

New Zealand Psychologists Board

A Developmental Approach to Scopes of Practice

*For Psychologists registered under the
Health Practitioners Competence
Assurance Act (2003)*

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1.0 INTRODUCTION

The Health Practitioners Competence Assurance (HPCA) Act¹ was passed on 18 September 2003, and comes into force on 18 September 2004. The Act includes the practice of psychology within its framework. It requires all persons describing themselves as a psychologist to be registered by the New Zealand Psychologists Board and to work within a defined scope of practice.

The principal purpose of the HPCA legislation is to “protect the health and safety of members of the public by providing for mechanisms to ensure that health professionals are competent and fit to practise their profession”.

In anticipation of this legislation, the Psychologists Board had consulted extensively with the New Zealand Psychological Society and the New Zealand College of Clinical Psychologists, and in conjunction with them had developed a proposal for multiple scopes of practice intended to encompass a range of activities undertaken by psychologists. This proposal, circulated in July 2003 has been the subject of a considerable amount of debate and discussion about the nature and number of scopes that should be introduced. We wish to thank all those who made submissions to the Board. The feedback about these issues has led to modification of the Board’s proposal.

It can be argued that the public encounters the practice of psychology in three main contexts. These are:

1. Practice directed at maintaining and enhancing health, well-being and development.
2. Practice directed at groups, organisations and communities.
3. Practice directed at advancing and communicating the knowledge base of the science.

There are varying degrees of risk to the public across these domains. The challenge for the Board is to ensure that there is adequate room to include all areas of psychology with a degree of risk to the public, whilst also providing protection for the most vulnerable groups in the public.

The Board proposes to implement two main types of scope of practice, a “**general**” scope and a “**vocational**” scope. Initially two vocational scopes will be specified. Scopes of practice can be changed easily, and it is expected that other vocational scopes may also be developed in future.

¹ Hereinafter called "the Act"

All psychologists will be registered within a general scope, and those working in defined branches of psychology may also hold also hold a relevant vocational scope of practice. Psychologists may have more than one vocational scope of practice, and may change their vocational scope if the Board assesses their qualifications and/or experience as being appropriate for the changed vocational scope. The Board also proposes to introduce a ‘limited’ scope to enable it to register psychologists who are undertaking supervised practice for the purpose of achieving full registration.

The Act provides for protection of title. The descriptors “Psychologist”, “Educational and Developmental Psychologist”, and “Clinical Psychologist”, (and any other future vocational scope descriptors), will be able to be used only by those registered with an appropriate scope or practice. This will not preclude others from using related terminology (e.g. “Lecturer in Psychology” will not be affected by the Act).

2.0 PROPOSED SCOPES OF PRACTICE

2.1 A “GENERAL” SCOPE

The practice of psychology within a general scope is defined as rendering or offering to render to individuals, groups, organizations or the public any psychological service involving the application of psychological knowledge, principles, methods and procedures of understanding, predicting ameliorating or influencing behaviour, affect or cognition.

Qualifications

Psychologists with a general scope of practice will have a minimum of a Masters degree majoring in psychology from an accredited² educational organisation, or an equivalent qualification. Eligibility for a general scope of practice shall also require a Board approved one year practicum or internship involving 1500 hours of supervised practice.

2.2 A “VOCATIONAL” SCOPE OF PRACTICE

The Board believes that it is in the interests of the public (especially vulnerable persons) to be able to identify which psychologists are most qualified to help them in areas of practice that carry particularly significant risks, and that scopes of practice are one way of enabling clearer communication about this. By specifying vocational scopes for those psychologists working with consumers at higher risk, it is able to prescribe particular qualifications, competencies, experience and mechanisms for maintenance of professional standards for psychologists working in these areas.

The Board proposes to take a developmental approach, beginning with the higher risk parts of the profession, whilst anticipating that other vocational scopes may be added in future.

