# Minutes: Reimagining the Scope of Practice of Psychology Meeting 18 February 2016, Wits University, 14:15-16:56

## **Present**:

Marilyn Adan, Zaytoon Amod, Judith Ancer, Sara Asman, Katherine Bain, Katherine Bauer, Nabeelah Bemath, Sahba Besharati, Suzanne Bester, Lucy Birel, Linda Blokland, Elton Bloye, Dorothy Catala-Dombo, Johan Cloete, Wentzel Coetzer, Fellyn Collins, Saths Cooper, Lisa Currin, Linda De Rooster, Marco De Silva, Anita Decaires-Wagner, Tumi Diale, Shaakirah Dockrat, Shafeeka Dockrat, Kirsten Doret, Alfred Du Plessis, Justine du Plooy, Helen Dunbar-Krige, Cherazaad Edries, Yasmeen Engelbrecht, Gillian Finchilescu, Albe Fourie, Kevin Fourie, Thabiso Funde, Cecile Gericke, William Griffith, Matthew Grounds, Irene Hatzipapas, Stephanie Hendricks, Tia Hetz, Sasha Judav, Anwynne Kern, Tumi Khumalo, Tiaan Kirsten, Saleha Kola, Tsepo Kotoane, Phia Kotze, Sherianne Kramer, Hermanean Laauwen, Sumaya Laher, Juraida Latif, Stephen Laverack, Schvaughn Lesage, Hermann Liebenburg, Wahbie Long, Bathabile Makotane, Vicky Malefo, Tatenda Maliswa, Glory Manameca, Koketso Mangena, Deon Meiring, Tulisa Mjobo, Henk Mostert, Joachim Muremwa, Sandra Murphy, Vanessa Nabal-Kriel, Mfundo Ndlela, Lutendo Negota, Juan Nel, Raymond Netmann, Katia Nicolaides, Neliswe Nmbedume, Shaun Nortje, Cece Palesa, Lynn Preston, Neo Pule, Manoko Ratala, Nishola Rawatlal, Anneline Reetley, Rosin Robyn, Shelley Roe-Berning, Mamaketetsa Ropakeng, Annemi Scheepers, Lusilda Schutte, Dikeledi Sekhukhune, Matshepo Setlaleleng, Cora Smith, Francois Smith, Trishana D Soni, Martin Strous, Risha Sungkoora, Brandon Swanepoel, Nicola Taylor, Harini Vallabh, Monique van Hattum, Manuel van der Neut, Tayla Welch, Tamaryn Wilde, Mandy Wigdorowitz.

## **Apologies**:

Tarryn Blake, Darryn Costello, Fiona Donald, Hannetjie Edeling, Irieza Fortune, Elzette Fritz, Angelo Fynn, Woltemade Hartman, Erika Hitge, Pierre Jansen van Rensburg, Debbie Kaminer, Kgamadi Kometsi, Laraine Lane, Annelet Liebenberg, Solomon Makola, Rita McFaden, Carole Neyder, Suntosh Pillay, Lynette Roux, Kobus Scholtemeyer, Fatima Seedat, Karin Steyn, Karl Swain, Ramodungoane Tabane, Puniswa Titi, Corne Wentzel.

# **Welcome & Apologies**

Prof Sumaya Laher welcomed and thanked all present for attending.

A moment of silence was held for Life Esidimeni

Prof Laher introduced herself and acknowledged the PsySSA student division for their assistance.

# **Objectives**

- The objectives for the meeting were outlined, namely to canvas opinion on Scope of Practice from psychology professionals and students across South Africa, and to reimagine a more relevant psychology.
- It was acknowledged that this was the start of a process and would be first of a series of possible meetings.
- It was noted that the SOP has been highly contentious since its inception.
- The decisions of the 14 November 2016 in the Western Cape High Court were highlighted that declared that the regulations in the Scope of Practice for Psychology were invalid. Further, the order of invalidity as referred to in the in the slide presentation, was suspended for a period of 24 months
- It was noted that we are already into that 24-month period we only have 21 months remaining.
- It was clarified that the models that were being presented were not endorsed by anyone. They were meant to engage a discussion going forward.
- The models presented were only PROPOSALS meant to engage professionals in a constructive discussion.
- This initiative is independent of the Professional Board of Psychology and the HPCSA.

## **Proposed models**

**Model 1**: Keep the SOP as is with the proposed guidelines by the Board (Access the <u>2008</u> and <u>2011</u> SOPs)

 The Board has consistently been informing us that further guidelines, which provide clarity on the scopes of practice for each category, were being developed and would be released.  This process was overtaken by the Court order and is untenable. The 2011 SOP is already an Annexure and adding further guidelines has the potential of confusing the scopes even more, without resolving the defects.

**Model 2**: Keep the SOP as is and instead of having separate guidelines for each scope, incorporate them into one document

 If the Board wishes to continue with the current SOP, the <u>2011 Annexure</u> and further guidelines which address current defects, it would be best to promulgate a single document instead of having three different documents.

