



The New Zealand Psychological Society

*Te Rōpū Mātai Hinengaro o Aotearoa*

# **The New Zealand Psychological Society's**

**BRIEFING FOR THE MINISTER OF HEALTH  
AND THE  
ASSOCIATE MINISTER OF HEALTH**

**April, 2009**

# Executive Summary

The four most important issues the New Zealand Psychological Society (the Society) would like to engage with you in relation to psychologists and the delivery of mental health services are:

- Access to psychological services
- The psychology workforce
- Psychologists' access to ethical committees
- The Trans Tasman Mutual Recognition Act

The Society is supportive of the primary health care strategy and believes that psychologists can make an important contribution to the ongoing development and success of this strategy. The Society believes that there is greater potential for multidisciplinary collaboration in primary care particularly in relation to the provision of psychological services and general practice.

The Society is committed to assisting with the issues identified in this paper by providing timely advice and expertise when you request it. We are able to offer you

- Access to the expertise of psychologists in mental health and other areas
- Feedback on what is working well in the health sector in relation to psychological services and constructive suggestions in addressing areas of concern

The Society welcomes opportunities in the future to engage with you about new policy and service delivery initiatives, quality issues and the management of risk.

This briefing relates to

- The four key issues identified above
- The valuable contribution psychologists make to the health and wellbeing of New Zealanders
- Actions which could be taken to address the issues identified

## **Introduction**

The New Zealand Psychological Society is the largest professional association for psychologists in New Zealand with over 1000 members and subscribers. The Society aims to improve individual and community wellbeing by supporting psychologists in their work and advancing the scientific discipline and practice of psychology.

The purpose of this briefing paper is to provide the Associate Minister of Health with information about the psychology workforce and the ways in which it contributes to the delivery of health services. The paper also outlines a range of workforce development issues and suggests ways to address these concerns.

The Society is committed to assisting the Associate Minister in any way that is helpful to resolve the issues below and any other issues which impact on the provision of psychological services.

## **Context**

Psychologists require post-graduate qualifications in psychology and must be registered with the NZ Psychologists Board. There are currently two specialist scopes of practice clinical psychology and educational psychology.

Psychologists make a valuable contribution across the health, welfare, justice, education and local body sectors. They are employed by a range of public sector organizations including DHBs, Ministry of Health, Ministry of Education, ACC, Corrections, Child Youth and Family, amongst others. A number of psychologists are self-employed.

Psychologists are playing an increasingly important role in the health sector, especially in primary mental health care.

## **Improving Access to Psychological Services**

The Society supports initiatives to improve public access to psychological services and early intervention for mental health issues. Psychologists already play an important role in the assessment, treatment and monitoring of patients with mental health conditions as part of multidisciplinary teams. The Workforce Taskforce Report (May, 2008) recognized psychologists as part of the multi-disciplinary team for the primary mental health care strategy.

PHO contracts play a part in ensuring access to psychological services but we are concerned that there are situations where the contracted number of sessions are too limited to provide effective treatment for patients.

Psychologists have the potential to play a greater part in contributing to primary mental health care. Policies and funding which improve access to psychological services will assist the workloads of an overstretched general practice workforce.

## Suggested Solutions

- *Access to mental health services could be improved by patients having subsidized, direct access to services provided by psychologists rather than needing to be referred through a general practitioner or other agency.*
- *We would like to see a more research-based approach with PHO contracts reflecting current evidence on the recommended number of sessions for effective therapy.*

## Workforce Development Concerns

The Society wishes to draw your attention to workforce development issues related to psychologists and in particular shortages of psychologists in DHBs. These along with possible solutions are summarized below.

