



# Contemporary issues in psychology practice

Psychology Board of Australia Sydney Forum

29 September 2016

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1. Current issues in psychology regulation and workforce reform, including specialist title and expanding scopes of practice, reform of training models and international benchmarks.
2. Social media and online communication with clients, including issues in e-therapy; Advertising your practice and how to represent your title, qualifications and services to others.
3. The complexity of private practice including pitfalls in entering into contracts with others, issues in billing and communication, principles of confidentiality when balancing duty to employers, employees and the psycho-legal context.
4. Reconciliation action plan for Aboriginal and Torres Strait Islander health, cultural competencies and curriculum developments in psychology.



# Reconciliation Action Plan for the National Registration and Accreditation Scheme

Marion Hale

Community Member Psychology Board of Australia

# The Reconciliation Action Plan

## What is a Reconciliation Action Plan?

- A Reconciliation Action Plan (RAP) is a business plan built by an organisation outlining how it will contribute to reconciliation in Australia.
- A RAP provides a framework with:
  - clear actions
  - responsibilities
  - timelines, and
  - deliverables
- RAPs put good intentions into real actions by helping organisations to document what they will do and by tracking their achievements and contribution towards reconciliation in Australia.
- We've chosen to utilise the resources developed by Reconciliation Australia.

# Why Reconciliation Australia?

- [Reconciliation Australia](#) works with organisations to build and review RAPs. Once an organisation has successfully built a RAP, Reconciliation Australia will endorse it. Their endorsement is nationally recognised as best practice.
- Reconciliation Australia provides advice, templates, [resources](#) as well as feedback on draft RAPs.

## Types of RAPs

- There are four different types of RAPs, they are:
  - Reflect
  - Innovate
  - Stretch
  - Elevate
- The first step in drafting a RAP is deciding which type of RAP best reflects where your organisation is at in relation to reconciliation. The National Scheme's first RAP will be Reflect.

# Why Reflect?

- The Reflect RAP is for organisations starting their reconciliation journey and provides a basis to raise awareness and build the foundations for future commitments. In the Reflect RAP's building process there is time to assess what has been done well and where there are gaps.

# Why are we developing a RAP for the National Scheme?

- The National Scheme, through the regulation of health practitioners, has a unique opportunity to contribute to closing the gap, particularly as it relates to health care.
- The creation and use of a National Scheme RAP will seek involvement from all parts of the Scheme, both internal and external stakeholders.
- Achieving the goals of a RAP is best practice for any organisation, and we now have the momentum and fundamentals to be able to set these important goals.
- The RAP also responds to the decision from ministers (as outline in the NRAS Review), to ensure that Aboriginal and Torres Strait Islander health and cultural issues are addressed in the National Scheme.

# Why Now?

- 1 July 2016 marked the sixth birthday of AHPRA and the National Boards. As we mature, there is an opportunity to reflect on what we've achieved so far and how we can continue to support the National Scheme to meet the health needs of all Australians, now and in the future.



# National Scheme Strategy 2015-2020

The RAP will link with the [National Scheme's strategy 2015-20](#).

The key strategic objectives the RAP will meet are:

- fostering a unified culture
- increasing knowledge of external environment
- increasing strategic partner confidence
- improving customer experience, and
- improving quality of service.

# What do we have so far?

So far we have:

- a RAP ‘champion’: Martin Fletcher, AHPRA CEO
- a commitment to create a useful, scheme-specific RAP
- started the discussion about what could usefully be included in a RAP
- developed an understanding of the need to fit a RAP into existing framework, particularly the National Scheme’s strategic plan and framework

# What are doing well?

- Underpinning our past, present and future is the strong commitment of all members of the scheme to our purpose: *protecting the public*, and a desire to use our skills, expertise and abilities to achieve it. This is a real strength of the National Scheme. It is the foundation of all that has been achieved to date and is a vital part of how we respond to the opportunities and challenges that lie ahead.
- We have built strong foundations. Now it's time for the next stage: stretching and developing the National Scheme.

# What can we improve on?

- We do not have clear structures that specifically address ways to 'close the gap' between Indigenous and non-Indigenous Australians.
- We do not have protocols that celebrate and respect Australia's Indigenous culture for both Indigenous and non-Indigenous people (e.g. internally: appropriately included acknowledgments of country, human resource policies, cultural awareness training).

# Who are the key stakeholders?

- Agency Management Committee
- AHPRA
- National Boards
- National Boards committees - e.g. registration and notification committees
- Aboriginal and Torres Strait Islander Health Practitioners
- Professions Reference Group
- Community Reference Group
- Accreditation Liaison Group
- Accreditation Unit
- Accreditation authorities, across all professions
- Reconciliation Australia
- Aboriginal and Torres Strait Islander peoples and practitioners

# Next steps

## Creating a working group

- The working group will communicate recommended actions and aspirations to the National Boards and AHPRA, and act as the main advocates and spokespeople during the development of a RAP.
- A nomination process will be conducted, seeking representation from across the scheme.

## Drafting the Reflect RAP

- A template for the Reflect RAP is available on the [Reconciliation Australia](#) website. Populating this and consulting broadly with the key stakeholders will be the next step as we work towards endorsement by Reconciliation Australia.

# Contemporary issues in psychology practice

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# Specialist title and scopes of practice

- NRAS is designed for:
  - Public protection
  - Workforce development
- Specialist title: are there areas of psychology practice that are particularly dangerous that need additional regulation?
- Scopes of practice: Are psychologists working to their full scope and would the public benefit from expanding scopes e.g. prescribing?



