

# A brief orientation to the National Psychology Examination

# Purpose

This brief orientation guide (the guide) has been prepared by the Psychology Board of Australia (the Board) to assist candidates to prepare for the National Psychology Examination (the examination).

The guide has been developed for educational purposes only and is designed to be read alongside the examination curriculum and the examination recommended reading list. The examination curriculum is the Board's official statement of the examination content. Candidates should be aware that studying the recommended readings alone will make it difficult to pass the examination.

While this guide is not an exhaustive or definitive instruction about the competencies that the examination may assess, it has been designed to assist candidates in their examination preparation. The best preparation for the examination is the completion of your courses of study, a thorough study of the curriculum and the experience obtained from the application of knowledge in the context of supervised practice.

The purpose of the examination is to test the application of knowledge and clinical reasoning to professional psychology practice. The examination is designed to assess the eight competencies necessary for general registration as a psychologist in order to practise safely on the public. These competencies are measured by four examination domains (ethics, assessment, interventions, and communication). As a competency-based examination, the examination is not designed to test recall of textbook-type knowledge. Rather, it requires the application of relevant information and critical reasoning to practice. Therefore all examination questions use case studies, and require candidates to demonstrate competence in decision-making and applied professional practice skills. For more information on the examination guidelines, curriculum, reading list, policies and forms, please refer to the <u>Board's website</u>.

## **Domain 1: Ethics**

This domain focuses on legal, ethical and professional conduct, and its application to psychological practice.

## Legal issues

Knowledge and application of relevant legislation, including:

- the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law) and the standards, codes, guidelines and policies of the Psychology Board of Australia, and
- relevant sections of national, state and territory legislation and principles of best practice relating to:
  - o privacy, freedom of information and maintenance of health records
  - antidiscrimination and equal opportunity
  - o mental health care (e.g. involuntary treatment, informed consent)
  - duty to protect (e.g. guardianship, firearms)
  - duty to report (e.g. child abuse, elder abuse, domestic violence, criminal acts, unsafe sexual practice, access to firearms, suicide risk)
  - children and adolescent issues (e.g. confidentiality, competency to consent on the Gillick mature minor principle)
  - access to compensation, including victims of crime, workers compensation and motor vehicle accident schemes and insurance
  - legislation relevant to government funding sources such as: disability services, Medicare and Veteran's affairs, and
  - o psycho-legal principles (e.g. expert witness code of conduct, guidelines, responding to a subpoena/summons, producing records).

# Study guide to this section

The examination contains items that assess your understanding of how relevant legislation applies to the practice of psychology. Familiarity with legislation helps psychologists to define the boundaries of their psychological practice and to uphold the rights of clients.

- Is the client capable of informed consent?
- How do I maintain my client's right to privacy when storing their records?
- Is the person being treated as a result of a workers' compensation claim, and what issues do I need to take into consideration?
- What must I do if a client with severe mental health impairment has firearms?
- What principles should I apply when getting consent to treat minors?

Domain 1: Ethics (cont.)

#### **Ethical issues**

Knowledge and application of the ethical principles and standards in the codes endorsed by the Psychology Board of Australia (the Board) at the time, and relevant ethical guidelines.

# Study guide to this section

This section of the examination assesses your ability to understand and apply the Board's nominated code of ethics. The Board has adopted the Australian Psychological Society's (APS) *Code of Ethics* (the Code).

The intent of this section is to allow you to apply decision-making to case studies that have ethical dilemmas. In order to answer the case studies with confidence, you should have an understanding of the Code and how it is applied in practice.

When studying for this area of the examination, the most important aspect to remember is that the questions in the examination are not designed to test your memory of the Code. You will not be asked a question such as, 'What is the key principle in A.4 of the Code?'

- What are the limits to confidentiality and how should I inform clients of these limits?
- What principles are used to judge a psychologist's behaviour?
- When should I refer a client on to another psychologist if the client's presentation is outside my area
  of expertise?
- How do I ensure my record keeping is adequate?
- Why are sexual relations between a psychologist and a client unethical?

# Domain 1: Ethics (cont.)

#### **Professional issues**

Understanding of models and approaches for continuing professional development, including methods for:

- supervision and peer consultation in a proactive planned and responsive way to address limitations and challenges in practice
- developing, updating, and enhancing knowledge through continuing education (maintaining competence)
- professional self-management including self-reflection, self-assessment, and self-care (maintaining psychological and physical wellbeing)
- understanding the limits of one's own competence, training and skills, and applying appropriate responses to manage these limitations including consultation and referral
- reflecting on and attending to the influence of a practitioner's personal motivation, biases, and values including the impact of these on others
- maintaining proper professional boundaries and attending to transference and countertransference issues appropriately
- developing cultural responsiveness when working with diverse groups, including Aboriginal and Torres Strait Islander peoples, and
- monitoring the effectiveness of a psychologist's practice, and engaging in continuous improvements to practice.

