knowledge and understanding of ethical, legal and professional issues and statutory requirements relevant to forensic psychology
 - i. Conduct consistent with the code of ethics and relevant statutory requirements
 - ii. Understanding of how ethical principles and relevant statutory requirements are used to guide professional practice
 - iii. Clear and consistent use of informed consent procedures
 - iv. Knowledge of limits of competence and personal limitations that may affect work with clients
- c) psychological assessment and measurement
 - 1. Administer, interpret and integrate a range of assessment devices including:
 - i. Mini-mental State examination
 - ii. Functional assessment
 - iii. Personality assessment
 - iv. Group assessment
 - v. Assessment of deception
 - vi. Assessment for specific disorders & symptomatology (eg PTSD, sexual abuse, dissociation)
 - vii. Neuropsychological screening tests
 - viii. Assessment of cognitive functioning
 - ix. Criminogenic needs assessment
 - x. Risk assessments
 - xi. Survey techniques
 - xii. Competency based assessments

2. Demonstrated competency in the following areas:
 - i. Selection of appropriate assessment techniques or instruments with proper consideration of issues of reliability and validity
 - ii. Psychometric and psychodiagnostic testing (where appropriate)
 - iii. Behavioural observation and functional analysis (where appropriate)
 - iv. Knowledge of psychopathology and critical understanding of the use of various diagnostic classification systems (DSM and ICD)
3. Competent in formulation procedures, including information from context of referral, assessment information, diagnoses: providing the guidelines and framework for intervention with demonstrated knowledge of the implications of different forms of intervention for the case.

d) intervention strategies

1. Competence in the selection and application of interventions appropriate to forensic psychology:
 - i. Problem analysis and intervention selection
 - ii. Applied behavioural analysis
 - iii. Criminogenic needs assessment
 - iv. Program design, implementation and evaluation
 - v. Re-referral decision making
 - vi. Group interventions
 - vii. Individual interventions
 - viii. Interventions involving significant others
 - ix. Systemic interventions
 - x. Indirect interventions
 - xi. Behavioural consultation
 - xii. Psychoeducation (including bibliotherapy)
 - xiii. Ethical approaches to intervention and confidentiality
2. Competence in the design, development, implementation and evaluation of interventions:
 - i. Research design
 - ii. Statistical analysis
 - iii. Assessment and screening
 - iv. Data management
 - v. Information technology skills
 - vi. Leadership skills
 - vii. Awareness of demand characteristics and other threats to validity
 - viii. Feedback to participants
 - ix. Follow-up
 - x. Accessing appropriate feedback, supervision and support

- e) research and evaluation – this includes the systematic identification, critical appraisal and application of relevant research evidence to forensic psychology
 - i. Ability to develop research and evaluation and report outcomes
 - ii. Capacity to understand evidence and appropriately handle data
 - iii. Ability to synthesise research literature and apply to practice.
- f) communication and interpersonal relationships – this includes the ability to communicate in written and oral format from a psychological perspective in a style appropriate to a variety of different audiences, and to interact professionally with a wide range of client groups and other professionals
 - i. Ability to communicate adequately with clients, within the profession, with other professionals, and with the general public
 - ii. Capacity to appear as an expert witness, including knowledge of Court systems, presentation in Court, and relevant policies and practices
 - iii. Ability to write adequate neuropsychological reports for a range of audiences
 - iv. Ability to write adequate neuropsychological reports for the legal system
 - v. Ability to keep appropriate records and case notes in accordance with the requirements of the professional setting.
- g) working within a cross-cultural context – this includes demonstrating core competencies to adequately practise with clients from cultures different from the psychologist's own.
- h) practice across the lifespan – this involves demonstrating the core competencies with clients in childhood, adolescence, adulthood and late adulthood, as relevant to the work of a forensic psychologist in the context in which the psychologist is employed.

