

## Public consultation: Draft competencies for general registration

The Psychology Board of Australia is inviting comments on the *Draft professional competencies for psychologists*. The specific questions the Board is seeking feedback on are listed below. All questions are optional and you are welcome to respond to as many as are relevant or that you have a view on.

Please submit your feedback on this submission template by email to: [psychconsultation@ahpra.gov.au](mailto:psychconsultation@ahpra.gov.au) by close of business **Tuesday 11 April 2023**.

<b>Preferred option</b>
<b>1. Are you in support of updating the professional competencies for general registration? Please provide a rationale for your view.</b>
<p><b>Your answer:</b> The <i>Australian Psychological Society (APS)</i> is in support of updating the professional competencies for general registration.</p> <p>The proposed professional competencies are based on clusters of key competencies as they are currently, however, the new competencies also focus on diversity, deliberate practice, and self-care.</p> <p>Updating the professional competency standards will lead to:</p> <ul style="list-style-type: none"> <li>• Improved training standards and outcomes for clients.</li> <li>• Professional competencies that are current and relevant, i.e., modernised and contemporary, and</li> <li>• Competencies that more accurately reflect the depth of 5th year training and internship to achieve registration.</li> </ul> <p>APS members provided very positive feedback about the proposed professional competencies for general registration. In particular, members commended the inclusion of Competency 7 and expansion of Competency 8.</p>
<b>Structure of the updated competencies</b>
<b>2. Do you agree with approach to create a single document that lists all the professional competencies in one place?</b>
<p><b>Your answer:</b> Yes</p> <ul style="list-style-type: none"> <li>• It is an improvement to have the professional competencies presented in a single document.</li> </ul>
<b>3. The term ‘threshold professional competency’ has been introduced to describe the minimum professional competency necessary to practise safely and effectively as a registered psychologist in Australia. Do the Draft professional competencies sufficiently describe the threshold level of professional competency required to safely practise as a psychologist in a range of contexts and situations?</b>
<p><b>Your answer:</b> Somewhat</p> <ul style="list-style-type: none"> <li>• Comparatively speaking, the Draft professional competencies have de-emphasised the scientist-practitioner model, i.e., the science underpinning the discipline of psychology.</li> </ul>

- Further information about cultural safety and cultural responsiveness, as described and defined in *Professional Competencies for Psychologists* would be helpful –as a supplementary document, including ongoing training and CPD requirements.

**4. We have improved our approach to drafting the competencies to better align with international psychology regulators, to emphasise that the competencies are interconnected (holistic approach) and to improve how we write the competencies (e.g. using action verbs). Do you agree with the updated drafting approach?**

**Your answer:** Yes

- This approach is contemporary and appropriate.
- Achieving clarity to avoid misinterpretation and misunderstanding is paramount; particularly regarding the inclusion of new or updated terminology, i.e., reflexivity, deliberate practice, culturally responsive, culturally safe and healing-informed.

**5. The Draft professional competencies for psychologists have been written at a high level. This aims to provide both sufficient information for clarity and direction, but also be flexible enough to be relevant to the diverse contexts where psychologists train and work. Did we get the balance right? Please provide a rationale for your view.**

**Your answer:** Yes, however...

- We have made comments below regarding language which also references the diverse contexts where psychologists train and work.
- The revised APAC standards will need to clearly outline how the professional competencies will be operationalised.

**6. The Draft professional competencies for psychologists include a preamble (p. 3-10) and definition section (p. 16-19). Do you support this addition? Is the content clear, relevant and complete?**

**Your answer:** Yes

- The preamble provides a useful orientation to the document.
- There is some concern that the preamble will not be read and 'clients' will be interpreted as referring to individuals if the definition is not also highlighted within later descriptions of relevant competencies. We suggest referring to the definition in relevant descriptors (or at least the first that references 'clients').

**7. Is the language and structure of the Draft professional competencies for psychologists helpful, clear, relevant and workable? Are there any potential unintended consequences of the current wording?**

**Your answer:** The language and structure of the Draft professional competencies are clear, relevant and workable. However...

- The APS has suggested some changes under specific competencies (see Q.12 below).
- Many of the descriptors describe actions rather than competencies, e.g., 6.2 "Communicates the psychologist's role and purpose." Evaluative language that speaks to a standard could be used more consistently across the competencies/descriptors, i.e., "Has knowledge of...", "Is able to effectively..." etc. such as that being used for descriptor 1.3.

