

# NEWSLETTER

## Message from the Chair

Welcome to 2009...I hope that you are rested and can still remember what fun you had at Christmas. Your Branch has made a great start to the year. I am very pleased to have a new committee with ideas and energy that will continue the pattern which sets this Branch apart from many others in Australia. They say that volunteering to work for communities and organizations is dying. Certainly this will be in the agenda at the National meeting of Branch Chairs that I will attend on your behalf from 8 to 10 February in Melbourne. Meanwhile, as you will see in this newsletter we have a lot planned for you.

If there is anything that you would like me to check out or raise in Melbourne, now is the time to tell me. I will be at the Branch meeting on 4 Feb, but a phone call sooner would be better. Call me on 0402113220. It is important for you to know that the structure of the APS at a Branch level is under review. That means we are all invited to think about how to make a national body responsive, relevant, effective, and economical – all at the same time from the grass roots up, not just the top down.

Gaye Foster has begun the work needed for us to produce a new directory of local psychologists. Details are in this newsletter but expect an email inviting you to be listed on a local directory very soon.

I think this will be an important year for us locally to see how we respond to the range of social and professional issues that will arise. We live in troubled & challenging times and our capacity to work within all the dimensions that define human nature ought to be tested. Trying to single out one dimension, - the biological, the social, the spiritual or the psychological is a recipe for frustration & conflict.

I commend to you the calendar of events that we will present to you in 2009. The IPT workshop in May will be highlight, but every branch meeting is a highlight, as well as the peer support groups and other ways in which we support and challenge each other.

We kick off the Newsletter with a special feature article by Kelly Callaghan. Thank you Kelly for sharing your experience and impressions with us.

My thanks to Maggie Bailey & Kay Manning for keeping the show alive, and a special thanks to all the new committee members – we have a great team working for you.

Brad Levingston

### Notice board

We will continue and hold the general meetings this year every second month. Please note that the meeting time has changed to the first Wednesday of the month. The proposed dates have been included for your information in the Calendar of Events section. Unless otherwise specified the meetings will start at 6.00pm and will be held at Percy House, Church Street, Maroochydore. Nevertheless, we are exploring other venues. The Committee will be meeting formally on the alternative months to the general meetings. Please let us know if there are any issues that you would like to raise.

As you maybe aware, there is a brand new committee this year. I will hope to introduce everyone individually in the forthcoming issues of the Newsletter.

The APS Sunshine Coast branch is preparing a directory of local Psychologists to inform medical practitioners and other professionals about the range of services we provide & where. The directory will be available on line via the Division of General Practice and in hard copy form. You are invited to complete this online questionnaire. We will inform you of the posting via email in the forthcoming weeks.

Our first general meeting will be on the 4th of February. We hope to have the Division of general Practice representative speak about the iHealth Care. We also hope to have an update from Brad and Kelly on the Partners in Mind project. We look forward to seeing you soon.

### Happy New Year!

I hope that it has been a good start to the year for you all.

The memories of the festive season are still with me. The SCAPS Christmas functions has been a great success. The evening was a lovely affair. We met new faces, talked over a drink and tapas, and danced to the funky jazzy beat of the Amazon Blue duo Fran and Gaz.



But you can be the judge...

The SCAPS Committee has plenty of great things planned for the 2009 so please stay in touch.

Cheers

maggie

# Bridging Medicare

When the Commonwealth government introduced new mental health care items under the Medicare Better Access programme in November 2006 I was pleased because it meant that more people would have access to psychological therapy whether from a registered clinical psychologist or a registered general psychologist. However, having already completed a masters degree I was disappointed that the new specialist items did not recognize membership of colleges other than the Clinical College therefore I set about applying to the APS Medicare Assessment Team for recognition of my now, 20 year old masters degree, 20 years of experience and membership of the College of Educational and Developmental Psychologists. This was where the fun and hard work began! It took me months to compile the documentation on my clinical experience, knowledge and acquisition of skills. The bulky package was sent to the APS Medicare Assessment Team in June 2007 and I had an answer in November 2007.

The news was not good. I would have to complete three subjects (psychopathology, assessment and psychological therapy) within an accredited Clinical Psychology Masters programme plus either undertake a self-directed programme and paper on pharmacology or a course on pharmacology and further supervision (20 hours clinical and 5 hours on pharmacology). This bridging programme appeared like Mount Everest. My initial reaction was fear; should I put my reputation on the line? What if my knowledge is found wanting; after all, psychological knowledge has a limited life span and I had not studied since 2000 when I had taken on a Masters in Organisational Psychology. I felt like I had to prove myself all over again with the big risk of both personal and professional failure!

