



Cumann Síceolaithe Éireann

The Psychological Society of Ireland

**Pre-budget Submission 2022:
Increasing Access to High
Quality and Agile Psychological
Services**

September 2021

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Increasing Access to High Quality and Agile Psychological Services

PSI Pre-budget 2022 Submission

Increase investment in the psychology workforce: primary care, child, mental health, & disability services €20m	Fund trainee educational psychologists (€720,000*) & trainee counselling psychologists (€500,000*) *per cohort
Development of additional permanent senior psychologist posts €2.6m	Continuation and expansion of the role of assistant psychologist €5m + funding for expansion
Immediate establishment of the National Psychology Placement Office (NPPO)	Continuing Professional Development (CPD) €500 allocation per annum per psychologist

The Psychological Society of Ireland (PSI) is the learned and professional body for psychologists in Ireland. The Society is active in the promotion of psychological knowledge and practice; engaging and developing its members; and bringing the insights of psychological knowledge to the benefit of society as a whole. Established in 1970, the Society currently has almost 4,000 members.

The PSI is committed to maintaining high standards of practice in psychology and also to exploring new and innovative ways of furthering psychology as an applied science. Our vision is to advance the psychological wellbeing of individuals, communities, and organisations.

Context

Our psychological wellbeing, individually and collectively, is increasingly facing a great challenge in the wake of the COVID-19 pandemic. This is in parallel with the far-reaching consequences of climate change. The impacts of floods, fires, air pollution and loss of biodiversity can all trigger ill-health, injury, trauma, loss, and grief. Furthermore, the fallout from the COVID-19 pandemic indicates that there are rising rates of depression and anxiety in the face of the loss, trauma and illness experienced by so many. **The PSI strongly calls for the mental health budget to be significantly increased to 12% of the overall health budget.**

Pre-COVID, mental health services were already overstretched and understaffed. It is more essential than ever before to seriously invest in our mental health services to meet the needs of the population. The PSI believes that increased investment in several key areas of service provision makes sense if we truly wish to achieve the [Sláintecare](#) vision of 'Right Care. Right Place. Right Time.' These include expanding primary care psychological supports, increased funding for child and adolescent mental health services and disability services, and continued investment in digital technologies and Continuing Professional Development (CPD) opportunities to support greater flexibility and quality in terms of service delivery.

Psychologists are a highly skilled, flexible, and valuable part of the health and social care workforce. Psychologists can work across the lifespan to meet a wide range of health, social care, and wellbeing needs. Strategic investment in the further development of an agile, competent psychology workforce is fundamental to 'Improving Safe, Timely Access to Care, and Promoting Health & Wellbeing' ([Sláintecare Reform Programme 1, 2021-2023](#)). Increasing access to high quality and agile psychological services should be the goal for 2022. There is a need for development of and facilitating better access to psychological services, as per several government initiatives which have yet to be actioned.

Resourcing the psychology workforce: Development of additional posts

In the areas of mental health and disability significant shortfall has been identified in the number of psychologists to meet the needs of their respective areas. The [Disability Capacity Review to 2032](#) estimated a minimum of doubling of the number of psychologists in child disability services alone would be needed to meet the demands. The numbers of psychologists in Child and Adolescent Health Services (CAMHS), as recommended by [A Vision for Change](#), only reached approximately 32% of the recommended levels. The Health Service Executive (HSE) [Report of the National Psychology Team Project](#) estimated an additional 321.8 psychologists were required in mental health services alone to meet demand. These reviews do not take into account demand in other areas of employment for psychologists, such as TUSLA, forensic services, private services, and education sectors.

The primary care strategy, [Primary Care: A New Direction](#), was first signed into being by Mr Micheál Martin, T.D., then Minister for Health and Children. The strategy clearly asserts that 90-95% of all health and social care needs can be met at primary care level and provides a model for how this might best be achieved. In *A Vision for Change*, the crucial role of the primary care sector in the provision of mental health care was highlighted, stating that “primary care is a very important part of the mental health framework ... Most mental health problems are dealt with in primary care without referral on to specialist services”. Primary care is, therefore, the main supplier of mental health care for the majority of the population. The recent allocation by government of €4 million ringfenced for resourcing psychology in primary care is a welcome development and will go some way to reducing waiting times in primary care.