2.2.1 EDUCATIONAL AND DEVELOPMENTAL SCOPE OF PRACTICE

Educational and developmental psychologists apply psychological knowledge and theory to assist children and adults with developmental concerns pertaining to their behaviour, social learning and other issues that have an influence on their adaptation, through using systemic, developmental and ecological approaches and applying psychological and educational assessments and interventions.

² “Accredited” here and in subsequent references means accreditation of the educational organisation, or an educational course, by the New Zealand Psychologists Board for the purpose of registering psychologists. The Board will consult with tertiary education providers in the coming months in order to determine processes for accreditation.

Qualifications

To work within an educational and developmental scope of practice, psychologists will have a minimum of a Masters degree majoring in psychology from an accredited educational organisation and an accredited Postgraduate Diploma in Educational Psychology (or equivalent qualification), which shall include 1500 hours of supervised practice.

2.2.2 CLINICAL SCOPE OF PRACTICE

Clinical Psychologists apply psychological knowledge and theory to the assessment, formulation, diagnosis and treatment of emotional, mental or behavioural problems affecting adults, children or families.

Qualifications

To work within a clinical scope of practice, psychologists will have a minimum of a Masters degree majoring in psychology from an accredited educational organisation and an accredited Postgraduate Diploma in Clinical Psychology (or equivalent qualification), which shall include 1500 hours of supervised practice.

2.3 A “LIMITED” SCOPE OF PRACTICE

A “limited” scope of practice may be granted to psychologists who have completed the formal academic qualifications and are undertaking supervised practice for the purpose of achieving full registration. This will bring these practitioners under the ambit of the Board. In establishing a limited scope, the Board has confidence that psychologists who are approved with that scope, while undertaking supervised practice, are essentially safe to practice.

3.0 TRANSITIONAL ARRANGEMENTS

Psychologists who are currently registered will continue to be registered:

The Act deems all psychologists who registered when the Act comes into force to be registered under the new Act (refer section 189). All registered psychologists shall have a **General** Scope; the Board shall determine their eligibility for any additional **Vocational** Scope applied for.

4.0 OVERSEAS QUALIFICATIONS

Overseas qualifications will be assessed against the standard for general and vocational scopes.

Recognition of overseas qualifications from universities with accreditation systems may be achieved more simply than at present. Overseas qualifications may be recognised automatically as the basis of eligibility for a particular scope of practice if an overseas accrediting body that is itself approved by the New Zealand Psychologists Board approves the course or programme. Otherwise, the relevance of each qualification to the minimum qualification for eligibility for a scope of practice will be determined on a case-by-case basis.

5.0 FREQUENTLY ASKED QUESTIONS

See Frequently Asked Questions on page 5.

(It may be helpful to detach the FAQ section from this document to use for future reference.)

5.0 FREQUENTLY ASKED QUESTIONS

Question 1 Why are you doing this? I was happy with things just as they were.

Answer 1 **The Board is required to work within its empowering legislation. The 1981 Psychologists Act has been revoked and the Board now has the responsibility for administering the HPCA legislation. The new Act requires the Board to define scopes in such a way that maximum protection for the public is achieved.**

Question 2 What will it cost me?

Answer 2 **The Board is endeavouring to keep costs as low as possible. However, it is now required by law to do several things, which were not previously part of its role.**

Question 3 Will I be able to call myself a “psychologist” if I do not register?

Answer 3 **No. This is one of the significant changes resulting from this Act. Applied to the profession of psychology, Section 7(2) states “No person may claim to be practising (as a psychologist), or state or do anything that is calculated to suggest that the person practises or is willing to practise (as a psychologist) unless the person is (a psychologist); and holds a current practicing certificate (as a psychologist).”**

Question 4 I do not regard myself as a health practitioner - why should this Act affect my practise?

Answer 4 **The Act defines all psychologists as “health practitioners” for the purpose of registration, regardless of the area in which they practise.**

Question 5 I do not have the minimum qualifications for entry to the general scope, although I have been registered as a psychologist for several years. Does this mean that I won’t be able to register under the new Act?