# Reform of training model and international benchmarks

- Board's General Registration Standard to be reviewed within next 3 years ...
- 4+2 is below international standards
- 4+2 burden for the Board:
  - Board oversees this program – but is not an education provider
  - Individualised programs – every one is different
  - Marking case studies
  - Approval processes are complex
  - High cost to all registrants in administering such a large and complex program across Australia

- 4+2 Burden for supervisors, interns and employers:
  - Employers and supervisors are the educators
  - Significant commitment from supervisors
  - Burden of paperwork and administration of requirements
  - Risks to the public - foundation competencies of 4+2
- Other issues for the 4+2
  - No other country puts this burden of training on employers
  - International benchmarks and mutual recognition constrained
  - Challenges for universities to create more professional places

# Growth of 2.6% a year or 13% over 5 years

## Number of psychologists

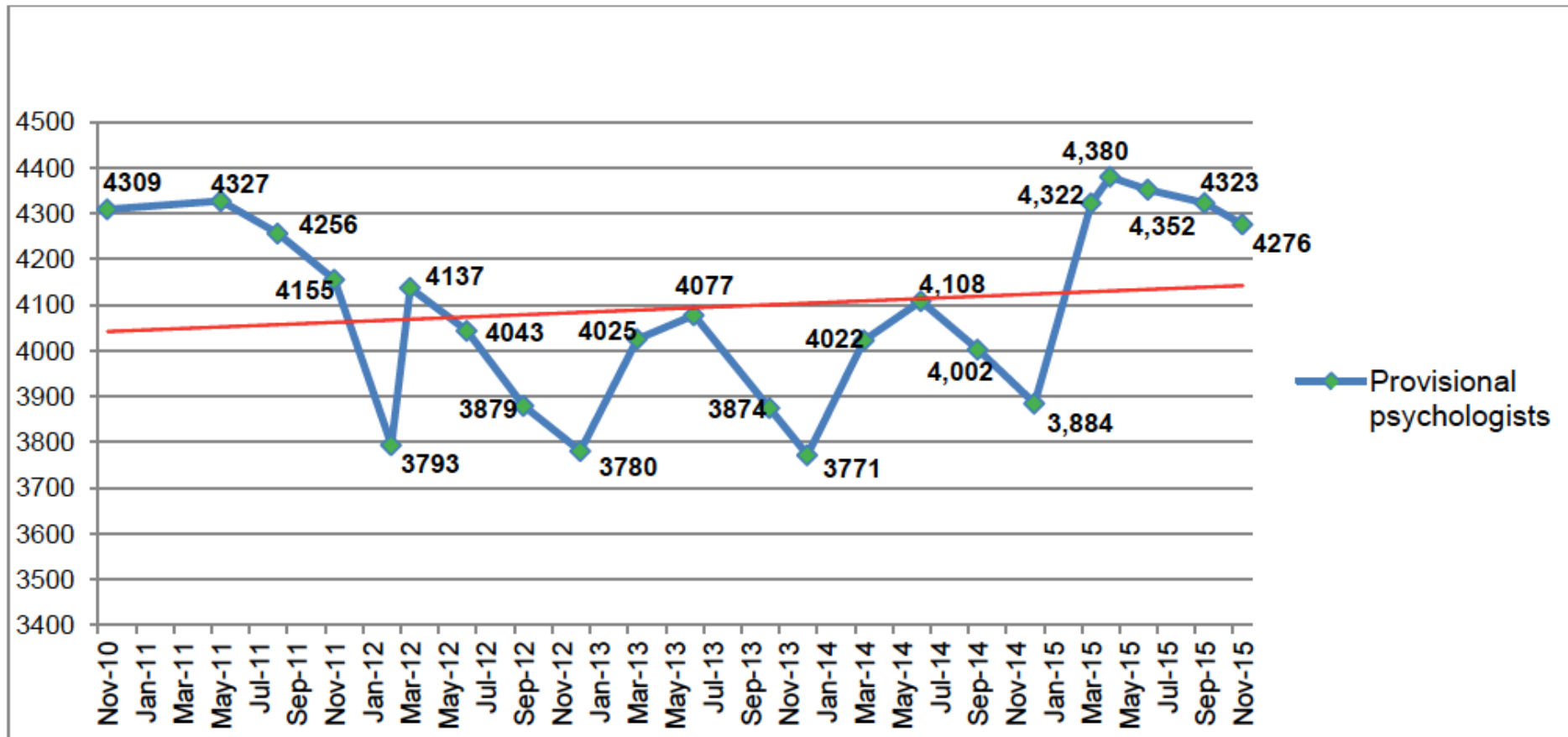
2010	28,881
2011	29,055
2012	29,984
2013	30,420
2014	31,982
2015	32,957

Australian population growth = 1.4%

Number of GPs 34,743; Psychiatrists 3,468

# Growth

Figure 1: Provisionally registered psychologists, November 2010 – November 2015



**Table 2: Provisional psychologist training pathways<sup>1</sup>**

Pathway	Principal Place of Practice									Subtotal	Total
	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	N/A <sup>2</sup>		
4+2 internship	27	650	20	206	25	12	87	180	0		1207
5+1 internship	2	180	0	105	0	6	106	33	0		432
Higher degree	75	374	10	515	162	51	1095	310	3	2594	2684
Higher degree plus work in addition to placements	0	0	0	39	3	0	29	19	0	90	
Transitional program	1	4	0	3	0	0	6	4	1		20
Other supervised practice program <sup>3</sup>	0	20	0	14	1	0	1	1	0		37
No pathway											
<b>TOTAL</b>	105	1228	30	882	191	69	1324	547	4		4380

