

Submission
No 150

**INQUIRY INTO EQUITY, ACCESSIBILITY AND
APPROPRIATE DELIVERY OF OUTPATIENT AND
COMMUNITY MENTAL HEALTH CARE IN NEW SOUTH
WALES**

Name: Name suppressed
Date Received: 26 September 2023

Partially
Confidential

Dr Amanda Cohn, MLC
Parliament House
Australian Government

Dear Dr Amanda Cohn,

I am writing to you as I am aware that you recently chaired the inquiry into "Equity, accessibility and appropriate delivery of outpatient and community mental health care in New South Wales". I am also aware that submission have now closed, but the matter that I need to communicate to you is of relevance and extremely concerning at multiple levels. I have also communicated this to others, hoping to shine the necessary urgent light into changes that will impact negatively the whole of the Mental Health Workforce in Australia.

The establishment of the [Mental Health Reform Advisory Committee](#) appears at just the right time, when changes are being proposed by the Psychology Board of Australia that risk impacting negatively the Mental Health Workforce in Australia.

The changes that I am talking about, are part of the [draft proposed update to the competences for general registration in psychology](#), that inadvertently or not, will seriously negatively impact the goals sought by the Mental Health Reform Advisory Committee.

This update is removing the Mental Health competencies from most of the Australian Registered Psychologists. These are professionals who have gained these skills and knowledge in mental health through the current 4+2 and the 5+1 study pathways to General Registration, where mental health is a core requirement for initial registration as a psychologist in Australia.

I do understand that under the National Law, the Psychology Board of Australia has the powers to decide the requirements for registration or endorsement of registration for the psychology profession. And I understand that as part of this process the Board is not obligated to consult with the public on new or proposed amendments. The Board can impose changes without notice, however in general it consults on all substantive amendments. The Commonwealth does not have the legislative authority to intervene in the matters of the Board.

But regardless of the above, you must realise that removing Mental Health Competencies, that are currently part of the requirements for initial registration of the 4+2 and 5+1 general registered psychologists, is nonsensical and goes against the advisory committee's initial areas of focus

outline below and found in <https://www.health.gov.au/committees-and-groups/mental-health-reform-advisory-committee>.

1. Distributional equity of mental health care
2. Low intensity services and models of care
3. Solutions for people with complex needs
4. Triage, assessment and referral

On page 6 of [Attachment D of the public consultation - Draft professional competencies for psychologists](#) the Board clarifies that for the 4+2 and 5+1 pathways, “when applying for general registration, an applicant must demonstrate that they meet the threshold professional competency by completing a Board-approved qualification for general registration, and any required supervised practice” and adds on the same page, that the "[National Psychology Examination](#) is used to help determine if an applicant for general registration meets the threshold competency for those doing the internship pathway”.

I have already shared this concerns with the Hon Mark Butler MP in his capacity of Minister for Health and Aged Care earlier this year, so I won't go into an exhaustive explanation about the specificity of this here. I have nevertheless attached in this communication to the Mental Health Reform Advisory Committee, several pdfs, for you to consult if required, where I have delved into this matter with different levels of in-depth analysis of the logics and arguments that are part of the [Public consultation – Updating the competences for general registration](#)

At this stage I want to initially direct your focus to the pdf attached with the Curriculum of the National Psychology Examination and specifically at least to the sections that I have highlighted in yellow that exposes the centrality of Mental Health Diagnosis and Mental Health Therapies as core competencies of the 4+2 and the 5+1 current pathways to General Registration in Psychology. The draft Updated Competencies for General Registration that you can find in [Attachment E of the public consultation - Draft professional competencies for psychologists](#) does not include Mental Health Diagnosis or Mental Health Therapies.

According to the [Psychology Board of Australia June 2023 Workforce Data report](#), we have in Australia the following number of psychologists

1. There are currently 36,652 practicing Registered Psychologists in Australia.
2. Of the above, 15,291 have at least one Area of Practice Endorsement (AoPE).
3. This leaves 21,361 that do not have an AoPE, but who hold full General Registration.
4. Currently there are 2,813 provisionally registered psychologists completing the 4+2 pathway.
5. And there are 2,206 provisionally registered psychologists completing the 5+1 pathway .
6. This leaves a total of 26,380 4+2 and 5+1 General Registered Psychologists, with full registration or provisional registration currently completing their training.

Why would we now choose to relinquish these 26,380 General Registered Psychologists from the Mental Health Workforce?

AHPRA's [Draft proposed update to the competences for general registration](#) is proposing precisely to do the above.

Not only will the [draft proposed update to the competences for general registration in psychology](#) remove the mental health competencies from all currently qualified general registered psychologists, but what is most concerning is that once this draft proposed competency

is approved, the 4+2 and the 5+1 **training pathways itself** will need to be updated to reflect the new competencies for General Registration as this will no longer include Mental Health DSM diagnosis and Mental Health Therapies. And as a consequence this will dismantle an important training platform of the Mental Health Workforce. General Registered Psychologists will cease to hold the skills and knowledge to diagnose and treat Mental Health and hence they will no longer be a part of the Mental Health Workforce. AoPE Clinical Psychology will have succeeded in appropriating these competencies for themselves. But at what price.

I have come across multiple arguments that have tried to dispute my conclusions, and I have answered some of these in the attached pdf with the summary of my concerns. Some have furiously argued that diagnosis of mental health is included because "diagnosis of psychological and psychosocial functioning" is in the draft proposed competencies, but this is not the same as DSM diagnosis of Mental Health. Mental Health is not part of the proposed competencies for the 4+2 or the 5+1 general registered psychologists. And this is disastrous for the Mental Health Workforce.

The implications to the current and future Mental Health Workforce from this draft update to the competencies for general registration are:

1. It removed 21,361 fully general registered psychologists from the Mental Health Workforce
2. It also removes from the current Mental Health Workforce training options, the 5+1 General Registration study pathway which involves a five-year sequence of accredited study (e.g. Master of Professional Psychology) followed by a one-year supervised work experience, and that demands candidates to acquire core competencies in diagnosing and therapeutic skills in Mental Health.
3. The above makes it unnecessarily so much harder for the Mental Health Reform Advisory Committee to achieve their stated goal of "reforming the mental health and suicide prevention system, so all Australians can access affordable care when and where they need it".

I wish now to request that you please review my concerns. Clearly, as a psychologist I am troubled by the misleading and misrepresentations that I have identified in the [Public consultation – Updating the competences for general registration](#), but the focus that I want to bring to you here is the dire implications that the above will have on the Mental Health Workforce in Australia.