25 January 2012

Professor Brin Grenyer
Chair, Psychologists Registration Board of Australia

Dear Professor Grenyer

Thank you for the opportunity to comment on the Board’s Guideline for Supervisors and Supervisor Training Providers. I am writing on behalf of the APS College of Clinical Neuropsychologists, which represents the majority of Australia’s 411 endorsed clinical neuropsychologists, as well as an additional 100 student and associate members.

Members of the APS College of Clinical Neuropsychologists (CCN) recognise that training in supervision is an important way to ensure that supervisors provide good supervision, to assist supervisors in undertaking the important gate-keeping role, and to help avoid harmful supervision. There is concern, however, that any proposed supervisor training should be appropriate and effective in content, and readily accessible to individual practitioners in terms of time and cost. There is a significant concern that mandatory supervisor training will be expensive and time-consuming, and a disincentive for clinical neuropsychologists to continue to provide the supervision which is essential to training and the ongoing renewal of our neuropsychology workforce.

The status of supervision in clinical neuropsychology

Australia’s Clinical Neuropsychologists largely work in the public health sector. By far the majority of their supervision activities are provided as part of their existing employment to i) postgraduate students doing approved post-graduate professional neuropsychology courses; ii) new graduates (Registrars) working in their organisations; and iii) junior staff working in their organisations. There is no financial incentive to neuropsychologists to provide supervision in these settings, and very few neuropsychologists provide supervision for a fee – these arrangements are usually made where a registered psychologist needs supervision at a workplace where a suitable neuropsychology supervisor is not available.

Neuropsychology students must obtain field placements in a variety of settings (e.g., rehabilitation, acute neurology, paediatrics, psychiatry); neither supervisors nor their institutions are reimbursed for these activities. Given the significant existing costs to universities to run postgraduate training programs in clinical neuropsychology even after student fees are considered, it is highly unlikely that universities would be willing to cover the additional cost of paying for field supervisors to attend supervisor training.

At the supervisor workshop held at the November 2011 CCN conference, a number of neuropsychology course coordinators spoke of ongoing difficulties in finding suitable placements with suitable supervisors. Concern was expressed that the proposed rapid introduction of mandatory supervisor training would result in even fewer supervisors being available to offer placements to students. This is not just a problem for the universities: if suitable supervisors and
placements are not available, then the current training of postgraduate neuropsychology students at 6 universities around the country will not be viable, the registrar program will cease because there will not be enough supervisors to supervise them, and the current severe undersupply of neuropsychologists in Australia will only worsen, with significant impacts on an already underserviced and largely invisible population of people with brain disorders who need neuropsychological diagnostic and treatment services.

**Clinical neuropsychologists’ concerns about the proposed mandatory supervisor training**

There is concern from CCN members that very few employers pay for neuropsychologists to attend any professional development activities, and would not necessarily allow leave to attend the proposed 2 days of supervisor training. For example, in Victoria, the proposed 2 days of supervisor training would use up the two days of professional development leave allowed under the current psychologists’ award, and thus limit opportunities for other PD activities. Many public sector neuropsychologists would need to pay for supervisor training out of their own finances, with no prospect of recouping those costs through private supervision arrangements, and would have to attend training through either taking annual leave or attending on a weekend. This is seen as a significant disincentive to completing mandatory supervisor training.

**Threats to continuation of clinical neuropsychology if there are not enough supervisors**

The fundamental concern is that a cost- and time-expensive mandatory supervisor training program could potentially see the existing low supply of supervisors disappear, effectively sealing the demise of our profession. In order to ensure that psychologists embrace supervisor training, it needs to be of very high quality, relevant to their practice, and feasible in terms of time and money. Otherwise, we face the risk of having a sudden shortage of registered supervisors in 2013 when the new rules come in.

**Neuropsychologists’ comments about the existing supervisor training programs**

The existing monopolies on training held in Queensland, NSW, and Tasmania are seen as restrictive options for supervisor training (e.g., online courses or workshops given by other providers are not recognised), and training is far too restricted in focus (4+2, clinical/counselling only) and costly in terms of time and money (in Qld at least $3000). The generic supervisor training in Queensland, NSW and Tasmania was unanimously seen as aimed at 4+2 supervisors, and much of the material was perceived as irrelevant to specialist psychologists, and a deterrent to participating in the existing programs.