<sup>1</sup> numbers based on AHPRA state office data and other estimates

Source: AHPRA

<sup>2</sup> overseas or not recorded

<sup>3</sup> e.g. re-entry program that is not a 4+2 internship

## What Education and Training Reform proposes ...

1. Masters of accredited professional training to become the minimum standard i.e. 5+1
2. Selection into Masters based on academic aptitude and suitability at structured personal selection interviews
3. Independent research thesis in any scientific area of psychology – usually in 4<sup>th</sup> year
4. General Registration a pre-requisite for entry to AoPE. Anyone with General Registration eligible to apply for AoPE training
5. AoPE includes a one-year specialist coursework plus registrar training
6. Current 6 year AoPE Masters must sequence generalist and specialist competencies

4th International Congress  
on Licensure, Certification and Credentialing of Psychologists



# Developing a framework for international psychology standards

Friday July 2nd to Sunday July 4th  
Sydney, Australia 2010

Sydney 2010 –  
developing a  
“2030 vision”

# Development of international competencies

- **Sydney (July 2010)**
- **Stockholm (July 2013)**
- **Paris (July 2014)**
- **Milan (July 2015)**
- **Yokahama (July 2016)**

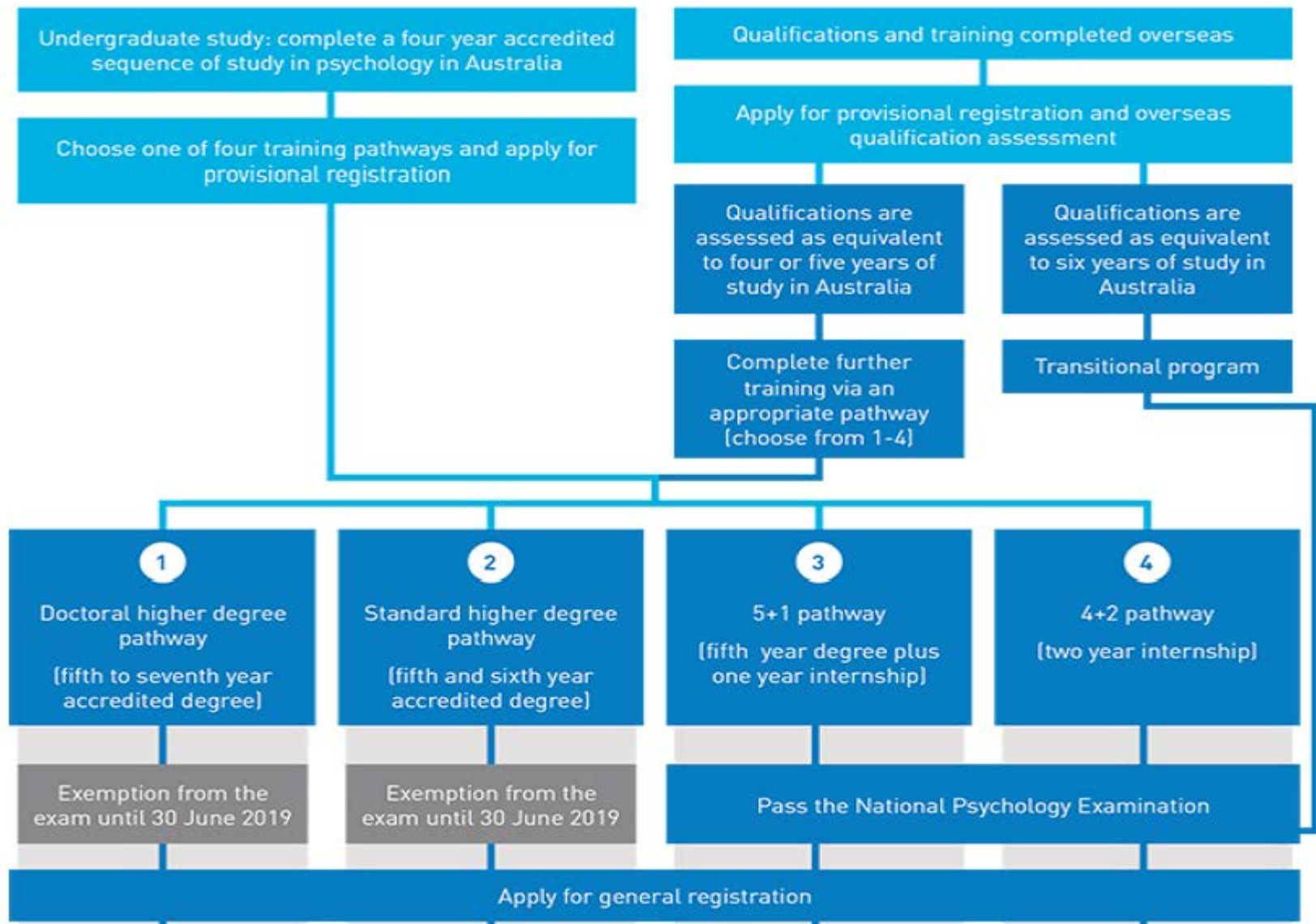




# Education and training reform - a priority for the Board

- The Board considers education and training reform an important next step in the development of the regulatory environment for the psychology profession.
- The education and training reform initiative is a current Board priority.
- Ministers have approved the Board's revised general registration standard which came into effect in May this year.
- The standard maintains the current pathways to registration – the status quo remains.
- However, Ministers have **asked the Board to work over the next three years on options for further reform** of these pathways.

# Training pathways to general registration



# Starting point for reform agenda - National psychology education forum

- The starting point for the reform agenda was the national psychology education forum hosted by the APS, APAC HODSPA and the Board.
- The Collaborative Working Party agreed to undertake further work in a number of areas in response to feedback from participants at the December 2015 National Forum.
- This commitment to further work will help the Board build a clear picture of the implications and ensure these can be reconciled with the objectives of the National Law.

