

31 August 2017

Dear Professor Grenyer,

On the following pages is the College of Organisational Psychologists' submission to Consultation Paper 28, regarding the National Psychology Examination Curriculum Review.

This submission has been prepared by members of the COP National Committee and Program Directors of the organisational psychology Masters program. It has been reviewed and approved by them.

The College strongly believes in the importance of maintaining high professional standards across all areas of psychology. We also agree that it is important for the Psychology Board of Australia to manage the risk posed to the public by inadequate or inconsistent training. We thank the Board for inviting our submissions into the review of the processes used to maintain such standards.

The College has a number of concerns about the proposed curriculum of the National Psychology Exam. We have detailed our concerns and recommendations in the attached document and we would be happy to make ourselves available to discuss these in greater detail.

We undertook this review in the context that the Board plans to revisit the issue of extending the National Psychology Exam to graduates of Masters and Doctoral programs. For our own discipline, we believe that the current and proposed content of the exam is not fit for this application.

Please feel free to contact us any time to discuss any of the specifics of our submission.

Yours sincerely,

Timothy Colin Bednall
Chair of the College of Organisational Psychologists

We are responding to this request for comment in our capacity as representatives of the profession of organisational psychology.

1. Recommended Changes to Ethics Domain

Broadly speaking, we do not have any objections to the changes that are listed here.

2. Recommended Changes to Assessment Domain

Our primary concern about the assessment domain of the National Psychology exam is that it emphasises rote learning of numerous *specific* instruments, rather than capturing the understanding of *general principles of assessment*. The exam appears to include relatively little content on the process of selecting an appropriate test for a designated purpose, assessing its psychometric properties (reliability and validity), and making valid inferences from the assessments. And yet, these are vital skills of a practising psychologist. Psychological tests are constantly evolving. In contrast, the principles that underlie psychometric assessment are relatively stable and applicable to all tests. Hence, knowledge of these principles is a vital skill for a practising psychologist, in contrast to knowledge of any specific test, which can be quickly trained.

We note too that the exam already requires candidates to be familiar with at least 26 tests, and it is now proposed that this be raised to 29. This seems unreasonable, not just because of the study load imposed on every candidate, but because different fields of psychology use different tests. Ideally, the purpose of the assessment component of the examination would be to determine whether candidates are competent in the procedures of test selection, administration, and interpretation, rather than to ensure that every psychologist is competent with 29 specific tests. In addition, increasing trends towards automation are likely to make the emphasis on the administration of specific tests less relevant. In summary, we object to the notion that knowledge of specific tests should be incorporated into any assessment of competence.

Nonetheless, we have feedback relating to the changes pertaining to the assessment tools being considered for inclusions.

We first note that it is unclear whether the proposed new assessment tools are being added to the list of mandatory tests (i.e., increasing their number from 6 to 10), or the broader set of tests. We also note the absence of any tests used predominantly by organisational psychologists in the overall set; we comment on this further below. Finally, the stated justifications of the additional assessments are questionable:

- "...[WHO-DAS and WHO-QOL] are included in the DSM". It would follow then that *all* tests included in the DSM should be included.
- "[SCID is a] standard assessment procedure that operationalises diagnosis.." It is unclear from the justification exactly for whom the SCID is a standard assessment procedure, in what settings, and what the evidence is for this claim. Notwithstanding the above, it would also then follow that *any* "standard assessment procedure that operationalises diagnosis" should be included.
- "These tests have been recommended for inclusion by stakeholders." To determine whether this statement is justified requires us to know who the stakeholders were, how many there were, the process by which these recommendations were solicited, and whether there existed any conflicts of interest.