**Organisation of the updated competencies**

**8. The Draft professional competencies for psychologists propose to reorganise the eight core competencies.**

**Are you in support of combining the current *Knowledge of the discipline* (Competency 1), and *Research and evaluation* (Competency 5) into a new competency: *Applies scientific knowledge of psychology to inform safe and effective practice* (updated Competency 1)?**

**Your answer:**

- Combining the two competencies (Competency 1 and Competency 5) has resulted in a loss of specificity regarding some key aspects of psychological knowledge, e.g., theories of functioning (systemic and individual), dysfunctional behaviour and psychopathologies. The APS suggests including these in Competency 1 to emphasise the importance of knowledge of the discipline beyond (but without diminishing) safe and effective practice.

**9. The Draft professional competencies for psychologists propose to place an intentional focus on professional reflexivity, deliberate practice and self-care (updated Competency 3). Do you support this proposal? Please explain why.**

**Your answer:** Yes

- This proposed change aligns with international standards and competencies

**10. The Draft professional competencies for psychologists include amended and expanded core competencies on Aboriginal and Torres Strait Islander health and cultural safety (updated Competency 7).**

**Is there any content that needs to be clarified, added, amended or removed? Please provide details.**

**Your answer:**

- This is a welcome addition to the new competencies and well presented.
- Implementation in 2024 may be challenging – the APS suggests 2026. The operationalisation of this competency will need to be APAC's priority. This will be challenging in the short term and may be better managed with micro-credentialing through professional bodies in consultation with Aboriginal and Torres Strait Islander Peoples who are working in this context.

**11. The Draft professional competencies for psychologists include an expanded core competency on working with people from diverse groups, including demonstrating cultural responsiveness (updated Competency 8).**

**Is there any content that needs to be clarified, added, amended or removed? Please provide details.**

**Your answer:**

- Implemented by 2026 (as above for Competency 7).

**Competencies and their descriptors**

12. The Draft professional competencies for psychologists outline eight updated core competencies:

**Competency 1: Applies scientific knowledge of psychology to inform safe and effective practice**

**Competency 2: Practices ethically and professionally**

**Competency 3: Exercises professional self-reflection and deliberate practice**

**Competency 4: Conducts psychological assessments**

**Competency 5: Conducts psychological interventions**

**Competency 6: Communicates and relates to others effectively and appropriately**

**Competency 7: Demonstrates a health equity and human rights approach when working with Aboriginal and Torres Strait Islander Peoples, families and communities**

**Competency 8: Demonstrates a health equity and human rights approach when working with people from diverse groups.**

**Do you suggest any changes to the eight core competencies and their descriptors? What would you like to see changed?**

Your answer: Yes

**Suggested changes for Competency 1:**

1.1 Possesses knowledge of **psychology** concepts, constructs, theories, models of intervention and methods.

- The APS endorses the inclusion of “models of intervention” within this descriptor, however, suggests the use of the term “psychology” in preference to “psychological”. The latter could be referenced by a number of professions who use psychological knowledge. However, the former relates specifically to the discipline of psychology. This change would also make this descriptor consistent with 1.2.

1.2 Critically evaluates and appraises levels of scientific evidence from psychology and relevant contemporary research **using a continuous improvement approach** to guide and inform evidence-based practice.

- Again, we endorse the additions to this descriptor, however, question whether the words “levels of” are required. We suggest removing them. We also suggest including “using a continuous improvement approach” to speak to the evolving knowledge and evidence-base in the discipline of psychology and the need for practitioners to apply scientific knowledge to improve their level of competency.

1.3 Understands the philosophical, theoretical and methodological foundations of various scientific methods and their limitations and selects and applies the appropriate method **to enhance evidence-based practice and research models**.

1.4 No suggested change

1.5 Possesses the understanding and ability to design and conduct ethical research **that is inclusive and** relevant to cultural and professional contexts.

**Suggested changes for Competency 2:**

This is an indisputable competency for registered psychologists.

- Descriptor 2.2 we suggest using “contemporary” to replace “accepted”.

**Suggested changes for Competency 3:**

Despite being defined in the *Definitions*, as noted above, it might be helpful to have the meaning of reflexivity and deliberate practice elucidated within this competency to provide greater specificity.

- Descriptor 3.2 reads as an ethical standard and may be more appropriately placed in competency 2.
- Descriptor 3.5 - consider adding examples of “reflection and reflexively” e.g., through the use of routine outcome measures to guide effective and collaborative professional practice.
- Descriptor 3.6- Routine outcome measurement can identify areas for improvement in professional practice to enhance competence and effectiveness. We also suggest removing development of professional identify from here to make it a separate descriptor with examples added.