## Study guide to this section

This section of the examination assesses your ability to understand the importance of the different methods of continuing professional development (CPD). Having an understanding of the role of CPD, and accessing appropriate CPD, is essential to delivering sound psychological services.

- What are some ways that peer consultation might guide my practice?
- What is the role of a senior colleague when I am struggling with a professional dilemma?
- What are some ways to ensure I remain up to date in my practice?
- What are the CPD requirements to maintain registration and what is the rationale for the Board's CPD model?
- What strategies can I use to look after my health and wellbeing as a practitioner?

## **Domain 2: Assessment**

This domain focuses on skills and knowledge in conducting psychological assessment, and applying this knowledge to problem formulation. Formulation is the generation and testing of hypotheses leading to a dynamic psychological understanding of a client's presentation.

#### Examination candidates will demonstrate:

- 1. Understanding of issues in test selection, use, interpretation, acceptability and appropriateness, including:
  - the application and limitations of tests and their psychometric and normative basis, including test reliability, validity, utility and standardisation
  - the ability to identify and choose appropriate assessment instruments
  - cultural responsiveness in testing diverse groups
  - the ability to score tests and interpret results, and
  - understanding the limitations of computerised interpretive reports.
- 2. Knowledge and understanding of the application of forms of assessment including:
  - interview techniques (structured and unstructured)
  - systematic behavioural observation
  - psychometric assessments
  - self-monitoring (including diaries), and
  - goal setting based on needs analysis.

## Study guide to this section

This section of the examination assesses your knowledge and competence to apply evidence-based principles and practices in selecting assessment techniques, tests, and measures to examine hypotheses about client presentations.

You will not be examined on verbatim knowledge of test instructions, psychometric features, or normative data of particular tests or measures, but rather on your understanding of the general principles of assessment.

This section of the examination will also use case studies to assess your ability to link test results to the following components of psychological practice:

- case formulation and diagnosis
- treatment planning

- monitoring of treatment progress and outcome
- recommendations for future care and support needs (i.e. disability support services, educational support), and
- formally reporting the outcomes of assessment or treatment.

- What is the referral question I am trying to answer?
- What client features should I take into consideration when planning the assessment?
- Are the results of testing consistent with the information gathered from other sources?
- What other methods of assessment apart from specific tests should I use in order to answer the referral question?
- What are the limitations of the test I am using?

# Domain 2: Assessment (cont.)

 Ability to administer, score and interpret current editions of psychometric tests (using relevant Australian norms where available) and use the information to write reports. This includes using and reporting standardised scores, range, percentile ranks and descriptors.

It is important to use the most recent version of the test, with some caveats as follows. Some tests are currently being updated, or have recently been updated. If the more recent version of a test does not have Australian norms, the Board will accept older versions that have been normed on the Australian population. When a new version has Australian norms, a two year period is allowed to transition between test versions. This curriculum lists the name of the test, but not the current version number as this is subject to change. It is the candidates' responsibility to use current tests.

Candidates will be asked detailed questions to demonstrate competence in the administration, scoring and interpretation of six selected tests:

- WAIS (Wechsler Adult Intelligence Scale)
- WISC (Wechsler Intelligence Scale for Children)
- PAI (Personality Assessment Inventory)
- DASS (Depression, Anxiety and Stress Scale)
- K-10 (Kessler Psychological Distress Scale), and
- SDQ (Strengths and Difficulties Questionnaire).

## Study guide to this section

This section of the examination assesses your ability to apply your knowledge of the six specific tests to a real-life issue described in the case study. You are expected to have a working knowledge of the design, rationale for use, administration, and scoring relating to the use of each test. The questions may ask you to use your knowledge to identify appropriate use in treatment planning, and across different populations, age groups or cultural backgrounds.

You should be familiar with the information in the manual regarding administration and limitations and interpretation of scores. Other readings relevant to the test will expand your understanding of how to use the test in planning interventions or reporting findings. The case study may ask you to apply your knowledge of a specific test to help identify a clinical condition, assist in the development of a treatment plan, or advise on future management by another party.

- When should I use the WAIS over the WISC?
- How do I determine a client's cognitive strengths and weaknesses from the WISC?
- How should I present the results from the PAI?
- What does DASS measure and what does it not measure?
- How would I use the results of the SDQ in further assessment planning?

