

25 January 2012

Dear Professor Grenyer

Thankyou for the opportunity to comment on the Board's Guideline for Supervisors and Supervisor Training Providers. I am writing as a clinical neuropsychologist who has been interested in supervisor training since 2006. I have provided 3 workshops on supervision and supervisor training to my colleagues since 2006, with a workshop at both the 2010 and 2012 College of Clinical Neuropsychology (CCN) conferences. The CCN has written a response to this guideline, which is to be appended to the APS response. I will endeavour to summarise the concerns and suggestions outlined in that response in this brief submission.

1. Neuropsychologists are concerned, that any proposed supervisor training should be appropriate and effective in content, and readily accessible to individual practitioners in terms of time and cost.
2. Neuropsychologists are concerned that the Board's Guideline may result in supervisor training becoming the province of profit-driven training consortiums, when there is an opportunity for supervisor training to be provided by low-cost public-interest groups who follow a board-approved training syllabus. That is, 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, when, given its mandate to protect the public, we would argue that 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.
3. 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.
4. Neuropsychology supervisors are predominantly employed in the public health sector, where there are no financial rewards for providing supervision to postgraduate students on placement, new graduates (registrars), or junior staff working in their organisations. The prospect of an expensive two-day training program is a significant deterrent to neuropsychologists continuing to provide supervision, as it is highly unlikely that employers will pay for such training, or provide additional professional development leave for neuropsychologists to undertake this training. It is also unlikely that universities would be willing to pay for expensive training (e.g. the Queensland STAP program) for neuropsychology supervisors who work in the public health system.
5. If there is a drop in the existing number of suitable neuropsychology supervisors as a result of an expensive and time-consuming supervisor training program, this will be a significant threat to the continuation of our area of specialist psychological practice.
6. Reductions in the existing neuropsychology workforce will have significant negative consequences for the public, who rely on us for early detection and diagnosis of neurodegenerative and other conditions affecting the brain. Neuropsychological assessment is recognised by many medical specialists as being integral to good diagnostic and care planning, as well as in treatment of neurocognitive and behavioural conditions.

7. 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.
8. The deadline of June 2013 for supervisors to have completed one of the three existing training programs (provided in Tasmania, NSW, or Queensland), or the as-yet undecided Board's program, is seen as too soon for the bulk of neuropsychologists who have not had the opportunity to undertake such training
9. recognition of prior training and experience in supervision should be considered by the Board in assessing suitability for registration of supervisors.

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. 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 registration status.

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 that much of the content of the 2 day workshop offered in NSW and Tasmania 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 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

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