# National Forum... to recap the issues.

- 4+2 is below international standards
- 4+2 burden for the Board:
  - Board oversees this program – but is not an education provider
  - Individualised programs – every one is different
  - Marking case studies
  - Approval processes are complex
  - High cost to all registrants in administering such a large and complex program across Australia

- 4+2 Burden for supervisors, interns and employers:  
Employers and supervisors are the educators
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# National Forum recommendation

...the current 4+2 program be recommended for retirement as a pathway to registration.

# Data on current situation

## Registration Type

Table 1.1 Registration type by principal place of practice

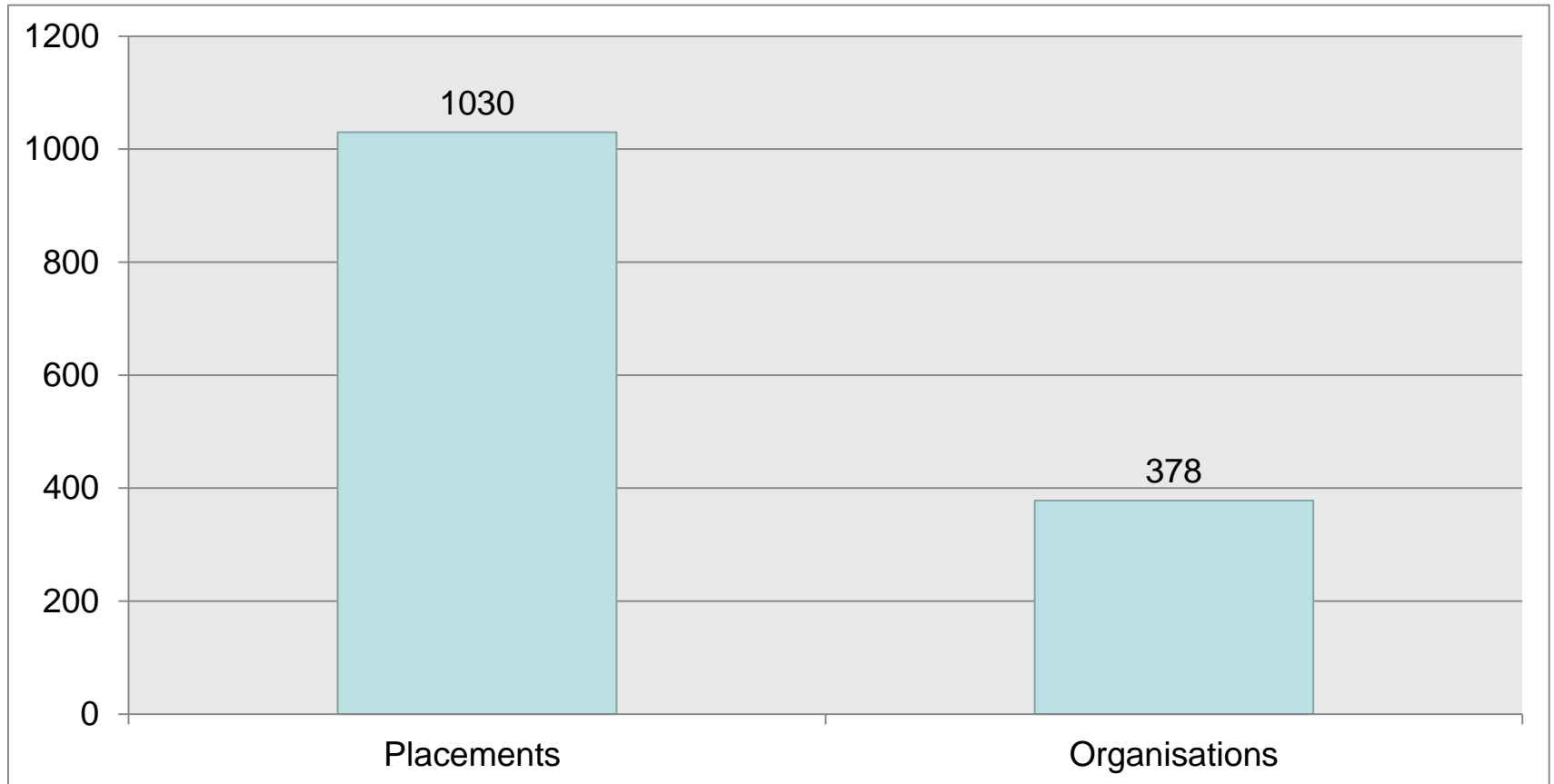
Registration Type	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	No PPP	Total
General	729	9,096	199	4,740	1,384	493	7,442	2,803	362	<b>27,248</b>
Provisional	100	1,334	29	950	190	63	1,310	584	12	<b>4,572</b>
Non-practising	38	565	2	273	89	19	339	174	157	<b>1,656</b>
<b>Total</b>	<b>867</b>	<b>10,995</b>	<b>230</b>	<b>5,963</b>	<b>1,663</b>	<b>575</b>	<b>9,091</b>	<b>3,561</b>	<b>531</b>	<b>33,476</b>