### General Workforce Development Issues

It has been identified that there is a shortage of practicing psychologists in New Zealand. For example, the New Zealand Immigration Service has both clinical psychologists and educational psychologists on its “long-term skills shortage list”. Another area of considerable concern is the continuing lack of psychologists from culturally diverse groups. Workforce development data points to a particular shortage of Māori and Pacific psychologists.<sup>1</sup>

### Suggested Solutions

- *A cross-sector workforce development strategy needs to quantify the shortage of psychologists across the health and welfare sector and ensure that there are sufficient university places, clinical training places and staffing establishments to meet the psychological health and welfare needs of New Zealanders.*
- *Reducing barriers for Māori and Pacific students to participate in psychology and provide incentives for postgraduate training in all areas of psychology<sup>2</sup>*
- *Working with TEC to lift the cap on undergraduate places in psychology*
- *Providing student loan relief for psychologists who take up positions in areas of health need*

### Specific Workforce Development Issues

A recent survey of members carried out by the NZPsS suggests that there is a serious shortage of psychologists working for DHBs resulting in unacceptably long waiting lists and lack of adequate follow-up of clients. This not only impacts on the wellbeing of

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<sup>1</sup> He Pa Harakeke: Maori Health Workforce Profile-Selected Regulated Health Occupations, 2007

<sup>2</sup> Levy, M. (2002). *Barriers and incentives to Maori participation in the profession of psychology*. Wellington: New Zealand Psychologists Board

individuals and families but is also likely to increase health costs when a client's mental health status worsens and they require additional health care.

There are situations where in order to manage workloads, the criteria for clients to access services are defined so narrowly as to exclude many who would benefit from mental health services. There are also limited opportunities to intervene proactively to prevent the development of more serious mental health issues.

## Suggested Solutions

*DHBs need to be supported in developing their psychologist workforce. They can do this by*

- *Developing a workforce development strategy to increase the numbers of psychologists employed and ensuring that psychologist positions are filled by psychologists*
- *Ensuring that there are sufficient funded training places in DHBs for clinical psychology interns to undertake clinical work as part of their training*
- *Ensuring that there are processes put in place to facilitate the equitable allocation of training places in DHBs*

## Other Issues

### Access to Ethics Committees

The Society is very concerned that psychologists undertaking research who are not affiliated with a university or whose research is not deemed to be health or disability related research are not able to have their research reviewed by an accredited ethics committee.

Health and Disability Ethics Committees (HDECs) are currently the only accredited non-institutional ethics committees and are the responsibility of the Ministry of Health. Lack of access to ethics committees creates a significant difficulty for psychologists and those participating in research. It impacts on a broad range of psychologists who work in areas such as education, forensic, community, counseling, industrial/organizational and in NGOs, private practice and government departments etc.

For those receiving psychological services; there can be a constraint on available interventions and it is less likely that interventions developed overseas can be safely tested and adapted for local conditions. It also reduces the opportunities for clients to affect wider psychological practice. For practitioners it creates a double jeopardy; they could face a complaint for practising without or beyond a relevant evidence base and, were they to attempt to address that evidential lack, could face a complaint for undertaking research that had not received ethical approval.

## Suggested Solutions

- *There is scope to broaden the base of research dealt with by the HDECs as all psychologists are covered by the HPCA*
- *There is also scope for existing research ethics approval processes e.g. application processes to be streamlined in the interests of facilitating the further integration of research into practice.*

## Trans Tasman Mutual Recognition ACT (TTMR)

The profession is concerned about the misuse of the TTMR Act and supports the Psychologists' Board's in seeking changes to the Act that would make it mandatory for an applicant to have worked as a registered health practitioner in a TTMR jurisdiction for at least six months before being able to use that registration as a basis for registration under the TTMR Act.

This would stop applicants from circumventing legitimate registration requirements that have been put in place to protect the public, while not compromising the principles or purpose of the TTMR Act.

## Health Practitioners Disciplinary Tribunal

The Society is concerned at the low costs awarded by the HPDT which places the onus on individual psychologists to pay the difference. We believe that a more equitable solution would be to increase the level of costs awarded.

## Responsible Authority-Psychologists Board

The Society is supportive of the Psychologists Board remaining a stand alone Board. We believe that the Board's ability to focus solely on psychology issues assists its functioning given that the psychology profession itself is made up of a wide range of occupational groups.