As per last year’s PSI pre-budget 2021 submission, it may take €16 million between the two services currently operating to adequately resource primary care (138 new psychologists in each service = upwards of 11,000 initial appointments per year, meaning the same number seen from waiting lists). Resourcing primary care in particular is in-keeping with the *Sláintecare* reform programme of ‘safe, timely access to care’. Urgent progression is needed on the **recruitment of psychology posts for the new community healthcare networks, enhanced community care services, and chronic disease management hubs** as described in the HSE [National Service Plan 2021](#).

Psychology posts which have been identified at local and regional level are facing challenges at national level. Progression of recruitment for primary care psychology services in parallel with other services is essential to ensure parity with the prioritisation of both psychological and physical health.

Many of the children and families attending psychology services will have been disproportionately affected by the pandemic. Many may not have any access to psychological support, particularly outside Dublin. As well as having a devastating impact on their mental health and adjustment, lack of urgently needed psychological support can impact significantly on physical health outcomes. Waiting lists are lengthy, and especially so for children with complex needs. There is a particular need for resourcing disability services which provide much needed assessment and intervention to young children. Psychology posts are needed to **populate new network disability services** under the progressing disabilities change programme. It is imperative for children and their families and the functioning of new teams, that the significant gaps in psychology services are met with development of new psychology posts, as a matter of urgency with **additional qualified psychologists on the Children’s Disability Network Teams (CDNTs)**.

In particular, there is a dearth of paediatric psychology staffing in hospitals outside Dublin. There is no community-based paediatric psychology provision nationally. In the UK, for example, there are paediatric liaison posts imbedded in CAMHS teams. Paediatric psychology funding in Ireland is not uniform with some posts funded from acute hospital budgets, some funded by HSE mental health budgets and some funded by charities, which makes national planning very difficult.

Developing paediatric psychology services is essential in supporting people to move back to care in the community.

In relation to specialist mental health, capacity reviews have indicated these are also under-resourced. The PSI recommends that the resource gaps identified in [Sharing the Vision](#), and more recently the *National Service Plan 2021*, are filled as a matter of priority to adequately support CAMHS, adult mental health, and older adult mental health services.

The PSI is recommending an increased investment of approximately €20 million in primary care, child, mental health, and disability services.

To fully resource the psychology workforce at all levels, **development of additional permanent senior psychologist posts is needed. The estimated cost of introducing an addition of 30 senior psychologist posts is €2.6 million.** This will facilitate expansion of trainee placements, provide scaffolding and supervision for assistant psychology roles, and facilitate proposed hiring of basic grade psychologists. This would also likely aid with recruitment and retention of psychologists into the workforce. In order to increase the number of psychologists who are in training/early career, in turn increasing the workforce, the infrastructure is needed. In recent years, the majority of additional posts allocated in psychology have been at staff grade level (first two years post-qualification). It is important to build a sustainable infrastructure of psychologists at all career stages within the public service. The proposed increases of qualified psychologists, trainee places, and continuation of paid assistant psychology roles will need to be accompanied by senior psychologist roles to ensure that resources put in place translate to tangible outcomes. Senior psychologists will be needed to supervise assistant psychologists, staff grade psychologists, and trainees in order to maintain patient safety, support professional development, promote employee retention, and ensure intervention efficacy.

Funding and resourcing training

As a direct result of the COVID-19 pandemic demand has significantly increased for psychological services and is likely to continue to do so. As such, we must begin to plan for how we increase training places and associated funding to the three professional training programmes who are currently employed in public sector psychology roles to meet current and future demand.