#### **Suggested changes for Competency 4:**

- The APS suggests including more emphasis on human development across the lifespan within this competency.
- Descriptor 4.2 suggest: “Identifies assessment needs, plans and selects assessment methods appropriate to the client/s, the context, and purposes of the activity.” i.e., remove “assessments” after “plans” as it sounds somewhat repetitive.
- Consider adding “culturally safe” to descriptors 4.5, 4.6 and 4.7.
- Descriptor 4.7 could be strengthened by including a reference to using plain language and other appropriate formats easily accessible to clients and other relevant stakeholders. This could also be extended to Descriptor 6.1.
- Consider changing descriptor 4.9 to: Identifies and manages inherent **systemic and personal** risks associated with assessments.

#### **Suggested changes for Competency 5:**

- The APS suggests including more emphasis on human development across the lifespan within this competency.
- Consider changing descriptor 5.2 to: “Uses diagnosis and formulation to develop **evidence-based** intervention plans **that take into account client preferences.**”
- Alternatively, consider taking “client preferences” out of 5.2 altogether and adding it to descriptor 5.3, i.e., “Selects and implements intervention/s that will address the goals for intervention and are sensitive to both client preferences and the professional context.” This precludes any confusion about client preferences pertaining to diagnosis and formulation in descriptor 5.2.
- Consider changing 5.4 to: “**Is aware of and able to clearly** outline the risks and benefits of **interventions to clients** relevant to their context, strengths, lived experiences and circumstances.” This accounts for the fact that not all psychologists provide treatment but may provide interventions. Using “clients” instead of “individuals” broadens the Competency to include non-individual clients.
- The APS suggests the following changes to 5.5:
 

Conducts a range of culturally safe interventions that maximise optimal outcomes with clients and that:

  - identify and manage **individuals** who are vulnerable or at risk of harm to self or others
  - **identify, manage and treat individuals with** psychological disorders

Using the term ‘individual’ in this context, instead of ‘client’, emphasises that not all clients that psychologists work with are in a clinical setting or individuals, but could be groups, teams, organisations etc.

- Consider making culturally safe practice an over-arching principle and include clinical practice guidelines.

**Suggested changes for Competency 6:**

- Except for 6.2, the descriptors under this competency are generic and could be speaking of any health practitioner. It would be helpful for the descriptors to provide some specificity around the profession of psychology.
- Consider adding a descriptor around psychological reports.
- We suggest providing a general point to define different types of communication:  
Descriptor 6.1 Communication refers to reports, letters, digital communications, case notes, letters to clients, referrers and other stakeholders etc.
- Descriptors 6.7 and 6.8 are similar and could potentially be merged into one.

**Competency 7:**

No changes suggested for Competency 7, however, recommend including “healing-informed care” in the definitions.

**Suggested changes for Competency 8:**

- The reference to “disability” and “cognitive capacity” is commended. We suggest using this reference in other descriptors, e.g., 4.1 and 5.1.

**Outcome of implementing the updated competencies**

**13. We propose that an advanced copy of the professional competencies for psychologists would be published when approved, but not take effect until a later date. The estimated date of effect will be 1 December 2024. This coincides with the annual renewal date for general registration to make it easier for psychologists to plan their CPD and and for stakeholders to prepare to meet the updated competencies.**

**Are you in support of this transition and implementation plan?**

**Your answer:** Somewhat

- The professional competencies could come into effect except those associated with cultural safety to allow time for psychology students, provisional psychologists and registered psychologists to acquire these competencies (the APS has suggested 2026 above).

**14. We have recommended changes to the *Provisional and General Registration standards* and the *Guidelines for the 4+2 internship program* to remove reference to the current core competencies for general registration and replace with the updated competencies (see Attachments F, G, and H). Are you in support of these changes?**

**Your answer:** Yes

**15. The Board proposes a transition process and timeframe for updating board documents with the new competencies including the:**

- ***Guidelines for the 5+1 internship program* (separate consultation in 2023)**
- ***Guidelines for the National Psychology Exam, and National psychology exam curriculum* (separate consultation in 2023/2024).**

**Are there any comments you have on the proposed consultation plan and transition timeframes?**

**Your answer:** This is appropriate

**16. Are there specific impacts for practitioners, higher degree providers, employers, clients/consumers, governments or other stakeholders that we should be aware of, if the Draft professional competencies for psychologists were to be adopted? Please consider both positive impacts and any potential negative or unintended effects in your answer.**

**Your answer:**

- The Draft professional competencies have the potential to place demands on the psychological workforce as a result of their introduction, i.e., in terms of requirements to meet new competencies. The associated impacts need to be accounted for by the Psychology Board of Australia and other key stakeholders (e.g., the APS).
- It will be important to evaluate implementation of the updated competencies to determine their impact on clients, practitioners, universities and teaching staff, and other stakeholders.
- The Draft professional competencies would be improved by greater specificity around the profession of psychology. Aspects of the proposed updated competencies and their descriptors do not adequately distinguish psychology from other health professions.
- Documentation explaining deliberate practice and reflexivity, and their association with conduct, CPD and treatment effectiveness, would be helpful as the new competencies are implemented.

