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Victorian Health Workforce Strategy
Department of Health
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Via email: WorkforceStrategyReform@health.vic.gov.au

Dear Sir/Madam

APS Submission to the Victorian Health Workforce Strategy

The Australian Psychological Society (APS) is a national organisation representing 27,000 psychologists. The APS would like to congratulate the Victorian Government for the leadership shown in promoting mental health and wellbeing for the people of Victoria. We are pleased to have the opportunity to contribute to the development of a Health Workforce Strategy that will outline the approach to long term workforce recovery, development and growth, and identify immediate actions to support the health workforce. The APS can work with the Government to support this endeavour through strategies to enhance the psychological workforce.

We acknowledge recent initiatives undertaken by the Victorian Government that demonstrate a significant investment into the mental health and wellbeing of the people living in this State, and the commitment to addressing these priority areas. However, the APS is aware that the capacity to meet the needs of the health and mental health sectors is being impacted by the skilled workforce shortage in Victoria, including the psychological workforce. Evidence shows that there is a chronic shortfall of qualified psychologists in Australia with the current psychological workforce meeting only 35% of demand nationally.

We know this problem extends to Victoria where access to psychologists is limited – particularly in the public sector. The most recent data available from the Psychology Board of Australia indicates that there is approximately 11,600 psychologists in Victoria¹ for a population of about 6.68 million. In addition, we are aware that the majority of psychologists work in the metropolitan area, with limited access in regional, rural and remote locations. Unfortunately, this is occurring at the same time as there is an essential need to address the growing demand for mental health support in the wake of the COVID-19 Pandemic.

What is preventing psychology workforce growth?

While the announcement of an additional 300 psychology positions across the next 4 years for mental health is welcome, and signals a clear acknowledgement of the need for more qualified psychologists, we are concerned that supply will not meet demand. That is, that there are not enough psychology graduates to address this gap. The underlying reasons for this include:

- Significant underfunding of post-graduate psychology courses, preventing growth in student places.
- A bottleneck that occurs in final year training places, where thousands of students are turned away after 4-5 years of study (anecdotally, one university had 1,000 applicants for 10 positions).
- A lack of placement opportunities and supervisors for post-graduate courses.

¹ <https://www.psychologyboard.gov.au/About/Annual-report.aspx>

The public sector – both health and mental health – provides important training opportunities for psychology graduates and is a key provider of placements for postgraduate students. However, there are significant challenges to supporting both new graduates and students on placement due to:

- Difficulty retaining psychologists until they are eligible to become a Board-approved supervisor (approx. 5-10 years post registration²). The salary differential between public sector roles and private practice settings (without established VMO-equivalent roles in psychology) potentially makes it difficult for the public/NFP sector to retain psychologists with significant experience.
- A lack of Ahpra-approved Board supervisors with the relevant endorsement (e.g., clinical, forensic, neuro, health, counselling psychology etc.) which means the public sector struggles to provide supervision for students, registrars and interns - impacting the workforce pipeline.
- More stringent requirements for the training of psychologists than for allied health, which is not reflected in current funding. Dedicated funding for psychology is required.
- No formal training support structure within the Department of Health for psychologists – unlike MOs and nurses.
- A lack of incentives for psychologists to undertake placements and work in areas of chronic workforce shortage such as regional, rural and remote locations, or where more vulnerable groups are likely to live.

Why is this such a problem now?

In the last two decades standards in psychology training have risen substantially:

- Psychologists are now required to complete 5 years of university training with a minimum 1-year internship, or 6 years university training, followed by a 2-year registrar program if attaining an Area of Practice Endorsement (AoPE), i.e., 6-8 years in total.
- Requirements to become a supervisor have also increased.
- The introduction of MBS rebates and NDIS for access to psychologists has occurred without adequate measures in place to prevent or address the predictable shift in workforce from public to private sector.

To meet registration requirements, psychology graduates must undergo up to two years of supervised practice with a Psychology Board of Australia-approved supervisor. Graduates often have to pay for this supervision, which can be financially challenging. Similarly, psychologists choosing to become supervisors have to undertake, and pay for, Board-approved supervision training, and subsequent Master Classes to maintain their supervisory status. Both the cost to become a supervisor, and the cost to receive supervision, can be prohibitive and, as a result, impact on the psychological workforce.