**Model 3**: Keep the SOP as is but introduce core competences for all psychologists regardless of category and then have specialized skills for each category

- Keep the SOP as is but introduce core competences for all psychologists regardless
  of category (including research and organizational psychologists) and then have
  specialized skills for each category.
- For this model, it is envisaged that the categories as they are specified in the SOP remain but a single document be promulgated that specifies at the onset what the core competences would be for all psychologists.
- The International Declaration of Core Competences in Professional Psychology adopted by IUPsyS in July 2016 may be consulted as a starting point – see <a href="http://c.ymcdn.com/sites/www.asppb.net/resource/resmgr/Guidelines/IPCP">http://c.ymcdn.com/sites/www.asppb.net/resource/resmgr/Guidelines/IPCP</a> -THE DECLARATION Final.pdf.
- The New Zealand Guidelines on core competencies may also be consulted see
   <a href="http://www.psychologistsboard.org.nz/cms">http://www.psychologistsboard.org.nz/cms</a> show download.php?id=41

**Model 4**: Change the SOP and training qualifications such that a Masters level training allows for a general psychologist (similar to a GP) and all specialized training occurs at a Post Masters level

- Change the SOP and training qualifications such that a Masters level training allows for a general psychologist (similar to a GP) and all specialized training occurs at a Post Masters level.
- The Psychology Board of Australia has a similar model. These documents can be viewed at <a href="http://www.psychologyboard.gov.au/Endorsement/Further-information.aspx">http://www.psychologyboard.gov.au/Endorsement/Further-information.aspx</a>.

### **Transverse registration:**

- Transverse registration is the term used by the 6<sup>th</sup> Board for those psychologists who
  wished to register in another category than the one they were currently confined to.
  Once successful, they were registered in the new category, giving up the old one.
- Whatever the model adopted (or combination of models), it is necessary that the Board consider some form of transverse registration.
- Importantly, we need to reimagine psychology to meet our country's needs.

### These models were proposed as the meeting progressed:

- Model 5 Keep R993 of 2008 (the scope of profession) and the competence clauses
  of R717 of 2006 (the code of conduct) and discard R704 of 2011 (the scope of
  practice regulations). This does not require the scrapping of categories. (Click Here
  for Ethical Rules of Conduct Practitioners 2006)
- Model 6 Maintain the SOP categories, but start the training considerably earlier for categories, in first or second year. Still a 6-year qualification but start earlier.
- Model 7 Consider changes to SOP that bring in an exit level possibly 'assistant psychologist' at the Honours level and proceed with a Model 4
- An additional comment was made that whatever the model, core competency must be included and every professional must do community service regardless of category psychology.
- Community service for everyone was thus added as something that would need to be included regardless of the SOP model chosen.

### Issues raised at the meeting

- Questions were posed on grandfathering particularly as it pertained to neuropsychology and the opening of a register for this.
- Transverse registration was also discussed
- Universities asked for clarity on Model 4 particularly for resource allocations as well
  as the implications for other bodies to which universities account. Students also
  requested that any of these changes consider students already in the process with

current qualifications. Similar concerns were expressed by practitioners in terms of how registration and scope would proceed if there were changes. Comments on those who already have specialized training were also raised.

• There was some discussion on the purpose of having a SOP. What is it meant to achieve and is it useful? It was broadly established that a scope of profession document is needed. However the audience was not unanimous on the need for a scope of practice. It was expressed that practice can legally continue without an SOP as other mechanisms exist to protect the profession and the public.

Nonetheless there was a strong sentiment that the profession should move ahead with a way forward.

 There was comment on the lack of posts for all categories of psychologists within the public service. Further there was comment on the Professional Board not considering these issues and the lack of private practitioners on the Professional Board for Psychology.

The Chair acknowledged the problems, but requested that the meeting not move towards criticism against the Board.

- The need to consider the proposed National Health Insurance (NHI) and the need to lobby for greater access to mental health services and a meaningful role for psychology professionals in the NHI was indicated.
- A comment was made re: a special Ethics task team at the HPCSA looking into ethics and this could possibly tie into this process.
- It was noted that some people might not be familiar with the documents being referred to in the models.
  - The Chair undertook to put up the links to all the documents that are referred to in this document. Hence the hyperlinks in the models above.
- There was a concern around the large numbers of students in psychology who do
  make it through to Masters and have to seek employment elsewhere.
   The Chair called for an indication from individuals re: models favoured. An indication

of preference then proceeded and the following was obtained. There were three abstentions from the vote:

- o Model 1: no preference
- Model 2: no preference
- o Model 3: 15 individuals in favour
- o Model 4: 40 individuals in favour
- Model 5: 40 individuals in favour
- o Model 6: no preference
- The floor was then requested to provide an indication of preference regarding transverse registration.

Considering transverse registration: 63 individuals in favour

- Following this the floor was requested to provide an indication of preference regarding whether psychologists from all categories should do community service.
   Community service should be there for all categories: 75 individuals in favour
- Individuals were requested to go to their constituencies and consult.
- The chair undertook to share the slides and notes from the meeting.
- An invitation was issued to all stakeholders to move forward with the SOP as a
  unified entity. At the initial stages PsySSA will be happy to collate and disseminate
  information largely for the sake of convenience.
- EPASSA expressed that it did not want PsySSA to collate EPASSA's comments.
   EPASSA preferred to make its own representations to the Board, (which must call for participation).
- The Chair thanked all for participating and expressed the hope that the profession will be able to speak as a unified voice.
- The Chair noted that the meeting was kept strictly to issues relating to SOP but amongst the most immediate challenges facing the profession at this moment is the issue of nonpayment by medical aids to educational psychologists and to counseling

psychologists. The Society for Educational Psychology in South Africa (SEPSA) which is a division within PsySSA, will be hosting a meeting on the 25 February 2017 to discuss the medical aid crisis amongst other issues. PsySSA will after consultation with SEPSA initiate further consultation on the way forward re: the medical aids.

 PsySSA and all organizations were invited to join EPASSA in lodging complaints against the Council for Medical Schemes and discriminating medical aids with the South African Human Rights Commission and the Competitions Board.

The meeting was concluded at 16:56