# A review of the 4+2 program...

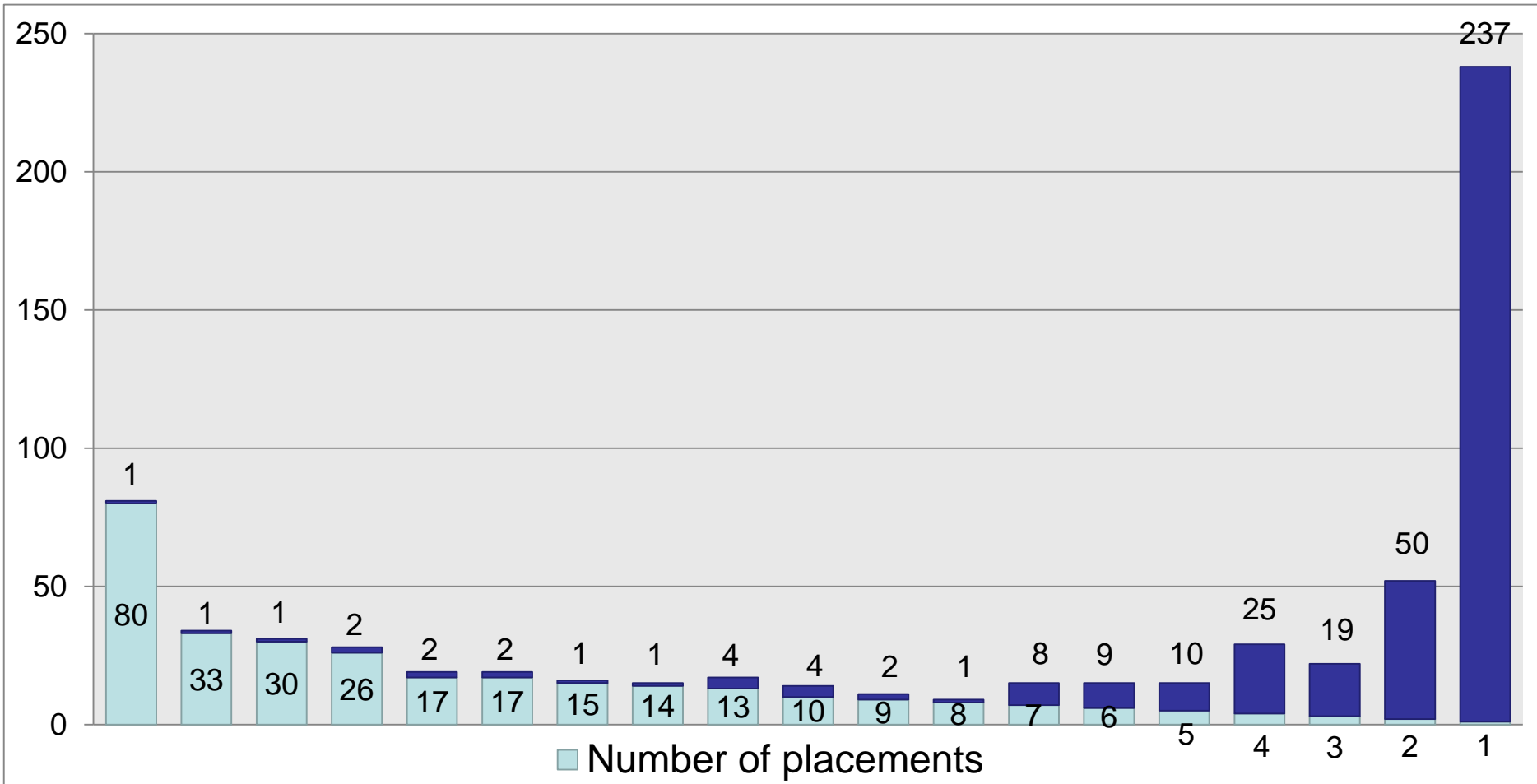
- Across Australia, the 4+2 internship pathway accounts for 27% of provisional psychologists in training.
- The 4+2 internship pathway remains very popular in NSW, accounting for 50% of all provisional psychologists in this pathway.
- Almost twice as many provisional psychologists are undertaking the 4+2 internship as are undertaking higher degrees in NSW.
- The following analysis showcases data collected by the AHPRA NSW office over the past 5 years. Please note the data collected is used to manage the program and is limited in its use.



