



Forensicare

Victorian Institute of
Forensic Mental Health

Community Forensic
Mental Health Service

505 Hoddle Street
Clifton Hill, VIC 3068

DX 211289

Telephone (03) 9947 2500
Facsimile (03) 9947 2599
Email info@forensicare.vic.gov.au
www.forensicare.vic.gov.au

13th January 2012

Psychology Board of Australia
Level 8, 111 Bourke Street
Melbourne VIC 3000



Dear Chair, Psychology Board of Australia,

R.e Proposed Guidelines for Supervisors and Supervisor Training Providers

The Psychological Services Department of the Victoria Institute of Forensic Mental Health (Forensicare) would like to take this opportunity to highlight their significant concerns regarding the proposed guidelines for Supervisors and Supervisor training, to be implemented in 2013. Forensicare's psychology department employs over 20 Forensic and Clinical Psychologists who work across a range of settings including hospital, prison and community. The department is therefore in a position to provide a range of placement opportunities to psychology students and graduates (including clinical, forensic and neuropsychology students) and indeed has been providing student placements for over a decade. Furthermore, such is the long standing reputation of Forensicare in terms of the quality of its psychology placements and the skill set of its Clinical Supervisors, that we receive placement applications each year from several local as well as interstate and international tertiary institutions, with demand significantly outweighing the number of placements available.

Given the above, Forensicare views its role in the professional development and training of psychology students and graduates as a pivotal one, and welcomes and supports the implementation of supervisory guidelines to ensure consistency and the maintenance of standards across the profession. However we are concerned that the proposed guidelines will dissuade many psychologists and their institutions (including our own) from undertaking and supporting the training required to meet the proposed guidelines, due to resource implications and the general impracticability of the various requirements. More specifically, we would like to raise the following concerns:

1. In what is an increasingly underfunded health system, many organisations such as Forensicare are finding they have to significantly restrict and cut expenditure and are therefore struggling to support even the bare minimum of professional development and continuing education and training that is needed for allied health staff, including psychologists, to meet registration requirements. The proposed requirement of 7 hours preparation, 14 hours direct training and the completion of assessment, plus a further day for revision training, is a significant one both in terms of potentially large number of psychologists within the one organisation that would be required to take time away from their normal work duties to complete the training, but also in terms of the cost involved. It is therefore likely that if at all, only a small proportion of those eligible to undertake the

training would be funded to do so, thereby restricting the number of placement opportunities available to students. Furthermore, organisations will be more likely to re-focus the skills of trained supervisors onto the current psychology workforce and newly employed provisional psychologists, rather than students, further restricting the student intake of that organisation.

2. The proposed guidelines do not refer to CPD hours. This would be particularly problematic for psychologists with dual endorsement who require 15 hours for each area of endorsement. If supervision training is not formally recognised within Continuing Professional Development, it would stand in addition to the 30 hours required and potentially increase already significant leave and financial costs associated with on-going training and development.
3. The proposed guidelines do not appear to give any consideration to the large number of supervisors who already have significant experience and training in the provision of supervision; i.e. there is no grand-parenting clause imbedded in the proposal to credit those who have already undertaken supervisor training workshops.
4. In light of point 1., it is unclear as to who will be in the position to provide the supervisor training and how this training will be monitored to ensure consistent and adequate standards.
5. Whilst one option available to psychologists is to self-fund supervisor training, it is likely that for many, the costs and time involved would outweigh the altruistic rewards that are gained from the provision of supervision, resulting in a loss to the profession of highly skilled supervisors whilst also robbing students entering the profession and graduates of the opportunity to be the recipient of such expertise.
6. Supervision of students often forms a core responsibility of Senior Psychology positions within organisations such as Forensicare. An individual's opportunity to progress to a higher grade within their employment, may be limited if they have not completed the necessary supervisor training and are not in a financial position to self-fund this.

To assist in what is viewed as prohibitive and unnecessary demand placed on our already well-trained supervisors, we propose that:

- (1) A reduction in supervisor training requirements be considered overall;
- (2) A 'grand-parent' clause be considered whereby supervisors who are already formally recognised by the Board receive some credit with respect to the training hours required for new supervisors;
- (3) The Board recognises core supervision training and the supervision of higher degree students as active CPD hours which could be capped at a maximum number of hours;
- (4) The cost of supervisor training be subsidised either by the Board, or by Universities who are seeking supervision for their students;
- (5) A general education/information strategy be developed for employers of psychologists that details the extra demand likely to be placed on supervisors in order for the employer to provide resource support.

In summary, whilst we strongly believe that structured and consistent guidelines are required to ensure that supervision is delivered at a high standard, we consider that the proposed guidelines are

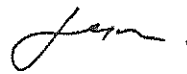
unnecessarily restrictive and prohibitive and request that The Board considers the recommendations proposed by the Psychology Department at Victorian Institute of Forensic Mental Health.

Yours Sincerely,

The Psychology Executive Committee
Forensicare



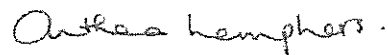
Dr Meera Aurora
Senior Psychologist
Thomas Embling Hospital
Forensicare



Dr Jennifer McCarthy
Manager, Problem Behaviour Program &
Senior Psychologist
Community Forensic Mental Health Service
Forensicare



Professor James Ogloff
Director of Psychological Services
Forensicare



Anthea Lemphers
Principal Psychologist
Forensicare