# Domain 2: Assessment (cont.)

Candidates will also be required to demonstrate general familiarity with the use and purpose of a wider number of tests (detailed below). This will not require the same level of detailed knowledge of administration, scoring and interpretation as that required for the six specific tests detailed above.

Candidates must demonstrate familiarity with the use and purpose of the following tests:

- intelligence scales
  - o WPPSI (Wechsler Preschool and Primary Scale of Intelligence)
  - Stanford Binet (Stanford–Binet Intelligence Scales)
  - WASI Wechsler Abbreviated Scale of Intelligence
  - Woodcock-Johnson Test of Cognitive Abilities
  - Raven's Standard Progressive Matrices
- adaptive and educational assessments
  - WIAT (Wechsler Individual Achievement Test)
  - o ABAS (Adaptive Behavior Assessment System)
- memory
  - o WMS (Wechsler Memory Scale)
  - WRAML (Wide Range Assessment of Memory and Learning)
- vocational
  - SDS (Self Directed Search)
  - Strong (Strong Interest Inventory)
- personality
  - o 16PF (Sixteen Personality Factor Questionnaire)
  - NEO (NEO Personality Inventory)
- clinical and mental health tests
  - BDI (Beck Depression Inventory)
  - GAF (Global Assessment of Functioning)
  - STAI (State Trait Anxiety Inventory)
  - o WHO-DAS (World Health Organisation Disability Assessment Scale)
  - o WHO-QOL (World Health Organisation Quality of Life Scale)
  - ORS (Outcome Rating Scale)
  - o MMPI (Minnesota Multiphasic Personality Inventory)
  - o PHQ-9 (Patient Health Questionnaire 9 Item)
  - CBCL (Achenbach Child Behaviour Checklist and Teacher/Youth reports -ASEBA)
  - Structured Clinical Interview for DSM (SCID)
- 4. Knowledge and application of interview assessments
  - a systematic history-taking approach

- the Mental Status Examination
- risk assessment of suicide, self-harm and harm to others (acute and chronic)
- diagnostic classification systems (including current versions of DSM and ICD)
- setting and monitoring goals measures (including goal attainment scaling)

# Study guide to this section

This section of the examination assesses your knowledge and proficiency in the use of a wide variety of psychological tests covering individual differences in abilities, personality, interests, and psychopathology.

Psychologists working in practice use this information to solve the following kinds of problems:

- identifying underlying reasons for various learning and adjustment problems
- determining the extent and severity of cognitive difficulties experienced by a client
- assessing the suitability of different careers for a client, and
- compiling a client profile that contains information on personality, abilities, and interests.

- When would I use this test?
- What are the domains of a mental state examination (MSE) and when should an MSE be used?
- What information will the test provide in answering the referral question?
- What kinds of tests are useful for assessing a client's vocational strengths?
- How should a client be assessed for risk of self-harm or suicide?

# Domain 2: Assessment (cont.)

- 5. Knowledge of the DSM definitions, diagnostic criteria and essential features of all mental disorders to make a diagnosis. Understanding the limitations of diagnostic systems and issues of differential diagnosis and alternative models of psychopathology. Specific detailed knowledge of the following common psychological problems:
  - · adjustment disorders
  - antisocial personality disorder
  - attention deficit/hyperactivity disorder
  - autism spectrum disorders
  - bipolar disorders
  - borderline personality disorder
  - conduct disorder
  - feeding and eating disorders
  - generalised anxiety disorder
  - neurocognitive disorders
  - major depression
  - obsessive-compulsive disorder
  - oppositional defiant disorder
  - panic disorder
  - post-traumatic stress disorder
  - schizophrenia
  - separation anxiety disorder
  - social anxiety disorder
  - somatic symptom disorder, and
  - substance use/substance-induced disorders.

## Study guide to this section

This section of the examination is designed to test the application of your knowledge of critical diagnostic criteria to the person's presentation as described in the case study.

Each case study will contain key critical features sufficient to identify one diagnosis from the DSM list described in the curriculum. Given the dimensional nature of psychological conditions, a number of features of the described presentation may be a partial but not a complete fit to another diagnostic condition. You will therefore be expected to be able to exclude other possible diagnoses that share some but not all of the critical diagnostic features.

The relevant guides and documents in the reading list provide information fundamental to diagnosis of DSM conditions described in the curriculum. The documents also provide information to enable you to differentiate each of the conditions from those that may share some but not all of the critical features.

In a real-life situation the psychologist will use all available information to begin the process of developing a provisional diagnosis. Both the information relevant to the diagnosis and information enabling

differentiation from other conditions is crucial when considering a client's presentation. As more information becomes available the diagnosis may be further refined.