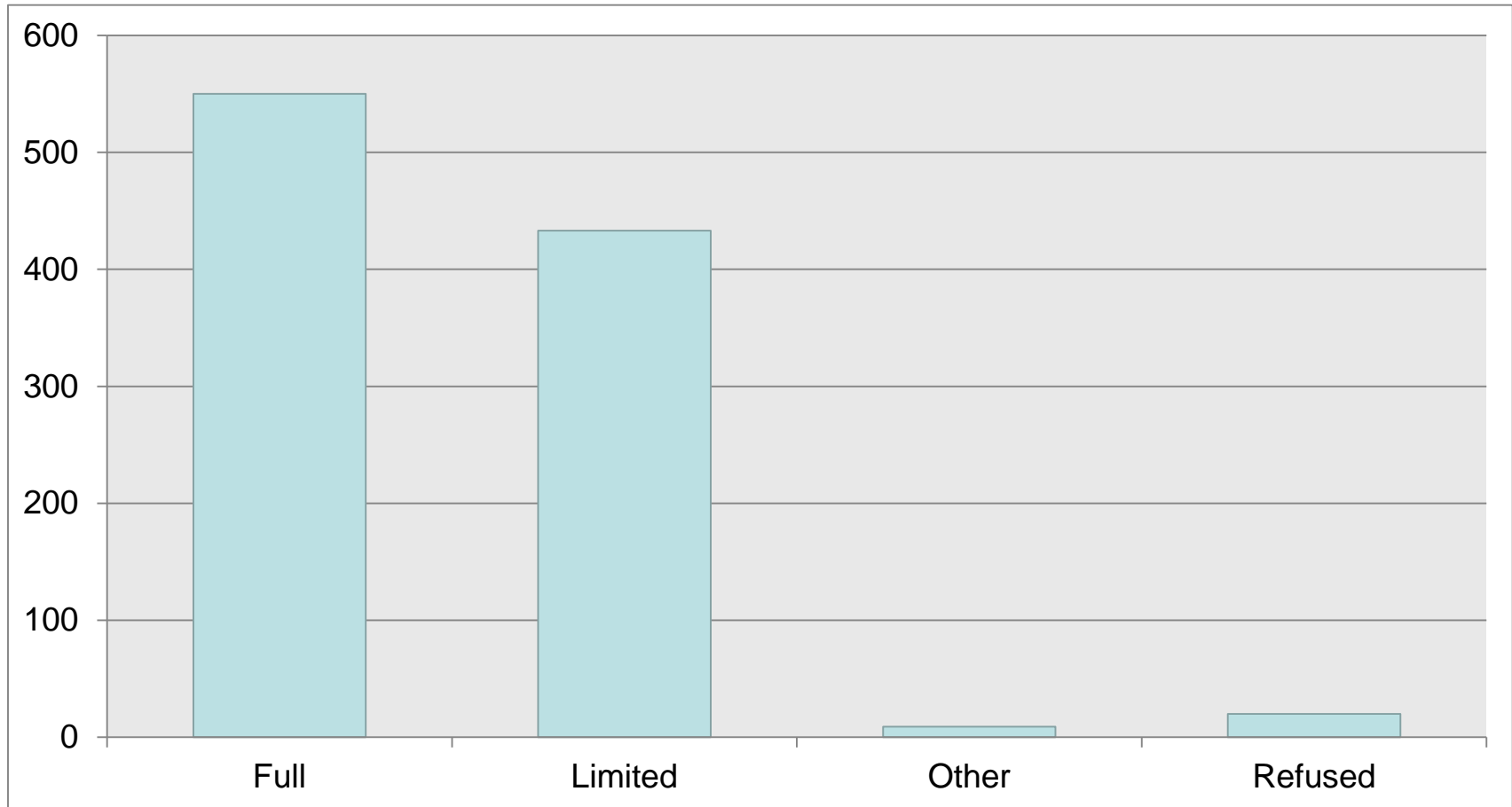
# 1030 placements: 378 organisations



# 1/2 of the placements offered by 12% of organisations



# Half of all placements are full placements



# Job position

- Majority of work roles approved refer to the position title as provisional psychologists, intern psychologist or psychologist in training
- Other themes across work roles are:
  - Generic mental health roles like mental health worker, clinician or practitioner, community mental health or health services.
  - Return to work roles such as rehabilitation consultant or counsellor and employment consultant
  - Specialised roles such as school counsellor, alcohol and drugs officers, Sexual assault counsellor
  - Community and outreach focused roles such as community support worker, youth support/access worker, disability services, family services.

# Public sector

- 164 placements approved in a public sector setting
  - 2011 – 28
  - 2012 – 62
  - 2013 – 0
  - 2014 – 25
  - 2015/16 – 46 (1 NSW health and 4 ADHC)
- Workplaces include – Mostly state government departments and/or agencies but also some commonwealth agencies
- Full placements v limited placements
- Public sector stakeholders to engage - Ageing, Disability and Home Care, NSW Health and Department of Education

## Department of Education - role of the school counsellor

- 80 placements approved with the NSW Department of Education
- 50 were approved from April to August 2012
  - 31 full placements approved due to undertaking from Department
  - 19 were limited placements due to lack of adult client group and no undertaking provided.
- 30 were approved in 2015 and early 2016
  - 16 full placements approved due to undertaking from Department
  - 14 limited placements (2310) due to lack of adult client group and no undertaking provided.
- Specific reasons...

# Growth in 5+1 programs

- Currently 10 programs taking 250 students a year
- 3 more programs about to commence
- 10 more programs in preparation
- PsyBA has 1,200 4+2 enter each year

# Contemporary issues in psychology practice

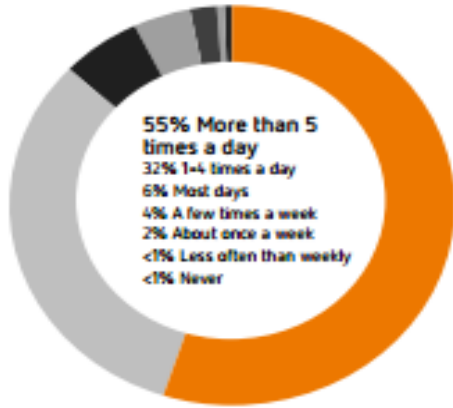
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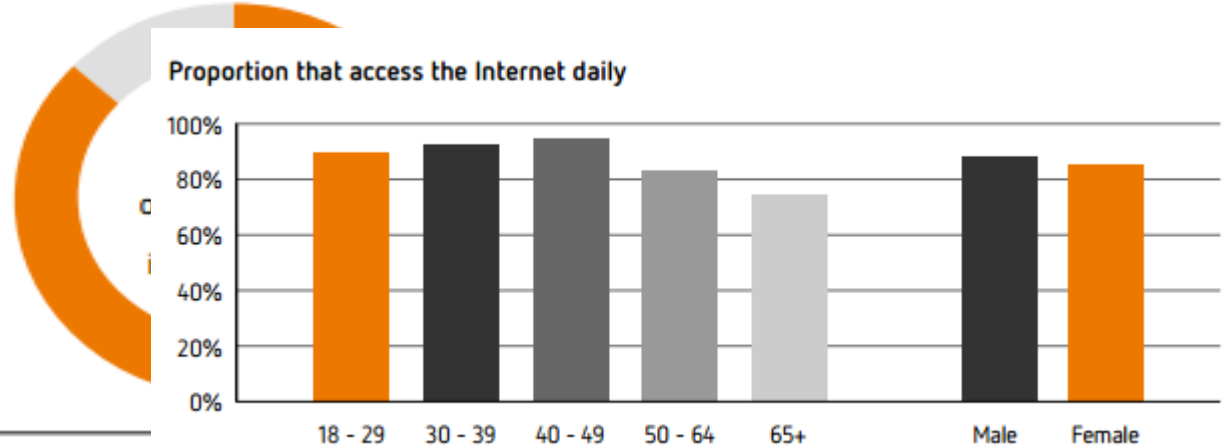
# Social media and psychology practice



