

Public consultation: A code of conduct for psychologists

The Psychology Board of Australia (the Board) is seeking your feedback about our proposal to update the code of conduct that applies to all psychologists registered in Australia. There are 13 specific questions we would like you to address below. All questions are optional and you are welcome to respond to any that you find relevant, or that you have a view on.

Please email your submission to: psychconsultation@ahpra.gov.au

The submission deadline is close of business, **Monday 14 August 2023**

General questions
1. Do you support the Board's preferred option to implement a regulatory code of conduct?
<p>Your answer:</p> <p>We support the Board's preferred option to implement a regulatory code of conduct. We believe this is long overdue. It makes sense for the regulatory body to be the "holder" of the regulations through which the outcomes of complaints are determined.</p>
2. Do you agree with the Board's approach to develop the draft Psychology Board of Australia code of conduct based on the shared Code of conduct?
<p>Your answer:</p> <p>We agree with the Board's approach to develop the draft Psychology Board of Australia code of conduct based on the shared Code of Conduct. This will ensure that psychology is aligned with other health professions with whom we engage in interprofessional practice. In other words, psychologists will often work within multidisciplinary teams with other health professionals and alignment of our codes of conduct will support client care and safety.</p>
3. Do you support the Board's proposal to adopt the draft Psychology Board of Australia code of conduct as the regulatory code for the psychology profession?
<p>Your answer:</p> <p>We support the Board's proposal to adopt the draft Psychology Board of Australia code of conduct as the regulatory code for the psychology profession. As a higher education provider who is accredited to teach ethics and professional practice to our psychology students across all levels, our teaching has been impeded when much of the guidance has been provided by the Australian Psychological Society as member-only resources.</p>

Content of the draft Psychology Board code

4. Does the draft Psychology Board of Australia code of conduct set the minimum standards expected of psychologists by their professional peers and the public?

Your answer:

We agree that the draft code of conduct sets the minimum standards expected of psychologists by their professional peers and the public.

5. Are there any specific areas of psychological practice that are not adequately addressed in the draft Psychology Board of Australia code of conduct?

Your answer:

We note frequent reference to the safety of psychological services (over and above the need for cultural safety which is defined in the code on page 8). We recommend that safe practice in general is defined within the document. For example, risk mostly refers to risk of suicide or self-harm, which is a risk of physical harm. But do we want to include psychological risk and psychological safety?

There is no mention of the role of ongoing clinical supervision and instead the focus is on consultation with senior psychologists or peers. We believe that there should be more explicit mention of ongoing clinical supervision, which is unique from mentoring or consultation, and as the place where ethical issues can be discussed on a regular basis.

We believe that the code should have more explicit reference to emerging AI technologies (e.g., ChatGPT) particularly in reference to report writing, and risks to privacy and confidentiality of client information.

There is one reference to fees under **4.2 Informed consent**. We believe that psychologists also need to be warned to be careful with credit card data as keeping this information on file is a data security risk for clients. There should also be guidance focused on unethical practices such as charging in advance of a service being conducted, and charging “no-shows” in the absence of consent being signed.

6. Are there any sections of the draft Psychology Board of Australia code of conduct that would be unworkable for your organisation and/or stakeholders?

Your answer:

We agree with the need for clear and strong privacy and confidentiality standards. However, as a higher education provider (in reference to 3.3.i) is there flexibility, where a student is required to use non-identifiable client information for assessment purposes, in cases where they may no longer have access to the client and where verbal consent is not possible?

7. Is the language and structure of the draft Psychology Board of Australia code of conduct helpful, clear and relevant?

Your answer:

We found the language and structure of the code of conduct helpful clear and relevant. We noticed some repetition across the code (e.g., frequent reference to the need to address the specific needs and circumstances of clients) but wondered whether this was intentional.

Community impact

8. Would implementation of the draft Psychology Board of Australia code of conduct result in negative or unintended effects for Aboriginal and Torres Strait Islander Peoples? If so, please describe them.

Your answer:

We respectfully defer to our Aboriginal and Torres Strait Islander colleagues to provide comment on this item.