Finding a university to accept me, either as a visiting student or within a clinical programme, was incredibly difficult and frustrating. I approached all the universities in Queensland; some were brutally rude, others ambivalent. The main priority was full time students, so I had to wait and see if there would be space in 2008. Eventually I was lucky enough to find a university that would consider me if I could get the permission of each lecturer. I would need to meet all the requirements of the course. So it began. Yes, I would bring my own test equipment. Yes, I would attend a minimum of 80% of lectures and yes, I understood that there would be absolutely no favours or special consideration.

To say that it was grueling is an understatement. I attended lectures for two days each week and worked in my practice for three days. Thankfully my colleagues were able to help out with clients and tasks that I could not get done. Weekends and evenings did not exist except for required reading and assignments. Most of my classmates were young enough to be my children but some were in similar situations to me so I was lucky enough to find a peer and study group. We were all frantically busy trying to watch videos, practice skills, do class presentations, hospital or community visits and pass regular tests. Omega 3 was my friend!

The next hurdle was to find a clinical supervisor. Fortunately, Dr Janet Roth, was kind enough to take me on and to share her wisdom and encouragement. Almost 12 months to the day I was able to submit evidence of a completed bridging programme to the assessment team and shortly after was accepted into the College of Clinical Psychologists.

So how does this change my situation? Will I charge a higher fee? No, I believe in the value of psychological therapy and want this to be accessible to all people especially in hard economic times but I will get a higher rebate if I bulk bill. Do I practice differently? Not greatly, I still enjoy using CBT but I have updated a lot of my resources and protocols which flows onto therapy and I am more cautious with assessment. Do I think differently about my clients? To this I would have to say; yes. I am grateful to Dr Schweitzer for his teachings in psychopathology not because of any great discovery in the DSM-IV-TR but for helping me to think differently about the etiology of disorders and to remind me of the importance of paying attention to a person's suffering and the meaning of their symptoms.

Having completed the bridging programme, I can now speculate about better ways for experienced psychologists to upgrade their skills and the challenge to universities to provide bridging programmes outside the standard clinical psychology programme. From discussions with colleagues and my own experience, it appears that there is a need for universities to offer this type of programme and that a format that provides intensive lectures for a short period followed by self-paced learning and assignments may better suit the working psychologist. The electronic systems in universities make accessing information incredibly easy. No more waiting a week for that article or book to be sent from another library.

Chat rooms and video links also provide a wealth of learning opportunities and virtual classrooms that can be accessed at leisure. Virtual or video-linked classroom could lessen the financial burden of being out of practice, travel costs and problems with distance that face so many of us in Queensland.

Finally, it would be of great benefit for registered psychologists to learn with a cohort who can bring their experience as therapists into the classroom and take the learning to a deeper level. Many of the students in a master's programme may have progressed from their fourth year without having undertaken practical experience, so most learning has to begin at an introductory level. Reading about therapy and working in clinical practice are certainly very different.

Given the shortage of clinical psychologists, it appears to me that up-skilling registered and experienced psychologists, especially those who have already completed a masters degree in another area of specialization, is far more cost effective than training a new graduate. In particular, I empathise with my colleagues of the Colleges of Counselling and Neuropsychologists' who may have a wealth of clinical skills and experience and knowledge but are treated less favourably under the two-tiered Medicare system. I do hope that others will consider bridging programmes and that the universities will adapt their programmes to cater for psychologists to upgrade their skills.

Kelly Callaghan  
Clinical Psychologist (just!)

### Your committee

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Please email newsletter contributions to  
mb@maggiebailey.com.au



From left, Gaye, Kathy, Sally & Di

#### Office Bearers for 2008 – 2010

As a committee we will also meet on the second Tuesday of each alternative months – so please contact us if there is anything you would like to raise with us. Your committee contacts are:

Chair	Brad Levingston	brakerry@optusnet.com.au
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### Calendar of events

Date	Topic	Presenters
4 February	iHealth Care Partners in Mind	Division of General Practice Brad Levingston & Kelly Callaghan
1 April	PsychPack	Wally Howe
18 May	Interpersonal Therapy Full day workshop	Paul Rushton
3 June	Mindfulness	Todd Zemek
5 August	TBA	Angela Huntsman
30 Sep- 4 Oct	APS Annual Conference Darwin	
7 October	Hepatitis and depression	Sally Rostas
December	Christmas function	TBA