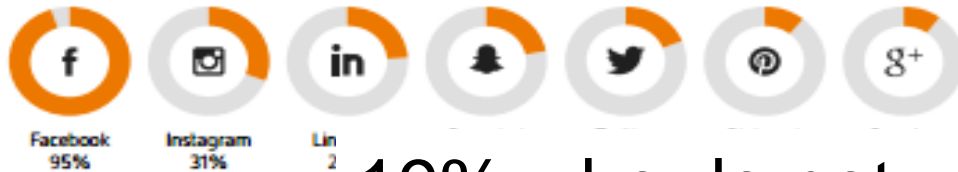
Frequency of internet use



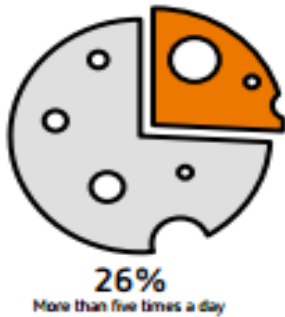
Proportion that access the internet daily



Social networking sites used this year



Frequency of using social netw



19% who do not use social media sited concerns about privacy



Source: Sensis Social Media Report 2016

# Psychology in a digital world

- We are amidst a culture of sharing
- Ethical and legal issues
  - Security and interpretation of information
  - Maintenance of therapeutic boundaries
  - Advertising our practice

# Security of client's and therapist online information

- Australian Privacy Principle 11
  - entity must take such steps as are reasonable in the circumstances to protect the information:
    - from misuse, interference and loss; and
    - from unauthorised access, modification or disclosure
- APS Code of Ethics
  - A3 Informed consent
  - A4 Privacy
  - A5 Confidentiality



# Security of online client information

- What are my policies regarding social media and online communication and how aware are my clients?
- How do I protect all client related information?
- How can I also respect the client's right to privacy outside the therapy session?
  - APS Code Ethics A4 Privacy

# Security of a psychologist's personal information

- What do we want our client's to know about us?
- How do we maintain the boundary between our professional and personal opinions and values?
  - APS Code of Ethics A3 Respect and C Integrity
- Remember the legacy of the digital footprint

# eTherapy

- Online and digital modes of communication and therapies raises challenges in immediacy of access and interpretation of information
  - Refers to both provision of sessions online as well as electronic forms of communication
- How do we consistently meet the needs of all our clients?
  - APS Code of Ethics B3 Professional responsibility

# Provision of psychological care digitally

- Do my clients have a clear understanding of my availability?
- Do my client and I have a shared understanding of the best method to communicate in times of risk or heightened distress?
- Do I have a plan in the situation a client crosses a boundary?
- How can I minimize the risk of misinterpretation when communicating digitally?



# Advertising your practice

- Enable the community to make informed decisions about their healthcare
- The definition of advertising
- Relevant legislation and codes
  - Health Practitioner Regulation National Law Act s133 and s113-119
  - APS Code of Ethics C2 Communication
  - Other Consumer Law legislation



# Good advertising practice

- Honest
- Accurate
- Complete
- In a form the intended audience can understand
  - [www.accc.gov.au/business/professional-services/medical-professionals](http://www.accc.gov.au/business/professional-services/medical-professionals)

# A Psychologist's obligations

- Always holding the client, community, and profession best interests in mind
  - Ensure the boundaries between personal and professional communication can be maintained
  - Establish policies and procedures for communicating digitally
  - Ensure the ongoing security of information sent electronically
  - Advertise your practice to assist with clients making informed decisions about their healthcare

# Be prepared and take care

- Be aware of the relevant legislation, ethical principles, and guidelines
- Remembering information communicated digitally
  - Is open to interpretation
  - Maintains a digital footprint
- If in doubt, consult

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# Issues in practice

- **Agreements with colleagues**
  - Cannot contract out of ethical responsibilities
  
- **Isolation**
  - Sole practitioners
  - Competent communities
  
- **Risk of harm to others**

# Issues in practice

- **Requests from police**

- "NSW Police are framing search warrants ... I am seeking your co-operation to determine the nature of the records held at your practice. These warrants once approved will be executed in the near future. I want to avoid a scenario of police attending places and having to go thru offices unnecessarily. I ask could you please call me on 02 xx or email me as soon as practical"

# Issues in practice

- **EZ and EY [2015] AICmr 23**
  - “Sergeant X asked her whether, in her opinion, Mr Z ‘was psychotic’. ... Dr Y advised Sergeant X that it was possible but further assessment was needed”
  - Privacy Act (1988)
  - Standard A.5.2(c)



# Issues in practice

- **Requests from government departments**
  - A service provider... may comply with a request under subsection (3) despite any law of this State relating to secrecy or confidentiality.
  - If information is disclosed:
    - (a) no civil or criminal liability ...;
    - (b) not a breach of any duty of confidentiality or secrecy imposed by law;
    - (c) not a breach of professional ethics or standards

# Issues in practice

- **Protect yourself by consulting a**
  - Senior colleague
  - Insurer
  - Lawyer