Competencies Required For Organisational Psychology Endorsement

Organisational psychologists specialise in analysing organisations and their people, and devising strategies to recruit, motivate, develop, change and inspire. The core competencies that must be achieved by an endorsed organisational psychologist are the following, at a level of depth and expertise appropriate to organisational psychology following on from post-graduate training:

- a) knowledge of the discipline – this includes
 - i. Knowledge of psychological theories and models,
 - ii. Knowledge of the empirical evidence for the theories and models
 - iii. Knowledge of the major methods of inquiry
 - iv. Ability to analyse accurately the functions of an organisational psychologist in particular settings
 - v. Capacity to work as a scientist practitioner, engaging knowledge in relevant psychological and social areas
 - vi. Knowledge of the roles of other professions and the capacity to report to other professionals appropriately and work collaboratively.
- b) ethical, legal and professional matters – this includes detailed knowledge and understanding of ethical, legal and professional issues and statutory requirements relevant to organisational psychology
 - i. Conduct consistent with the code of ethics and relevant statutory requirements
 - ii. Understanding of how ethical principles and relevant statutory requirements are used to guide professional practice
 - iii. Clear and consistent use of informed consent procedures
 - iv. Knowledge of limits of competence and personal limitations that may affect work with clients
- c) psychological assessment and measurement
 - 1. Administer, interpret and integrate a range of assessment devices including:
 - i. Interviews and organisational review methodologies (surveys, questionnaires and focus groups)
 - ii. Experimental and applied research, job analysis and job evaluation
 - iii. Psychological tests including those for measuring cognitive abilities, aptitudes, skills, interests, personality, values and motivation
 - 2. Knowledge and competence with assessment devices which include:
 - i. Selection of appropriate assessment techniques or instruments with proper consideration of issues of reliability and validity
 - ii. A variety of interview formats
 - iii. Psychometrics and test construction
 - iv. Behavioural observation and functional analysis (as appropriate)

3. Competence in formulation procedures, including information from context of referral, interview, assessment information, diagnosis and providing the indications for interventions.
- d) intervention strategies
1. Ability to work as a scientist practitioner to:
 - i. Draw knowledge from a wide range of intervention procedures (eg team building, job redesign, survey feedback)
 - ii. Draw from appropriate knowledge background of research and evaluation
 - iii. Design or select appropriate intervention
 - iv. Design monitoring and feedback mechanisms within intervention processes
 - v. Evaluate outcomes appropriately.
 2. Competence in the skilful application of intervention processes:
 - i. Understanding intervention processes (engaging, clarifying issues, contracting, diagnosing, implementation, maintenance, monitoring, evaluation termination)
 - ii. Identifying relevant contextual factors (eg policies, legislation, technological advances) relevant to task and setting and identifying stakeholders likely to be affected by intervention
 - iii. Clearly identifying the relevant 'clients' or stakeholders and their position and interest within the intervention context
 - iv. Exercising high level diagnostic skills by clarifying issues and being able to identify issues beyond those 'presenting'
 - v. Documenting interventions and reporting strategies, processes and outcomes in a form useful to client
 - vi. Forming positive working alliances with a variety of clients
 - vii. Being able to intervene dynamically and appropriately at the level of the individual, group and organisation
 - viii. Providing consultative services to other professionals regarding problems relevant to Organisational Psychology
- e) research and evaluation – this includes the systematic identification, critical appraisal and application of relevant research evidence to organisational psychology
- i. Ability to develop research and evaluation and report outcomes
 - ii. Capacity to understand evidence and appropriately handle data
 - iii. Ability to synthesise research literature and apply to practice.

- f) communication and interpersonal relationships – this includes the ability to communicate in written and oral format from a psychological perspective in a style appropriate to a variety of different audiences, and to interact professionally with a wide range of client groups and other professionals
 - i. Ability to communicate adequately with clients, within the profession, with other professionals, and with the general public
 - ii. Capacity to appear as an expert witness, including knowledge of Court systems, presentation in Court, and relevant policies and practices
 - iii. Ability to write adequate neuropsychological reports for a range of audiences
 - iv. Ability to write adequate neuropsychological reports for the legal system
 - v. Ability to keep appropriate records and case notes in accordance with the requirements of the professional setting.
- g) working within a cross-cultural context – this includes demonstrating core competencies to adequately practise with clients from cultures different from the psychologist's own
- h) practice across the lifespan relevant to the work of an organisational psychologist – this involves demonstrating the core competencies with clients in childhood, adolescence, adulthood and late adulthood, as relevant to the work of an organisational psychologist in the context in which the psychologist is employed.