9. Would endorsement of the draft Psychology Board of Australia code of conduct result in negative or unintended effects for other diverse groups or vulnerable members of the community? If so, please describe them.

Your answer:

We are not aware of any negative or unintended effects for other diverse groups or vulnerable members of the community.

10. Would endorsement of the draft Psychology Board of Australia code of conduct result in any adverse cost implications for health practitioners, higher education providers, employers, clients/consumers, governments or other stakeholders? If so, please describe them.

Your answer:

1.4 Helping in emergencies. We don't understand this standard and question the rationale for its inclusion. We are concerned for example about the risk of providing psychological care in emergency situations in the absence of a proper assessment. If this is deemed an important standard, more explicit guidance is required.

Transition and implementation

The Board is proposing to publish an advance copy of the draft Psychology Board of Australia code of conduct **12 months** before it would come into effect.

11. Do you agree with the proposed transition timeframe?

Your answer:

We see no problem with the proposed transition framework.

12. Would there be any implementation issues for your organisation and/or stakeholders that the Board should be aware of?

Your answer:

Higher education providers may require additional resources to pivot their curriculum to the new code of conduct.

General feedback

13. Do you have any other feedback or comments about the draft Psychology Board of Australia code of conduct?

Your answer:

We noted a similarity in headings **1.1 Providing safe and effective psychological services** and **1.2 Safe and effective psychological services**. We recommend changing 1.2 to '**Safe and effective psychological practice**'.

4.7(b) Maintaining continuity of psychological services. It seems unreasonable to expect a psychologist to make plans for continuity of service to a client if they are dead. I wonder if this is referring to an instance in which the psychologist is unwell and likely to die, but this would be covered by "illness".

5.3 Discrimination, bullying and harassment. We recommend a more explicit distinction between problems that will be better managed by workplace HR processes and situations that will lead to a notification of an individual practitioner to AHPRA. Is there a danger of parallel processes being run in two settings? A more explicit distinction is consistent with the information provided in the Preamble that the code is not intended to address employment issues (p 5).

This also applies to **7.2 Psychologist Performance**. We recommend clarification around when a performance issue is a workplace issue versus professional standard issue.

6.3 Psychological health and wellbeing b. participate in efforts to promote the psychological wellbeing of the community. Is this standard focused on the ethos that all psychologists should be contributors to the community? While we appreciate and support this sentiment, we wonder how it will be regulated. This community mindedness ethos might be better directed towards ensuring that our psychological services are accessible and equitable to all members of the community,

particularly those who cannot easily access care (e.g., bulk billing expectations for people with low SES).

We strongly endorse the need to instil the idea that psychologists need to maintain the reputation of the profession in the eyes of the community when we are in our personal lives.

8.8 Legal, insurance and other psycho-legal assessments. We are concerned with the statement that under third-party contracts, that the usual psychologist-client relationship does not exist. While point 'g' talks about the duty of care should a practitioner discover an unrecognised, serious health issue, we believe that there needs to be a wider duty of care in undertaking this work. A legal representative is unlikely to recognise situations where their client's psychological safety is at risk.

8.9 Reports, certificate and giving evidence, c. be honest about your qualifications... We recommend more explicit reference to being transparent. In other words, no omissions that might lead people to make assumptions. Examples include cases where the report writer is the client's treating clinicians or where a Dr title is used in the absence of stating this is based on the completion of a PhD.

8.9 Reports, certificate and giving evidence, g. give honest and unbiased reports and evidence ... We recommend a further statement is made to support psychologists who may need to be more circumspect in cases where the release of information is against the interest of their clients. On occasion requests from legal teams are vexatious and designed only to intimidate.

8.11 Investigations. We recommend that there should be more guidance on what level of seriousness or urgency of any action that might be taken against a psychologist should lead to a psychologist seeking legal advice. For example, a tribunal hearing, S150 immediate action hearing, or coronial inquiry have the potential for serious consequences for the psychologist and legal advice is recommended. However legal advice in cases where a psychologist is providing information about a complaint that is likely to result in counselling is not necessary and costly to the psychologist. On the other hand, a psychologist needs to inform their professional indemnity provider following the receipt of any complaint or notification.