The consultation paper on codes and guidelines is an important step forward in the effective management of the new national registration regulations. The Board is to be congratulated on the quality of the document, particularly given the tight timelines under which they were working.

The guidelines on advertising provide clear and sensible recommendations. One concern about these guidelines is the requirement that advertising that includes photographs must show real clients who have undergone the treatment being advertised. The sensitivity of many individuals to disclose that they have undertaken psychological treatment makes this requirement a difficult one for psychologists seeking to portray a realistic depiction of therapy. The requirement to include photographs of actual clients seems very sensible when looking at treatments that alter physical appearance. However, the guidelines seem less relevant when portraying psychological treatments.

The guidelines on mandatory notification helped clarify an area that has been unclear in many of the previous state legislation and guidelines. The focus on mandatory notification where there is significant ongoing risk to the public is an appropriate emphasis.

The proposal for a code of ethics very sensibly adopts the current code of ethics of the Australian Psychological Society. As noted in the proposal, these guidelines are broadly in line with comparable guidelines internationally, and set a useful beginning point for the development of a nationally acceptable code of ethics. The Canadian Psychological Society have one principle in its code of ethics that is not included in the current code of ethics of the Australian Psychological Society that should be considered for inclusion. That additional principal is the concept of public and social responsibility. That ethical guidelines suggest that members of the profession of psychology have an ethical duty to utilise their professional knowledge and skills in ways that advance the public good. Specific examples of that including contributing time when they have appropriate expertise to contribute to public debate, and to contribute to the education of the future generation of professional psychologists. In the proposed ongoing consideration of the code of ethics it would be helpful to consider the inclusion of such a public responsibility clause.

The guidelines on continuing professional development set an appropriate benchmark for ensuring that professionals are up to date in their knowledge and skills. It would be helpful to ensure that the administrative procedures for monitoring professional development by the National registration board are coordinated with the requirements of the Australian Psychological Society, so that psychologists only need to keep one set of records about their continuing professional education.

The guidelines on areas of practice endorsements represent a significant step forward in the recognition of specialist knowledge and training within the profession of psychology. The guidelines provide that for someone to be endorsed in an area of specialised practice a psychologist will be required to have an accredited doctorate in the approved areas of practice plus at one year of approved supervision. Someone with an accredited Masters in an approved area of practice will require two years approved supervision to gain their area of practice endorsement. These requirements represent an increase in the level of supervised practice
required after postgraduate training. This extra year will delay people entering the work force and potentially might influence eligibility for the clinical psychology level Medicare rebates. The immediate adoption of this standard reduces the number of endorsed clinical psychologists entering the private practice workforce. At the same time the proposed standards do better reflect best practice internationally and are an appropriate standard to require. A useful compromise might be to phase in the requirements over a period of three years so that students currently in post graduate training are not disadvantaged by the increase in required supervision before recognition of their specialized area of practice. This also would reduce the immediate impact on the clinical psychology workforce.

The guidelines on the internship requirements for people completing two years of supervised practice after four years of academic training are rigorous, as they should be. It is very pleasing to note that the extensive monitoring of achievement of the objectives, and quality of supervision are only to be required of people following this pathway to professional training in psychology. In some states this extensive paperwork has been required of students undertaking accredited professional postgraduate training programs, and this has been an unnecessarily time-consuming requirement when those students were completing a program whose structure and assessment had been approved.

In considering the guidelines for the internship of people completing the 4+2 mode of preparation for practice as a psychologist, it is important to note that this mode of training is not acceptable anywhere else in the world where psychology is an established profession. Despite the rigour of the proposed guidelines, such self-directed and largely unstructured learning is no substitute for an appropriately accredited postgraduate training program. It is pleasing to note that in the earlier statements by the National registration board it is proposed to phase out this method of gaining registration as a psychologist across the next five years.

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