Psychology is the only profession to graduate ‘practice ready’ in mental health. We are less likely to burn out, and more able to treat complex, high acuity cases. Our training ensures that we are ideally suited to work and be retained in mental health and other areas of need, delivering tailored assessment and intervention strategies. This aligns well with the growing need for mental healthcare to deliver person-centred, high-quality services.

However, psychologists are currently struggling to keep up with the unprecedented demand for their services, and Victorians are finding it increasingly difficult to connect with a psychologist for the expert care they require. Nationally, 1 in 3 psychologists report having to close their books to new patients, and many patients are waiting up to six months or more to access care. If this situation is not addressed, access to evidence-based, high quality psychological assessment, diagnosis and treatment will be compromised.

Workforce solutions

There is an urgent need to support Victorian psychologists to undertake supervisor training, and new psychology graduates in Victoria to complete requirements for registration (either as a general psychologist or endorsed psychologist), to rapidly increase the psychological workforce. To achieve this, the Victorian Government needs to establish a placement model to maximise supervisor/trainee ratios regardless of location or sector.

² To become a Board-approved supervisor you must have held general registration as a psychologist for at least three years, and successfully completed [full training](#) with a Board-approved provider.

In addition, the Government needs to establish a psychology workforce initiative – including rural and remote incentives for psychologists, and incentives to ensure psychology supervisors take on interns and registrars, particularly in areas of workforce shortage - to guarantee that every part of Victoria has a psychology workforce in development. A state-based public sector salary loading to incentivise psychologists who agree to supervise additional students on placement is required. The APS provides Board-approved supervisor training program, and with the necessary funding, is in a position to activate a substantial number of psychology supervisors who could work in the public and private sectors.

Reduce wait-times with Digital Solutions

The evidence on digital delivery of healthcare in Australia, particularly within the context of the COVID-19 pandemic over the last few years, clearly shows that telehealth services have provided significant benefits for people experiencing mental ill-health. This is particularly true for Victorians living in regional, rural and remote locations, as well as those from vulnerable groups experiencing multiple forms of disadvantage.

Online service-delivery models including telehealth also enhance service providers' access and reach, offering opportunities to reduce costs by streamlining business processes. Feedback from our members indicates that better integration of telehealth, online and digital services into everyday practice will help psychologists reach more vulnerable groups and start to overcome the current maldistribution of psychological expertise in regional, rural and remote communities.

Pressures on the mental health system in Victoria have never been greater. Wait lists are a significant risk to the community and the economy. Often, the longer a patient waits, the greater the risk of a condition becoming chronic or taking longer to resolve – costing our health system significantly more in the long run.

- Nationally, 88% of psychologists' wait list times have increased in line with the pandemic.
- 59% of psychologists have seen a “dramatic increase” in their wait list times.
- 30% psychologists in Victoria are “no longer taking on new patients”. Before March 2020, only 1% of psychologists were not able to take on new patients.

Investing in enhancing the APS' 'Find a Psychologist' tool will make it easier and faster for everyday Victorians to connect with a psychologist in times of need. The APS can deliver a technology-enabled platform that simplifies and streamlines the ability of Victorians to find and connect with an available and appropriately qualified psychologist, regardless of location. Currently the best single point of access for people looking for a psychologist, with the right support, 'Find a Psychologist' could be enhanced to provide additional services and benefits.

'Find a Psychologist' technology is able to provide a bespoke option for Victorians to have easier access to psychologists, and a 'virtual waiting-room' that is mobile-enabled, portable and timely. KPMG has independently audited the APS' technology strategy (May 2021), concluding that we have a highly experienced and qualified team of people at the helm of the Psychology Digital Futures Office. This, combined with our role as the lead organisation for psychological health in Australia, ideally positions the APS to develop this tool. The reach of our psychologist member network helps more than half a million Victorians each year, and with the right support to build Find a Psychologist, we can reinforce and extend this reach.

'Find a Psychologist' technology enables people to:

- Connect with an available psychologist the same day with our virtual waiting room technology,
- Find a psychologist with the right expertise the first time,
- Connect to a telehealth provider across the State,
- Utilise their mobile to connect, and
- Avoid entering through the 'wrong door' with links to the head to health website, urgent care centres, etc.

Develop health/university workforce partnerships

The psychology workforce can be supported by increased funding for psychology training by linking the public health system with universities through conjoint positions:

- As stated above, a bottleneck occurs in final year psychology training.
- Currently, final year university courses are funded below cost and below that of allied health who do not have minimum supervision requirements, ratios and staffing qualifications.