**17. Would the proposed changes to the Draft professional competencies for psychologists result in any potential negative or unintended effects for Aboriginal and Torres Strait Islander Peoples or other priority groups in the community? If so, please describe them.**

**Your answer:**

- The Draft professional competencies necessitate further development of knowledge, skills and cultural competency for providing services to Aboriginal and Torres Strait Islander Peoples. Some aspects of the updated competencies may outpace the available resources and research in this area. For example, the competencies point to administering a “range of culturally safe assessment methods to assess: cognitive functioning” etc. However, quality instruments to achieve this end, are not, at this stage, always available – depending on the need and context.
- More research in this area is needed as a priority to develop appropriate culturally safe measures to ensure that psychologists can meet the required competencies and undertake culturally safe practices.

**18. Would the proposed changes to the Draft professional competencies for psychologists result in any adverse cost implications for practitioners, patients/clients/consumers or other stakeholders? If yes, please describe.**

**Your answer:**

- Not for patients/clients/consumers as the proposed changes to the Draft professional competencies are person-centred and emphasise cultural safety, equity, human rights, and sensitivity towards and respect for diversity. They ensure further protection for clients.

- There may be some cost implications for practitioners requiring further training, however, presumably, this would be a matter of course for ongoing CPD and an aspect of business-as-usual self-assessment.

#### Other

### 19. Do you have any other feedback or comments about the Draft professional competencies for psychologists?

#### Your answer:

- A competency descriptor addressing the use of technology in psychological practice could be considered, e.g., telehealth, mental health apps, e-therapy etc.
- The loss of a standalone competency in the area of psychological practice across the lifespan seems to de-emphasise the importance of this crucial area of competence. It is noted that practice across the lifespan is seen as a core competency to be included across all competencies. We suggest that further emphasis could be placed on this competency in the relevant updated descriptors.
- There is no mention of prevention or preventative skills. Could a reference to prevention be included in Competencies 4 and 5 to highlight that not all psychologists treat disorders. Some are in roles that support adaptive functioning and encourage clients to thrive.
- While there is acknowledgement that psychologists work in diverse areas and may not need to 'employ' all competencies, depending on their job role, this could be made clearer by including the word 'can' (or similar) before relevant descriptors, e.g., 5.2 becomes "Can use diagnosis, formulation, and client preferences to develop intervention plans."
- Within the descriptors for Competency 3. "Exercises professional reflexivity, deliberate practice and self-care", we suggest including reference to management of workloads and communicating with workplaces about the significance of self-care within this competency.

#### APS members additionally called for:

- More emphasis on geographical location, and particularly rural and remote areas in terms of a sustainable and equitable workforce, i.e., psychologists' understanding of potential variations in practice in these locations.
- Additional self-assessment resources based on the updated competencies, along with practice guides and other materials to support implementation of the competencies.
- A clear framework to monitor quality and adherence to the updated competencies.
- Reference to private practice within the updated competencies, given the proportion of psychologists who work in private practice.
- Inclusion of a descriptor regarding 'consent' – particularly for vulnerable groups of people, e.g., with a disability or complex communication support needs i.e., 6.2. could read: "Is able to effectively communicate the psychologist's role and purpose and seek informed consent."
- Expanding the number of competencies to include supervision or including it as a descriptor in Competencies 2 and 3.
- With reference to the definition of "Supervisor", we suggest changing the following sentence to include: "A supervisor provides a space for teaching, collaborative goal-setting and corrective feedback on a supervisee's performance **to enhance learning at any stage of the supervisee's career.**" i.e., to promote life-long learning.

If any further information is required from the Australian Psychological Society (APS), I would be happy to be contacted on (03) 8662 3300 or by email at [z.burgess@psychology.org.au](mailto:z.burgess@psychology.org.au).

*The APS would like to acknowledge and sincerely thank our members who so kindly contributed their time, knowledge, and experience to this submission.*