Establishment of the National Psychology Placement Office (NPPO), as recommended by the HSE *Report of the National Psychology Team Project*, as a matter of urgency would assist with this aim. Placement allocation for trainees has been a real issue particularly during COVID-19 with space and capacity issues being seen in services. The establishment of the NPPO is envisaged to assist with equitable placement opportunities for psychology trainees, which will likely result in smoother entry to the workforce for a range of psychologists. Furthermore, as outlined in the HSE Report, the NPPO may improve placement opportunities for qualified psychologists who need to

make up skill gaps to enter the workforce, including psychologists travelling from overseas to work in the health service.

In 2021, there were 66 funded HSE clinical psychology training places. In addition, the counselling psychology training programme has an intake of approximately 14 and the two educational psychology training programmes have intakes of approximately 20-22 in total. Currently, counselling and educational trainees must self-fund for the full period of their full-time doctoral training as well as pay €12,000-€14,000 per annum in university fees. Psychology trainees on all three professional training routes typically spend years accruing experience on a voluntary basis. These factors result in a significant risk of creating a homogenous psychology workforce. The current situation of psychology students working for many years on a voluntary basis and potentially having to self-fund training means that we are likely not producing a workforce that is representative to serve a diverse population across society. Furthermore, the [real struggles of these students](#) working to self-fund the end of an already long training journey have been documented. These students currently work alongside other funded psychology trainees, creating an inequitable situation.

This issue could be resolved by a range of initiatives, most immediately by **funding trainee educational psychologists (€720,000 per cohort) and funding trainee counselling psychologists (€500,000 per cohort)** as referenced by the *Report of the National Psychology Team Project*. Funding initiatives at the undergraduate, assistant psychology, and postgraduate levels across the psychological disciplines would be a welcome development that would assist with creating a demographically diverse workforce.

The role of **Assistant Psychologist (AP)** was established in the HSE in 2018, with a two-year pilot programme in primary care psychology. Since then, funding for the role has been extended on a temporary basis without definitive commitment to permanently establish the role. This lack of clarity on the permanence and funding in place for the role has resulted in APs being in a precarious and insecure state of employment and has clear potential impacts on psychology service provision. The PSI recommends the continuation and expansion of the role, in line with recommendations from the [National Evaluation of the Assistant Psychologist Role in Primary Care Psychology](#). Funding for this would likely be similar to the initial €5 million that was costed for the programme, plus funding for any expansion.

Psychologists work in multiple sectors. **Funding CPD across psychological sectors and specialisms would be of benefit not only to the profession, but to the general public.** There is a need for greater input for psychologists on evidence-based practice in assessment and interventions. This is particularly important in a dynamically changing environment with the introduction of telehealth practices, in addition to changing demand levels and presentations, and the increasing emphasis on integration between psychological and physical health. **Funding continued development and training for psychologists will help with increasing access to high quality and agile psychological services. The PSI recommends a €500 per annum allocation for each psychologist.**

Useful links

- **Sláintecare**
<https://www.gov.ie/en/campaigns/slaintecare-implementation-strategy/>
- **Disability Capacity Review to 2032**
<https://www.gov.ie/pdf/?file=https://assets.gov.ie/154163/8fe32ca7-2154-4fb0-8a41-6931c5f15471.pdf#page=1>
- **A Vision for Change**
<https://assets.gov.ie/9242/7c422427e7a94d72bb299a01957c445c.pdf>
- **Report of the National Psychology Team Project**
<https://www.hse.ie/eng/staff/jobs/eligibility-criteria/psychology-report-jan-2021.pdf>
- **Primary Care: A New Direction**
<https://assets.gov.ie/12630/75215c912d9c4e06b43dd56a3d4c1e86.pdf>
- **National Service Plan 2021**
<https://www.hse.ie/eng/services/publications/serviceplans/national-service-plan-2021.pdf>
- **Sharing the Vision**
<https://www.gov.ie/en/publication/2e46f-sharing-the-vision-a-mental-health-policy-for-everyone/>
- **Podcast addressing issues for trainee educational & trainee counselling psychologists**
<https://soundcloud.com/mark-smyth-802788676/psychequality>
- **National Evaluation of the Assistant Psychologist Role in Primary Care Psychology**
https://www.researchgate.net/publication/342803003_The_evaluation_of_the_Assistant_Psychologist_role_in_primary_care_psychology_services