Dear Sir/Madam

RE: SENATE ENQUIRY INTO MENTAL HEALTH

Thank you for accepting my submission. I believe I am representative of a member of the Counseling College. Further as can be seen by my submission I am well placed to comment on the appropriateness of dismantling the two tiered approach to Medicare. I also believe I am qualified to comment on the appropriateness in some cases maintain an option of extending the amount of sessions for individuals with complex presentations.

I have been a psychologist for many years hence I will only be able to include a snapshot of my recent experience. Further I am more than happy to supply supportive documentation for any part of this submission.

I am presently employed at Barwon Health as a Senior Psychologist. My position at Barwon Health includes the supervision of all psychologists employed in the Community and Rehabilitation Sector. I further supervise Clinical Masters Students in their final placement from the Universities of Ballarat and Deakin. I systematically supervise a variety of other clinicians including:

- Psychiatric Registrars in their major cases;
- Psychiatric Nurses;
- State Registered Nurses;
- Social workers;
- I also provide supervision for the Senior Occupational Therapist and for the Aboriginal Worker.

I provide specialist supervision on multiple subjects to a variety of groups for instance:

- The Psychiatric Registrars;
- General Practitioner’s; and
- Allied Health Professionals.
Recent subjects included for specialist presentations to the above individuals/groups have been:
- Trauma related disorders;
- Personality disorders and transference; and
- The neurobiological underpinnings of various disorders.

My position also requires me to act as a consultant to various individuals and groups including:
- Mental Health Teams;
- Community Health Teams;
- and Rehabilitation Teams.

Additional to my position at Barwon Health I have held various other positions. One in particular is pertinent to this submission. I have been employed as a lecturer. In 2008 I held the position of Unit Chair/Senior Lecturer of the Psychological Trauma Unit in a Masters of Psychotherapy Program at Ballarat University. This position included:
- The writing and presentation of 6 comprehensive modules on psychological trauma; the neurobiological underpinnings and evidence based treatment. A very basic view of the modules is as follows:
  - An overview of acute stress
  - Various other trauma responses
  - Post traumatic stress disorder
  - Dissociation
  - Various forms of traumatic events
  - Attachment and trauma
  - Memory and trauma
  - Evidence based practice

In 2009 to 2010 I presented 6 lectures on Cognitive Behavioural Therapy 4th Year Psychology Students at Ballarat University. Intermittently I have marked assignments as well as audio materials, such as videos of clinical assessments and interventions of Clinical Masters Students at Ballarat University.

In 2011 – as part of the Clinical Masters program at Ballarat - I wrote and presented 4 three hour lectures for the clinical masters program. All lectures included:
- Diagnostic criteria
- Differential diagnosis
- Treatment
- Evidence based practice including pharmacological interventions.

The subjects were as follows
- Mood disorders
- Anxiety disorders (except trauma)
- Personality disorders
- Trauma related disorders

It is my opinion that the division between colleges is arbitrary. Consequently the public is given an erroneous perception that one group is superior to another. In my experience this is based on a faulty premise. If a difference is evident it is minor and is that some counseling psychologists may have more training in treatment. The division is supposing that there are specialties as evident in medicine there is no such specialty in psychology.
I have supervised many psychologists and students and I see no difference in competence between those belonging to either college. Rather difference in proficiency is based on individual experience, personal aptitude and a passion to learn particularly after completing degrees. I am very concerned as the division is risking diminishing the profession as a whole by limiting the cross pollination of information. Instead of all students and psychologists receiving a richness of information and sharing supervision and support they are being limited and personal and professional growth is consequently inhibited.

As can be seen from above I have a particular interest in Trauma, I believe psychology has a major part to play in treating those who have been affected by trauma and the consequent complex psychological presentations. However the treatment of complex presentations can rarely be adequately treated in 10 sessions. Neither medication nor mental health teams alone can facilitate the process required to achieve positive outcomes for these individuals. Hence I support the maintaining the option of 18 sessions when required.

Yours sincerely

Jane Whitmore
Counseling Psychologist