The overall set of assessments appears to be largely focused on clinical applications, and two of the mandatory tests are designed for clients *who are children*. There is *total absence* of common assessments that are used in occupational domains (e.g., the Saville Wave, Gartner OPQ, Hogan) for personnel selection, development, career planning, and other activities carried out by practising organisational psychologists. This means that, to pass an examination to be registered as psychologists, candidates seeking careers in organisational psychology must rote-learn the details of tests they will most certainly *not* be using, and yet they will not be examined on their knowledge of tests they are likely to use. This is clearly inconsistent with the goal of the examination as a means to protect the public against poor professional practice. Importantly, it also creates a disincentive for people in non-clinical areas of psychology (including but not restricted to organisational psychology) to obtain registration, which has implications for sustainability of the broader psychology workforce.

Our primary recommendation is that the assessment component of the examination ask questions only in relation to the central tests (of which there are currently six) only, and to address more questions to general issues of assessment.

If the Board is intent on examining knowledge about more tests, we recommend that new and existing assessments for inclusion within the examination be selected via a more systematic and transparent approach. Specifically, selection of tests should be based on a combination of: (1) prevalence of use among psychologists, (2) the types of clients and presenting problems most typically serviced by psychologists, (3) anticipated workforce needs, (4) level of risk to the public if an assessment if there are errors in its administration or interpretation, and (5) evidence of the reliability and validity of the assessment. It is recommended that a more extensive consultation (e.g., a national survey,

and review of complaints made against psychologists) be undertaken to determine these issues.

The specific knowledge of the DSM categories and diagnostic criteria appears excessive, particularly if a psychologist has the opportunity to consult the DSM in the context of a specific client issue. A generalist psychologist should understand the limits of their expertise, and know when it is appropriate to refer to another professional if they are presented with a mental health issue that they are not competent to treat. As such, a more reasonable criterion would be that the psychologist has a robust understanding of different categories of mental illness, and is able to identify its impairment on a client's quality of life.

3. Recommended Changes to Interventions Domain

We do not have any specific objections to the proposed changes for the interventions domain.

However, we would argue that the current interventions section of the examination contains content that is esoteric and likely to be applicable to only a minority of psychologists. This content includes:

- A knowledge of pharmacology. Psychologists currently do not administer pharmacological interventions. This would appear to only be a consideration for psychologists dealing with clinical populations, without advice from medical practitioners about the nature of medications and their effects. The application of knowledge appears too specialised for inclusion on a general exam.
- Knowledge of particular therapies, such as psychodynamic approaches, and narrative therapy. These appear very specialised interventions that might be applied only for a minority of clients. There is questionable evidence for the efficacy of narrative therapy.

As previously described, the selection of specific interventions to be covered in the Exam should be based on a systematic and transparent process. We recommend interventions be chosen on the basis of: (1) prevalence of use among all types of psychologists, (2) the types of problems most typically treated by psychologists, (3) anticipated workforce needs, (4) level of risk to the public if an intervention is administered improperly, and (5) evidence of the effectiveness of the intervention.

4. Examination Exclusions

Provisional psychologists in APAC-accredited postgraduate psychology programs are currently exempt from needing to sit the exam. There is a very good reason for this. Professional psychology Masters and Doctoral programs involve comprehensive assessment of psychology competencies. The majority of these assessments are delivered in a manner that is particularly suited to specialty domains in psychology (e.g. simulated client reports). Such assessments all meet internal (university/department) requirements as well as APAC requirements. Multiple assessments of different types are carried out through the duration of these programs, and students can be excluded from programs if they fail some assessments even if they have previously passed others.

We continue to argue that this assessment approach is more thorough and appropriate than the National Psychology Examination for determining capability and capacity to meet the high standards of our profession.

However, despite reference to a consultation process, the Guidelines for the National Psychology Exam appear to assume that any and all exemptions from having to take the exam are temporary. Currently, the guidelines state that from 2019 the exam will be required even of those candidates who have graduated from APAC-accredited professional psychology postgraduate programs. We reiterate our objection to the application of a test to assess professional competency in psychology that is already assessed by domain experts using specialty-relevant assessments consistent with APAC and university requirements. A national exam should not now, or ever, apply to students deemed via such programs to be competent psychologists. This is our feedback on the examination itself, but we feel it should also be reflected in the wording of the guidelines.