- This means for every student taken on for their final year, the university is in greater debt. This is also why many AoPE psychology postgraduate courses in Victoria have or are closing.
- To help overcome these issues, we recommend providing health and/or education conjoint university staff positions (as occurs in Medicine).
- University positions could be funded by the Victorian Government and co-located within the public health (or education) system and universities – forming a bridge between final year trainees on placement and tertiary institutions.
- This would require a minimum number of placements guaranteed to allow certainty so courses can increase capacity/places. Such partnerships would embed a workforce pipeline in the public health system.
- Health/university partnerships would guarantee the quality of supervision and reduce the burden on health workers who often have their own caseloads, by ensuring a university support system and co-supervision provided by the conjoint university staff.

The results of these partnerships would be:

- A public sector workforce pipeline with all psychology students having a placement within the public system during their training, and
- Subsidised university programs to allow for growth in the number of training places available.

Such a model already exists in Tasmania, which is the only state in Australia experiencing a year-on-year increase in the number of graduating psychologists with advanced training. The number of universities in Victoria places this state in a unique position for an opportunity to grow the psychology workforce and be the envy of all other states.

Appoint a Victorian Chief Psychologist

- A Victorian Chief Psychologist would allow for the connection of psychologists across services and sectors and ensure that efforts to retain and attract psychologists are successful into the future.
- This role would also oversee the conjoint university positions and facilitate ties with the tertiary sector.
- Workforce solutions are often short-term and do not deliver long term results. A Chief Psychologist would ensure psychology workforce solutions are embedded into Victoria Health: future proofing workforce strategies and ensuring genuine change and access to psychologists well into the next decade.

The outcome of appointing a Chief Psychologist would be workforce growth and retention in the public sector via the support of multidisciplinary team-based care with psychologists working to the top of their scope of practice in collaboration with other health and mental health professions and peer workers.

Psychology Training

Victorians should be able to access psychological support to ensure all aspects of their mental health and wellbeing needs are being met. The health system is in desperate need of more psychologists, yet Victorian universities are not funded or supported to offer places (particularly Commonwealth Supported Places) due to increased financial losses. The impact of COVID-19 has further increased this pressure and has led to drastic staffing reductions, reduced places, and even more potential course closures. Diversity in the psychology workforce is being lost as access to training in Victoria and nationally in Master's Programs in Areas of Practice Endorsement (AoPEs), which are associated with advanced knowledge and competencies, is reduced³.

Australia risks falling behind other countries with regard to these diverse areas of psychological expertise, with many having a direct impact on the risk of mental ill-health and suicide in various settings, including hospitals. As long as the Federal Government ignores this situation, workforce shortages will continue to be experienced by Victoria, with ongoing negative consequences for patient outcomes.

³ Wong, D., Davis-McCabe, C., Wrench, J., Lawrence, K., & Burton, L. (2022, September 21). *We can't solve Australia's mental health emergency if we don't train enough psychologists*. The Conversation. Here are 5 fixes <https://theconversation.com/we-cant-solve-australias-mental-health-emergency-if-we-dont-train-enough-psychologists-here-are-5-fixes-190135>

This dire situation can be addressed through both innovative solutions and by urgently scaling up the workforce through increased funding and opportunities for tertiary training for psychologists. The Victorian Government needs to call on the Federal Government to:

- Fund universities to reinstate and/or develop appropriate Master's Programs (both MPP and, in particular, for AoPEs) to ensure adequate diversity and expertise within the psychology workforce.
- Shift the banding for psychology training to be equivalent with General Practice, Medical Studies, Agriculture and Veterinary Science in Funding Cluster 4, to incentivise universities to train more psychologists.

Demands on the health and mental health systems in Victoria have never been greater. The APS plays a pivotal role in supporting mental health and general wellbeing, and our downstream impact, through our network of members, reaches millions of Victorians and their families each year. The workforce challenges facing our profession, and the health and mental health systems in Victoria, need to be urgently addressed to ensure the increasing demand for services can be met.

Thank you again for the opportunity to provide a submission to the Health Workforce Strategy consultation. If any further information is required from the APS, I would be happy to be contacted through the National Office on (03) 8662 3300 or by email at z.burgess@psychology.org.au

Kind regards

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President

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