In the examination, however, the case study will contain only information sufficient to enable you to identify the diagnosis that best fits the presentation based on your knowledge of the DSM diagnostic system. Other questions may draw upon your understanding of diagnosis to inform decisions around formulation and treatment planning. The questions illustrate the kind of background knowledge you will need in order to make the correct diagnostic and treatment decisions.

- What are the core features of post-traumatic stress disorder?
- What distinguishes major depressive disorder from adjustment disorder?
- When would I diagnose panic disorder and not social anxiety?
- What distinguishes borderline personality disorder from bipolar disorder?
- What are the criteria that would lead you to diagnose a client with substance-use dependence?

## **Domain 3: Interventions**

This domain focuses on the provision of psychological services. Candidates must demonstrate: (a) the ability to link the diagnosis, formulation and the intervention chosen, and (b) an understanding of how to develop or plan evidence-based preventative, developmental, remedial interventions or other services. In considering the implementation of interventions, the candidate must also demonstrate (c) knowledge of how to evaluate the impact of professional services. This includes ongoing monitoring, evaluation and review of the effectiveness of the intervention. More specifically, it includes measuring change in behavioural, cognitive and emotional functioning and modifying the problem formulation, hypotheses and initial intervention accordingly.

Candidates must demonstrate knowledge of different modes of treatment, including individual, couple, family, group, organisational, or community interventions. Candidates must demonstrate the application of interventions across a broad spectrum of functioning, from mental health problems through to interventions focused on positive wellbeing and organisational effectiveness. The candidate must demonstrate awareness of different contexts of interventions, including in coaching, career development and health promotion, and rehabilitation and recovery.

While candidates are not expected to have detailed medical knowledge of pharmacodynamics or pharmacokinetics, candidates are required to have sufficient knowledge of the major classes of legal scheduled pharmaceuticals that are commonly used to treat mental health disorders. Candidates must demonstrate knowledge in the uses, common side effects, and common interactions of these major classes of drugs, along with their proprietary names. Candidates should know the type and purpose of the drugs that their clients, across the age range, are using or have been prescribed, and understand the likely role and impact of those drugs on presentation and treatment of psychological problems and disorders.

Candidates should know when, why, and how to refer a client for a medication review. In addition, candidates should be aware of common illicit drugs (such as marijuana, heroin, cocaine, and methamphetamine) in relation to their relevant DSM-5 diagnoses of substance-related and addictive disorders. In particular, candidates should have a working knowledge of the effects of alcohol, tobacco, inhalants, opioids and other substances including the signs of intoxication and withdrawal. Finally, candidates should be aware of the common interactions between legal and illicit drugs and scheduled pharmaceuticals commonly used to treat mental health disorders (such as opioids, alcohol and benzodiazepines, St. John's Wort and SSRI's)

#### Examination candidates will demonstrate:

- 1. Knowledge of evidence-based counselling skills and their application in service delivery, including:
  - cultural responsiveness in providing interventions to diverse groups
  - establishing therapeutic relationships and therapeutic alliance
  - listening skills

- responding skills including supportive and expressive techniques, empathic responding, reflection, questioning (including Socratic questioning), summarising skills
- · problem resolution and change-based strategies
- monitoring progress (using quantitative and qualitative approaches)
- managing endings of therapeutic relationships.
- 2. Knowledge of evidence-based interventions, and their application, including:
  - contemporary theories and models of treatment
    - o cognitive and behavioural
    - o psychodynamic and interpersonal
    - o family systems
    - humanistic, narrative and solution-focused.
  - knowledge of psychopharmacology, drug classification, pharmacokinetics and pharmacodynamics.
  - knowledge of the application of specific focused therapy techniques for the common psychological problems listed in the assessment section. Specific knowledge is required of the following areas:
    - o psycho-education
    - interpersonal and psychodynamic approaches
    - o solution-focused techniques and motivational interviewing
    - narrative therapy (including as applied for clients of Aboriginal and Torres Strait Islander descent)
    - cognitive-behavioural approaches including behaviour modification, exposure (in-vivo and imaginal techniques), behavioural activation (activity scheduling), cognitive interventions, acceptance strategies, self-management, relapse prevention, progressive muscle relaxation, breathing retraining, and
    - o skills training (problem solving, anger management, social skills, assertiveness, stress management, mindfulness, parenting).

## Study guide to this section

This section of the examination assesses your ability to draw upon your professional knowledge of contemporary theories and models of psychological interventions and, importantly, the application of this knowledge to more common presenting issues. The examination requires you to demonstrate the application of practical skills in the provision of psychological services in a range of settings, including individual, couple, family, group, and organisational settings.