Competencies Required For Sport And Exercise Psychology Endorsement

Sport and exercise psychologists specialise in psychological and mental factors that influence, and are influenced by, participation in sport, exercise and physical activity, and the application of this knowledge to everyday settings. The core competencies that must be achieved by an endorsed sport and exercise psychologist are the following, at a level of depth and expertise appropriate to sport and exercise psychology following on from post-graduate training:

- a) knowledge of the discipline – this includes
 - i. Knowledge of psychological theories and models,
 - ii. Knowledge of the empirical evidence for the theories and models
 - iii. Knowledge of the major methods of inquiry
 - iv. Ability to analyse accurately the functions of a sport and exercise psychologist in particular settings
 - v. Capacity to work as a scientist practitioner, engaging knowledge in relevant psychological and social areas
 - vi. Knowledge of the roles of other professions and the capacity to report to other professionals appropriately and work collaboratively.
- b) ethical, legal and professional matters – this includes detailed knowledge and understanding of ethical, legal and professional issues relevant to sport and exercise psychology
 - i. Conduct consistent with the code of ethics
 - ii. Understanding of how ethical principles are used to guide professional practice
 - iii. Clear and consistent use of informed consent procedures
 - iv. Knowledge of limits of competence and personal limitations that may affect work with clients
- c) psychological assessment and measurement
 - 1. Administer, interpret and integrate a range of assessment devices including:
 - i. Interviews
 - ii. Behavioural observations
 - iii. Appraisals of cognitive skills
 - iv. Appropriate psychometric tests
 - v. Group/team function, assessments
 - 2. Demonstrated competency in the following areas:
 - i. Selection of appropriate assessment techniques or instruments with proper consideration of issues of reliability and validity
 - ii. Knowledge of and competency with interview and developmental case history.
 - iii. Psychometric testing (where appropriate)
 - iv. Behavioural observation and functional analysis (where appropriate)

- d) intervention strategies
 - 1. Competent in intervention procedures:
 - i. Ability to work as a scientist practitioner to:
 - ii. Draw from appropriate knowledge background of research and evaluation
 - iii. Formulate and test hypotheses
 - iv. Formulate motivational and risk management strategies appropriate to competitive settings
 - v. Draw from knowledge of a wide range of intervention procedures
 - vi. Design or select appropriate intervention
 - vii. Evaluate outcome appropriately
 - 2. Demonstrates skilful application of intervention processes:
 - i. Understands intervention processes (engagement, maintenance, termination, etc)
 - ii. Forms a positive working alliance with athletes, coaches, teams, administrators, officials and organisations
 - iii. Understands and can work within the typical time pressures of competitive sport
 - iv. Able to implement appropriate exercise and wellbeing intervention with individuals, partners, families
 - v. Able to develop, implement and evaluate programs appropriate to the culture of the competitive sporting environment with teams
 - 3. Demonstrates the ability to design and implement applied research projects in response to the needs of sport and exercise.
- e) research and evaluation – this includes the systematic identification, critical appraisal and application of relevant research evidence to sport and exercise psychology
 - i. Ability to develop research and evaluation and report outcomes
 - ii. Capacity to understand evidence and appropriately handle data
 - iii. Ability to synthesise research literature and apply to practice
- f) communication and interpersonal relationships – this includes the ability to communicate in written and oral format from a psychological perspective in a style appropriate to a variety of different audiences, and to interact professionally with a wide range of client groups and other professionals
 - i. Ability to communicate adequately with clients, within the profession, with other professionals, and with the general public
 - ii. Capacity to appear as an expert witness, including knowledge of Court systems, presentation in Court, and relevant policies and practices
 - iii. Ability to write adequate psychological reports for a range of audiences
 - iv. Ability to write adequate psychological reports for the legal system
 - v. Ability to keep appropriate records and case notes in accordance with the requirements of the professional setting

- g) working within a cross-cultural context – this includes demonstrating core competencies to adequately practise with clients from cultures different from the psychologist's own.
- h) practice across the lifespan – this involves demonstrating the core competencies with clients in childhood, adolescence, adulthood and late adulthood, as relevant to the work of a sport and exercise psychologist in the context in which the psychologist is employed.