Answer 5 **You will remain registered. All psychologists who were registered under the Psychologists Act 1981 at the time the new Act came into force will retain their registration under the new Act.**

Question 6 I trained as a clinical psychologist years ago, before there was a clinical training course in my region, and I have been a clinical psychologist for many years. Will I be able to have a clinical scope of practice?

Answer 6 **The Board does not wish to deprive the profession of its valued senior members. The Board recognises that on-the-job training and years of experience may obviate the need for specific academic qualifications, and applicants for a clinical scope of practice who do not have the usual qualifications will be assessed on a case-by-case basis.**

Question 7 I am a sports psychologist. Why have you not created a specific scope for sports psychologists?

Answer 7 **The prevailing opinion from the profession has been against developing too many scopes of practise, at least to begin with. If in the future, sports psychologists (or any other group) wish to make a case to the Board for the introduction of a new scope of practise they may do so, keeping in mind that the principal purpose of the Act is to “protect the health and safety of**

members of the public by providing for mechanisms to ensure that health practitioners are competent and fit to practise their professions”.

Question 8 Clinical training programmes are increasingly moving to doctoral qualifications, i.e. PhD or DClinPsy. Will these be recognised?

Answer 8 **Yes. The Masters plus Diploma is the minimum (standard) qualification.**

Question 9 I'm a child and family psychologist. How will the scopes identify my area of competence?

Answer 9 **You would be eligible for a general scope. Depending on your training and experience, you may also be eligible for a vocational scope in educational and developmental and/or clinical psychology. However, if for example the qualification is not quite equivalent to a generic clinical qualification, the Board is able award a vocational scope, with a specified condition that it applies to an appropriately defined area of clinical work such as “child and family”. This general approach of specifying conditions to the scope may also be able to be applied to others with specialist qualifications in a subspecialty area of clinical psychology, such as neuropsychology, and possibly health psychology.**

Question 10 What is the registration status of students and those completing the required 1500 hours of supervised practice?

Answer 10 **The Board proposes to introduce a “limited” scope (as a form of provisional or probationary registration) for people who have completed their academic qualifications and are undertaking supervised practical work. The Board believes that practitioners approved with this scope, while undertaking supervised practical work, are essentially safe to practice, and that this will strengthen the protection to the public by bringing psychologists-in-training under the auspices of the Board, which was not possible under the 1981 Act.**

Question 11 This is the first I have heard of this...

Answer 11 **The Board has been discussing issues likely to arise from this legislation frequently in public forums, in its publications, and via the two professional associations for more than three years. The Board did not write the HPCA legislation: it has come from the New Zealand Parliament.**

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Appendix 1

We are grateful to the 350 individuals and groups (approximately 60), including those listed below who made submissions in response to the first consultation paper on scopes of practice:

This paper has been circulated to over 1400 individuals and groups, including (but not limited to):

- All registered psychologists
- Accident Compensation Corporation
- Australia & New Zealand College of Psychiatrists
- Australian Authorities (i.e. Council of Psychologists Registration Boards)
- Children Youth and Family
- Commissioner for Children
- Department of Corrections
- District Health Boards
- District Health Boards New Zealand
- Heads of Departments of Psychology - Tertiary Education Organisations
- Health and Disability Commissioner
- Medical Council of New Zealand
- Mental Health Consumer Groups (Maori and Tau Iwi)
- Mental Health Foundation
- Ministry of Consumer Affairs
- Ministry of Education (including Special Education, Group Special Education)
- Ministry of Health
- Ministry of Justice
- New Zealand College of Clinical Psychologists
- New Zealand College of General Practitioners
- New Zealand Defence Force
- New Zealand Psychological Society
- New Zealand Sport Psychology Association
- Other health related registration authorities, (i.e. RBS)
- Private Practice Psychologists
- Special Interest Groups, e.g. Schizophrenia Fellowship of New Zealand
- Te Wānanga