**Neuropsychologists’ concerns about the proposed training model**

The proposed training model would prevent a small group like the CCN from developing its own supervisor-training programs for its members, even though many members desire this. The requirements specified by the Board include a large number of administrative and reporting responsibilities that would prohibit a volunteer organisation from offering training tailored to the specialist needs of its members. As a result, there is concern that the Board's request for training consortiums to provide the training will perpetuate this as a commercial enterprise, based on profit. The CCN would argue that, given its mandate to protect the public, the Board should be ensuring appropriate, affordable and accessible training for registered psychologists who want to supervise others and ensure the quality and continuation of the profession.
There is particular concern from neuropsychologists in Queensland, where a monopoly provider was appointed after tenders were called for by the Queensland Registration Board. The monopoly situation in Queensland prevented psychologists from being able to choose their training, and forced them to either pay for expensive supervisor training that was geared at clinical and counselling psychologists, or to give up supervising completely.

**Suggested alternative solutions to the need for supervisor training**

Neuropsychologists support the idea of a high-quality supervisor training program that covers generic supervisory competencies, but is also customised to the psychologists taking the course. If one of the intentions of supervisor training is to assist supervisors as gatekeepers for the profession, it makes sense for supervisor training to be aimed at groups of psychologists from different areas of endorsement, as there are unique competencies required of each endorsed area, and different supervision models are applicable in the varying endorsed areas of practice.

While there are generic supervisory competencies that should apply to all supervisors, the requirements for 4+2 supervisors differ from those for students and graduates of APAC-approved postgraduate. The Board’s decision to call for proposals for separate training for 4+2 supervisors is therefore appropriate, and the suggestion of provision of training in supervision for graduate students is also welcomed. However, creating a one-size-fits-all supervisor training program for all the endorsed areas of practice would prevent the in-depth discussion of assessment of endorsement-specific competencies in students and registrars. In neuropsychology, at least, many supervisors are responsible for both postgraduate students and registrars, and it would be most time-efficient to combine the training for these two types of supervision.

Neuropsychologists believe that if mandatory supervisor training is to be successful, it should be free, or as close to no-cost as possible, or that the Board should take an active role in requiring universities to provide Board-accredited supervision training to their field supervisors as part of the APAC course approval requirements.

It is our understanding - based on the experience of our members who have previously attended training in NSW and Tasmania - that much of the content of the 2 day workshop could be offered as online units, with competency-based assessments online, and with up to 5 hours spent in group work. This would offer a more practitioner-friendly model in terms of time, travel, and potential costs, and would be of particular benefit to psychologists working in regional Australia.

As an alternative to the Board’s proposal of time and cost-intensive workshop-based training, psychologists could engage in study of some of the excellent texts and references on supervision training available (e.g. Campbell’s *Essentials of Clinical Supervision*, or Falender & Shafranske’s *Clinical Supervision: A competency-based approach*), and complete online assessments related to that reading.

**Timeframe and recognition of prior learning**

It is recommended that the June 2013 deadline for supervisor training be reconsidered, to allow psychologists the time needed to complete this important training.

We would also argue strongly for the recognition of prior learning or PD activities in supervision training, as a sign of good faith from the Board that
psychologists are generally highly committed, ethical professionals who take their work and profession seriously, and who already have a range of skills and knowledge in the area.

The Board’s fact sheets on CPD state that supervisors should engage in supervision of supervision as part of their CPD requirements, and should also engage in ongoing PD activities related to supervision. If a low-cost competency-based supervision syllabus was established and available online, with follow up through peer supervision-of-supervision groups, it would be more attractive to the many psychologists who already provide supervision for no greater reward than the ability to contribute to the development of new clinicians.

The Board is to be congratulated on raising the importance of supervisor training in Australia, but it needs to ensure that implementation of this initiative does not result in the loss of supervisors needed to ensure the continuation of the psychology workforce in Australia.

Yours sincerely

Fiona Bardenhagen, PhD MAPS
Chair, APS College of Clinical neuropsychologists

and members of the CCN National Committee