The examination comprises case studies to assess your capacity to engage in clinical reasoning and reflection, directed at assessing the application of knowledge and skills to presenting issues. The expected knowledge base is broad, covering a range of therapeutic modalities as applied to different client groups. An understanding of the major medications used in the treatment of psychological problems

is required in order to be able to effectively formulate and monitor a client's presentation and the contribution of medication in facilitating change.

The emphasis of this section is upon the application of knowledge linking assessment, formulation, and intervention. It is expected that you can demonstrate the ability to formulate a client's presentation and select the appropriate treatment modality including treatment goal prioritisation, selection of techniques, and effectively implement an intervention. You are also expected to have a working knowledge of evaluating, monitoring, and reviewing the effectiveness of your interventions.

- Why would I choose a particular treatment approach for a client?
- How do I provide information about the recommended treatment to enhance the client's motivation to engage in treatment and how do I gain informed consent?
- What should the sequence of treatment steps be to facilitate change?
- What should I do if a client is not making treatment gains as expected?
- What should I do if a client has a change in medication and is reporting possible side effects?

## Domain 3: Interventions (cont.)

3. Evidence-based practice, including understanding of how to use research to inform delivery of assessment and interventions, generating evidence to evaluate practices, and understanding any limitations of evidence to inform practice.

# Study guide to this section

This section of the examination assesses your ability to understand and apply the principles of evidence-based practice. In the examination you will be given case studies that allow you to use your knowledge and experience of evaluating interventions to determine how to provide clients with the most effective treatment, taking into account their individual characteristics. Familiarity with the key principles in this section will help psychologists by ensuring that clients receive effective care that is tailored to their individual needs.

- How do I decide which intervention to use?
- How do I monitor progress towards meeting the client's goals for treatment?
- What are the factors underpinning effective implementation of a particular treatment strategy?
- How can I use single case study designs to monitor behavioural observations over time?
- How do I identify research relevant to my client's presentation?

## **Domain 4: Communication**

This domain focuses on communicating with clients, other professionals, organisations or the wider community. Candidates are expected to be aware of the types and appropriate methods of professional communication. Candidates are expected to demonstrate an awareness of the importance of clarity, accuracy, relevance, coherence, organisation and succinctness in communication. An important component of good communication is sensitivity to working with people from diverse groups.

# Examination candidates will demonstrate:

- 1. Knowledge of record keeping procedures that meet professional, organisational, ethical and legislative requirements
- 2. Knowledge of appropriate report writing techniques across different contexts (e.g. reports for audiences including health professionals, legal professionals, public servants, employees of insurance companies, and work-related or organisational reports to employers)
- Knowledge of referral procedures, including the roles of other professionals at all levels of care, and health care system procedures and structures
- 4. Knowledge of methods to communicate to, and liaise with, professional groups (e.g. oral case review, conference presentations, writing for publication)
- 5. Capacity to identify appropriate courses of action in response to unpredictable and complex events, including communication and consultation strategies
- 6. Skills in professional communication and ensuring appropriate working relationships with clients, professional colleagues and relevant others, including online and internet-based modalities
- 7. Knowledge of and sensitivity to communication issues relevant to:
  - culture, including cultural responsiveness when working with Aboriginal and Torres Strait Islander peoples
  - religious, social, ethnic, historical and political backgrounds and contexts
  - gender and sexuality issues
  - cognitive ability and sensory acuity
  - linguistic abilities and preferred modes of communication
  - · service needs of different age groups
  - service needs of vulnerable groups in society, and
  - preferences of clients, their carers, partners and families where appropriate.

# Study guide to this section

This section of the examination assesses your ability to communicate effectively with clients and other professionals in common situations psychologists encounter in professional practice.

In your practice you might use this information to solve the following kinds of problems:

- realising that a client needs a practitioner with more specialised experience
- communicating effectively with adolescents who have been told to go to counselling, and
- recommencing work with a client who is re-referred after several years.

Your knowledge of professional communication should include the following key points and the ability to competently apply the knowledge in practice:

- principles for ensuring clarity and appropriateness of case notes
- safe storage of client information
- understanding why it is important to maintain a professional manner in communications
- (including understanding the outcomes of not communicating effectively)
- the interpersonal skills and cultural responsiveness necessary to ensure respectful communication with and about clients from diverse groups, and
- development of appropriate relationships with clients and other professionals.

- How do I explain my work clearly and simply to prospective clients?
- How do I write reports for different purposes and audiences?
- What do I need to bear in mind to present my work effectively to my colleagues or to the public?
- What information should I pass on about my clients when referring them to other services?
- How do I adjust my language and communication style when communicating with people with different backgrounds?