



ACT Psychologists Board

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Attention: Practitioner Regulation Subcommittee

Health Workforce Principal Committee
Australian Health Ministers' Advisory Council

Please find below the ACT Psychologist's Board comments in regards to the Consultation Paper on Specialists. My apologies that we have not met the 13 February deadline but hope that our comments can still be considered in finalising this important area.

The ACT does support the CPRB comments already submitted but provide the following further comment on the consultation paper.

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Specialist endorsement point (g) - my concern here was that if one profession (eg, Medicine) decided to specify the requirement for 100 hours CPD to retain 'specialist competence', all other professions would be required to do the same. However, on further reading, use of the term 'discipline' as opposed to 'profession' appears to negate this concern (ie, all psych specialist disciplines would be required to maintain a consistent approach to CPD, as would all specialist medical disciplines - however, to maintain specialist registration within the medical field might not necessarily require the same CPD requirements as would the specialist psychology disciplines). I would like to see some clarification that this requirement refers to consistency within a profession, not necessarily consistency between / across different professions.

Note that comments included on page 7 of 11 (top of the page, right-side column) appear to contradict this interpretation, when it states the following: "These arrangements should provide boards with the discretion to accept different continuing competence arrangements for different sub-groups within a profession". This requires clarification.

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Specialist endorsement point (i) - the term 'area of need' requires clarification. I originally assumed that it referred to a person who has a particular skill set but does not meet the overall requirements for full registration (eg, someone with clear skills in the area of psychometric assessment, but lacking in the 'counselling' or 'therapeutic' skills required for initial registration). Based on this assumption, this would open the door for someone with qualifications in, say, Social Work, who can demonstrate advanced training in substance dependence counselling, to gain 'Limited Registration - Area of Need' registration with the National Psychologists Board.

This would on the surface appear to be consistent with the recent APS consideration of accreditation of psychology para-professionals, however there would need to be closely regulated to provide quality assurance and protection to the public. There would need to be consideration of supervisory arrangements for any para-professionals as increased supervisory burden to registered psychologists may have workforce implications.

Second point - on page 11 of 11, the underlined section clearly permits 'area of need' to be more loosely interpreted/designated in a more literal sense, as a 'geographic area'. The ACT Board has some concern about these provisions and believes that the ultimate decision about registration should remain with the National Board and not be open to ministerial intervention. The proposal requires further consideration and clarification, including a definition of what constitutes an 'area of need'.

What is the difference between 'Limited Registration - Public Interest' and 'Limited Registration - Area of Need' categories? Are both categories required? This also requires clarification.

Pages 10 and 11 of 11 (particularly 'limited' registration and 'specialist practice' provisions)

Will the legislation include a grandfather clause, under which psychologists already registered under current 'general registration' requirements are able to maintain their general registration without demonstrating competencies deemed necessary for General Registration under the new national scheme?

I assume that people filling the role of primary professional supervisor (for registration purposes) of intern psychologists will be restricted to psychologists holding 'General Registration' status. Will people holding 'Limited Registration' be permitted to act as secondary supervisors for interns? Will all limited registrants be able to act as secondary supervisors? I can see the argument in favour of 'Specialist Practice' or perhaps 'Area of Need' limited registrants being permitted to supervise interns (ie, possession of specialist competencies), but would this hold for other categories of 'Limited Registration' (especially 'Post-Graduate Training' and 'Public Interest' registrants)?

Limited registration of persons engaged in post-graduate training ('Limited Registration - Teaching or Research' category) - post-grad educators may be required to provide hands-on / experiential training of students within their program, including supervision of counselling and therapeutic techniques and skills. Will the National Board accept these 'limited registrants' as legitimate 'supervisors' of intern psychologists, the equivalent of fully registered psychologists who provide professional supervision to interns under the 4+2 model?

Would the proposed scheme allow someone to qualify for 'Limited Registration - Specialist Practice' without necessarily qualifying for 'General Registration'? Questions arise from this distinction, including:

- a. Would there be different PD requirements for the different registration categories?
- b. Who would set these PD and competency requirements? Will the National Board include sufficient expertise to enable it to set appropriate competency and PD standards for each sub-category of 'Limited Registration' (ie, would a National Board consisting of purely clinical and academic psychologists have the skills and background to determine appropriate competency and PD requirements for Organisational / Forensic / Sports Psychologists)?
- c. What impact would this have on psychologists employed within the public sector in particular (eg, changed duty statements and eligibility requirements / selection criteria)? Has this been considered? This is not necessarily an issue within the private sector, especially for those who are self-employed and hence can tailor their practice accordingly.

These categories listed under the heading of 'Limited Registration' (pg 10 of 11) clearly require further definition, especially the roles that might fill with regard to supervision of intern psychologists, and the circumstances under which a person might be registered under this category.

The ACT Psychologist's Board trusts these comments are useful in finalising the arrangements for specialists within the National Registration and Accreditation Scheme for Health Professionals.

Yours sincerely,

Vanessa Hamilton

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President