



National Psychology Examination curriculum

The purpose of the examination

The National Psychology Examination (the examination) ensures a nationally consistent minimum professional standard for psychology.

The examination forms part of the assessment of eligibility for general registration as a psychologist. Passing the examination is required by the Psychology Board of Australia (the Board) general registration standard for provisional psychologists undertaking the 4+2 and 5+1 pathway to general registration. Sitting and passing the examination may be required for:

- overseas-trained psychologists applying to practise in Australia, and
- individuals who are directed to sit by the Board, or by a panel or tribunal, in relation to an application for registration under Part 7 of the Health Practitioner National Law, as in force in each state and territory (the National Law) or a notification about their health, performance, or conduct under Part 8 of the National Law.

The following curriculum for the examination was approved by the Board at its December 2017 meeting. This curriculum comes into effect on 1 August 2018.

Scope of the curriculum

Overview

This curriculum has been developed to provide guidance to candidates sitting the examination as part of requirements for general registration. The examination assesses applied psychological knowledge, which forms a significant basis of competence in the profession. The examination is designed to test applied knowledge appropriate for the fifth and, in particular, the sixth year of psychology training. The examination helps demonstrate that internship training has produced a practitioner with an appropriate level of applied professional knowledge and competence, which will more effectively protect the public.

The curriculum is not designed to test foundational knowledge of the discipline obtained during the first four years of psychology at university. Rather, it is designed to test the application of this knowledge to practice, and is therefore based on actual case studies and professional issues.

This curriculum does not relate to area of practice endorsements. Area of practice endorsement is an annotation to the Register of psychologists to communicate to the public those psychologists who have additional accredited training and supervised experience in one or more of the endorsed areas of practice. The levels of knowledge of psychologists with an area of practice endorsement would be expected to be at a greater depth in a specific area of practice than that assumed of an entry-level registered psychologist. Similarly, the recommended readings avoided texts that are more appropriate for higher level study in advanced and specialised fields.

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Scope

The *ethics* domain of the examination requires detailed familiarity with legislation determining practice and with the Board-adopted code of ethics, guidelines and policies. The public expects psychologists to be safe and ethical in their work and this competency will be examined in depth.

The *assessment* domain requires the psychologist to have detailed knowledge of six specific tests. The rationale for the choice of the six tests lies in their educational value as good examples of certain types of assessments. The Wechsler adult and child intelligence tests (e.g. WAIS, WISC) are good examples of psychologist-administered assessments with subscales and full scale indices, with reference to normative samples from children through to older adults, and strict administration rules. The PAI is a good example of a self-report assessment with multiple-axis T-scored normative interpretation procedures. The DASS is a good example of a multi-axis self-report norm-referenced scale with criterion scores defining levels of severity. The K-10 is a good example of a simple screening scale for adults, and the SDQ is a good example of a brief behavioural screening questionnaire for children. By specifying these six tests for particular attention, it is not suggested that these are the only tests that form the essential knowledge of psychologists with general registration. Rather, for the purposes of examination, limiting the number of tests on which candidates can expect to be examined in depth helps them to prepare for the examination. Where possible, tests that are widely available, in common use, and with Australian normative data were favoured. It is expected that all candidates preparing for general registration as a psychologist will have obtained training and competence in test administration.

The *assessment* domain requires the psychologist to demonstrate an understanding of the general principles of assessment, including test selection, test usage, and identifying and diagnosing psychological disorders.

The *intervention* domain requires a psychologist to demonstrate specific evidence-based principles and methods for conducting psychological interventions. Candidates must have detailed knowledge of foundational counselling skills and methods of evidence-based psychological interventions and their application across a wide range of applied settings. The curriculum specifies that 'knowledge', 'understanding' and 'application' of interventions are required. Interventions included in the examination are mostly generic skills-based techniques that the Board considers to be foundational across many domains of psychology work and they are prescribed in part to illustrate various issues underpinning good service delivery.

The *communication* domain requires the psychologist to demonstrate skills in record keeping, report writing, clinical handover, referral and communication. Psychologists are expected to demonstrate cultural responsiveness across all four domains.

The Board's *National psychology examination recommended reading list* provides good examples of reading appropriate to the level and depth expected of candidates sitting the examination. The readings have been chosen specifically to provide guidance on the areas to be examined.

Competencies for general registration

The National Psychology Examination is designed to test the following competencies at an entry level appropriate to a psychologist applying to move from provisional to general registration.

The competencies align with the International Declaration of Core Competencies in Professional Psychology (2016).¹ The competencies are also designed to align with the new Australian Psychology Accreditation Council (APAC) standards².

The Board's provisional registration standard defines the core capabilities and attributes of the internship program that must be achieved by the provisional psychologist. The eight core competencies are:

- a) knowledge of the discipline
- b) ethical, legal and professional matters
- c) psychological assessment and measurement
- d) intervention strategies
- e) research and evaluation
- f) communication and interpersonal relationships
- g) working with people from diverse groups, and
- h) practice across the lifespan.

These eight competencies are measured by four examination domains:

- Domain 1 Ethics
- Domain 2 Assessment
- Domain 3 Interventions
- Domain 4 Communication

¹ The Declaration can be downloaded from: http://www.psychologistsboard.org.nz/cms_show_download.php?id=429

² The APAC Standards for psychology programs can be downloaded from: www.psychologycouncil.org.au

The four examination domains

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, and the standards, codes, guidelines and policies of the Board, and
- relevant sections of national, state and territory legislation and principles of best practice relating to:
 - privacy, freedom of information and maintenance of health records
 - antidiscrimination and equal opportunity
 - 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
 - psycho-legal principles (e.g. expert witness code of conduct, guidelines, responding to a subpoena/summons, producing records).

Ethical issues

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

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 counter-transference 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.

Domain 2: Assessment

This domain focuses on skills and knowledge in conducting evidence-based 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. Candidates should focus on understanding the general principles of assessment including: the process of selecting an appropriate test for a designated purpose (test selection), test administration, assessing a test's psychometric properties (reliability and validity) and making valid inferences from the assessment (test interpretation and reporting).

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

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)
- K10 (Kessler Psychological Distress Scale), and
- SDQ (Strengths and Difficulties Questionnaire).

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
 - 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)
 - ABAS (Adaptive Behavior Assessment System)
- memory
 - WMS (Wechsler Memory Scale)
 - WRAML (Wide Range Assessment of Memory and Learning)
- vocational
 - SDS (Self Directed Search)
 - Strong (Strong Interest Inventory)
- personality
 - 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)
 - WHO-DAS (World Health Organisation Disability Assessment Scale)
 - WHO-QOL (World Health Organisation Quality of Life Scale)
 - ORS (Outcome Rating Scale)
 - MMPI (Minnesota Multiphasic Personality Inventory)
 - 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)
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.

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), and
 - managing endings of therapeutic relationships.
2. Knowledge of evidence-based interventions, and their application, including:
 - contemporary theories and models of treatment:
 - cognitive and behavioural
 - psychodynamic and interpersonal
 - family systems, and
 - 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:
 - psycho-education
 - interpersonal and psychodynamic approaches
 - 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
 - skills training (problem-solving, anger management, social skills, assertiveness, stress management, mindfulness, parenting).
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.

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)
3. 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 in 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.