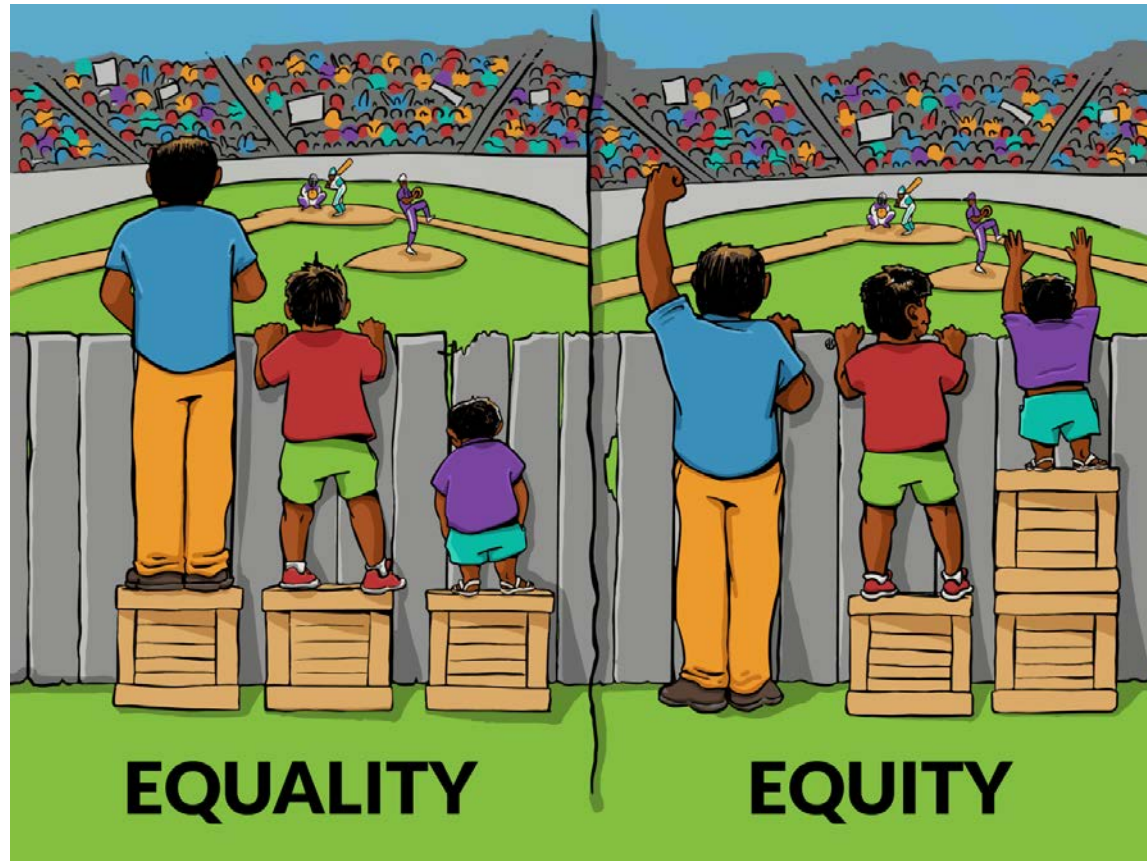
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# Cultural Competency & Curriculum Developments in Psychology.

- There exists a mental health crisis in many ATSI populations. for e.g. suicide rates are twice as high amongst ATSI.
- Strong arguments have been made for “transformational un-learning” to combat racism and disadvantage (Greg Phillips, 2016).
- Professional standards and curriculums must play a role in achieving **equity**.

# Cultural Competency & Curriculum Developments in Psychology.



# Cultural Competency & Curriculum Developments in Psychology.

- The Psychology Board of Australia identifies improving access to psychological services for ATSI people and facilitating their greater participation in the psychology workforce as priority areas.
- Cultural competence in practice and within training curriculums is key.

# Cultural Competence & Curriculum Developments in Psychology (cont'd).

- Applicants for registration as a psychologist must demonstrate competence in:

*Working with people from diverse groups*

- This competency is measured via the National Psychology Exam.



# Cultural Competence & Curriculum Developments in Psychology (cont'd).

**The Australian Indigenous Psychology Education Project (AIPEP)**, funded by the Office of Learning and Teaching, has been established to:

- Increase cultural responsiveness (competence) via curriculum development and
- Increase indigenous participation in psychology education and training.

Major recent project - submission to APAC for new standard.





# Cultural Competency & Curriculum Developments in Psychology (cont'd).

The Australian Indigenous Psychology Education Project, Australian Indigenous Psychology Association and Indigenous Allied Health Association prefer the term “***Cultural Responsiveness***” over Cultural Competence, Safety, Awareness etc.

(AIPEP, AIPA, AIAH Joint Response to the APAC Third Consultation Draft Accreditation Standard for Programs of Study in Psychology, June 2016. August, 2016)

# Cultural Competence & Curriculum Developments in Psychology (cont'd).

## **What is Cultural Responsiveness?**

- Holding culture as central to ATSI health & wellbeing.
- Involving ongoing reflective practice & lifelong learning.
- Relationship focused.
- Person and community centered.

# Cultural Competence & Curriculum Developments in Psychology (cont'd).

## What is Cultural Responsiveness?

- Appreciating diversity between persons, families and communities.
- Requiring access to knowledge about ATSI histories, peoples and cultures.

# Cultural Competence & Curriculum Developments in Psychology (cont'd).

6 key capabilities are identified as essential to practicing in a Culturally Responsive manner:

1. Respect for centrality of culture.
2. Self-awareness.
3. Proactivity.
4. Inclusive engagement.
5. Leadership.
6. Responsibility & accountability. (IAHA, 2015).

# Cultural Competence & Curriculum Developments in Psychology (cont'd).

Further information on this important subject can be found at:

<http://www.indigenoupsyched.org.au/>

Ongoing focus on Cultural Responsive in curricular development, and in professional practice is crucial in addressing deficits in psychological service delivery to ATSI people.

# More information...

- Website – [www.psychologyboard.gov.au](http://www.psychologyboard.gov.au)
- Questions and correspondence
  - Chair, Professor Brin Grenyer
  - [psychologychair@ahpra.gov.au](mailto:psychologychair@ahpra.gov.au)
- General enquiries: use email enquiry form on website