LC Paper No. CB(2)1674/17-18(40)

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Date: Subject: Thursday, June 28, 2018 02:32PM Feedback about AR scheme for CP

History:

* This message has been forwarded.

I would like to express my objection to the AR scheme for CP as proposed by DCP HKPS because it is heavily biased.

The proposal only take reference to "Foundation of CP training in HK (CUHK & HKU) since 1971 and emphasized solely on "Local placement settings with qualified supervisors providing on-site supervision of clinical practice for clinical psychology trainees" without actually considering the international standards.

One of the clinical training requirements is "on-set supervision". DCP HKPS mentioned that they take reference to "Longstanding referencing to criteria of accredited training standards of well-established overseas bodies"

Health & Care Professions Council (UK), American Psychological Association (USA), Canadian Psychological Association (CA) and Australian Psychology Accreditation Council (AUS) and

However, there is no specification of the requirement of "on-site supervision" listed out in the "Standards for the accreditation of Doctoral programmes in clinical psychology October 2015,UK" https://www1.bps.org.uk/system/files/Public%20files/PaCT/clinical_accreditation_2015_web.pdf

Also there are various clinical supervision modes in UK, Canada and Australia, such as "3.4. Clinical supervision, is normally considered to be provided one-to-one and face-to-face. However, there are many examples of alternative types of provision. Clinical supervision could be group based, with an identified lead, or peer based, with all members sharing expertise. It can be conducted by telephone (such as is common within mindfulness CBT); Skype or other instant messaging solutions as well as email. Some models (e.g. systemic) use reflective teams or live supervision, where the supervisor is in the room with the clinician and client. Good practice would indicate the use of recorded or observed material within supervision at times" (p.9 Division of Clinical Psychologist policy on supervision UK, Jan 2014) https://www1.bps.org.uk/system/files/Public%20files/inf224 dcp_supervision.pdf

"Standards for the accreditation of Doctoral programmes in clinical psychology October 2015
Supervision occurs in a variety of settings (e.g., clinical, educational, organisational, research, and administrative).
Supervision may be educational in contributing to skill development in a variety of different areas and, at the same time, may serve an evaluative gatekeeper role in determining who graduates from a training program or who is admitted to practise in the profession by the provincial/territorial regulatory body. Supervision may serve an administrative or management function that emphasizes quality control. Supervision may be formal or informal, contractual or implied, and subject to change over time. "(p.3 Canadian Psychological Association, Ethical Guidelines for supervision in psychology: Teaching, research, practice, and administration, 2009)
https://www.cpa.ca/docs/File/Ethics/EthicalGuidelinesSupervisionPsychologyMar2012.pdf

One of the supervisor assessment tasks include" Direct observation and evaluative feedback: Observation of the provisional psychologist's practice with real clients by the supervisor/s – in person, videoconference or a recording."

(p.10) "Other supervision time can be individual supervision, small group supervision, or other supervision activities such as indirect supervision. (p.16 Guideline:4+2 internship program Psychology Board of Australia, 1 June 2017) file:///C:/Users/user/Downloads/Psychology-Board---Guidelines---Guidelines-for-the-4-2-internship-program---1-June-2017.PDF

According to Division of Clinical Psychology, Hong Kong Psychological Society (2016). Guidelines for Recognition of Clinical Psychology Training Programme. https://hkps-dcp.org.hk/images/downloads/recognition/Guidelines for Recognition of CP program.pdf.pdf p.5

"The Subcommittee for Accreditation of Clinical Psychology Training (SACP) is appointed by and accountable to the Executive Committee of the Division of Clinical Psychology (DCP), Hong Kong Psychological Society; all members of SACP are members of DCP"

SACP teamed up to form their own circle but AR scheme should not be only confined with one organization. There are more than one organization representing CP professions in HK, such as Hong Kong Association of Doctors in Clinical Psychology. I would wonder why SACP have the authority to decide for all the stakeholders of HK?

In fact, DCP HKPS emphasizes on local placement settings which is deviated from APA standards. In USA, bachelor in major (as in psychology) is not required for advancement into Master's or doctorate. The California School of Professional Psychology — Hong Kong (CSPP-HK) PsyD Program's clinical training and supervision models align with those of American Psychological Association (APA)-accredited programs in the US. However, the training of CSPP-HK program is considered by this proposal being fall short of the standard of training in clinical psychology is unjustified and unfair. CSPP-HK is not accredited under this proposal but it have been given proof of CSPP-HK PsyD program having accreditation from many organizations and was accrediated by HK Council for Accrediation of Academic & Vocational Qualification under the Quality Framework.

In sum, the suggested AR scheme based on the old-fashioned supervision model and requirement of psychology bachelor degree holder are to exclude "other" well-qualified CPs from membership as well as cling to protectionism. Indeed it is harming the public to access to professional CP services and limited the choices of the public.

AR scheme should be formulated in a fair access and inclusive principle.

I would strongly suggest the graduates from Hong Kong (CSPP-HK) PsyD Program should have equal access to the AR status.