



**ENGAGING WITH PRIVATE PRACTITIONERS FOR  
PSYCHOLOGICAL SERVICES**

**Guidelines For FACS Staff Engaging  
With Private Practitioners For  
Psychological Assessment, Treatment  
And Other Therapeutic Services**

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## OVERVIEW

### Purpose

The purpose of these guidelines is to guide casework staff on processes when engaging private practitioners to provide psychological services for children and young people who are clients of Family and Community Services, including for parent/carer support; and, to ensure the standard of services provided are appropriate for the client.

A **private practitioner** is a non-government fee-for-service Psychologist, Social Worker, Behaviour Specialist or other therapist or agency who provides a psychological service.

A **psychological service** is any psychological assessment and/or treatment service or therapeutic intervention provided by a private practitioner. Services may include:

- Clinical, mental health/psychological services
- Assessment or treatment services for psychological issues
- Behavioural assessment, behaviour management and intervention
- Forensic psychological services
- Educational or developmental psychological services
- Neuropsychological services.

### General Practice Requirements

- A private practitioner should only be engaged by Family and Community Services when:

- Specific assessment and/or treatment services required for a client do not exist within the agency or a suitable Health/Community agency cannot be found; or,
  - Existing agency services are unable to provide the service within the referral timeframe; or,
  - Impartiality of the agency is, or could be, compromised and is considered to be important for legal or therapeutic reasons.
- All private practitioners who provide psychological services must be on the [Family and Community Services Private Practitioners Psychological Services Register](#) (maintained by Psychological Services) before they are contracted to provide services to clients.
  - If an urgent referral is required and the private practitioner is not on the approved register, the referral for services can only be sought if:
    - they are already known to the agency or have appropriate referees; and,
    - there has been consultation and approval from the District Team Leader Psychological Services or Manager District Psychological Services; and,
    - contingent on Family and Community Services (usually through Psychological Services) following up with the practitioner to apply to be placed on the register.
  - Before referring clients to private practitioners, whether or not they are on the FACS register, the Caseworker must first consult with the appropriate Psychologist allocated to their Community Services Centre.
  - A Consultation Record will be provided, which outlines whether a recommendation for psychology services (internal or external) is recommended and/or document recommended further action.

- Depending on the outcome of the consultation, the Caseworker/ Manager Casework may make a referral to FACS Psychological Services or to a private practitioner.
- The FACS psychologist may liaise with mental health and other therapeutic providers such as a School Counsellor or the local Child and Adolescent Mental Health Service. The psychologist may help facilitate referrals to these external agencies.
- The Manager Casework (or Manager Client Services) will check the approval from the Team Leader District Psychological Services or Manager District Psychological Services (whoever is appropriate for the setting) before authorising expenditure to engage the services of a private practitioner and for any ongoing work. The expenditure is recorded and approved within the case plan.

## PROCESSES

### 1. Referral and engagement with approved private practitioners (refer to: [APPENDIX I – Referral Flowchart & Reporting Processes](#))

The Caseworker undertakes a consultation with a Family and Community Services Psychologist prior to contact with a Private Practitioner.

Upon contacting the private practitioner, enquire about their availability to provide the service and discuss the goals and outcomes for the client(s). Also inform the practitioner of any personal safety risks or concerns relating to the client's (or family's) behaviour which may pose a risk to the practitioner.

#### ○ Referral Form

Referrals to private practitioners include:

- specific reasons for the referral or referral questions;

Guidelines for FACS staff engaging with private practitioners for psychological services (v.2; January 2015).

- sufficient information and any relevant documents to assist the private practitioner deliver the service;
- any specific measures that Family and Community Services requests to be completed;
- timeframes (e.g. initial assessment, during intervention, completion); and,
- frequency with which reports are to be provided on the child or young person.

### ○ Reporting

Consistent with the [Service Agreement for Private Practitioners on the Family and Community Services Private Practitioners Psychological Services Register, \(Service Agreement\)](#), it is important that private practitioners maintain regular communication with Family and Community Services about the child or young people or family they are working with, and address any questions or concerns they may have as they arise.

When the assessment and/or treatment sessions have been completed, the private practitioner must provide copies of their written report to the person who made the referral (on behalf of Family and Community Services) for their review.

**The Caseworker will consult the FACS Psychologist regarding any need for further sessions.** In most cases, the Team Leader District Psychological Services or Manager District Psychological Services will give approval if further services are required.

### ○ Confidentiality and Consent

When providing copies of reports or written/verbal information to the private practitioner, FACS psychologists or casework staff should remind the private practitioner of the [Guidelines for FACS staff engaging with private practitioners for psychological services \(v.2; January 2015\)](#).

practitioner that the information is confidential and not to be circulated without the prior permission of Family and Community Services.

Children and young people under parental responsibility of the Minister are in a unique position with respect to informed consent. As with any child or young person, informed consent for psychological services must be gained from the person or agency who has parental responsibility for that child or young person.

While there may be no legal imperative for agency psychologists or private practitioners to gain the informed consent from children or young people themselves, it is strongly recommended that in the interests of establishing productive and engaged relationships, all clients should be fully informed about any assessment and/or intervention work that a psychologist may undertake with them and their assent to participate in that work gained. If they have capacity where they can provide their own consent, they should be fully informed about the work that is planned and their consent to participate in that work should be gained.

Family and Community Services has developed an [Informed Consent Guideline](#) to assist in this area.

- **Fees**

The Manager Casework (or Manager Client Services) should check the approval from the Team Leader District Psychological Services or Manager District Psychological Services (whichever is appropriate for the setting) before authorising expenditure to engage the services of a private practitioner. The expenditure is recorded and approved within the case plan.

Family and Community Services has developed a schedule of fees for private practitioners providing psychological services. This schedule is included in the [Guidelines for Private Practitioners Providing Psychological Assessment, Treatment and Other Therapeutic Services for Family and Community Services](#).

- **Contract for Services**

In order to be on the *Family and Community Services Private Practitioners Psychological Services Register*, the private practitioner must have already signed a [Service Agreement](#) for private practitioners included on the register. This document outlines the general conditions and expectations of the working arrangement between Family and Community Services and the private practitioner.

The process for a private practitioner to be approved and placed on the register is outlined in the [Guidelines for Private Practitioners Providing Psychological Assessment, Treatment and Other Therapeutic Services for Family and Community Services](#).

- **Work Health and Safety Matters**

Prior to engaging the private practitioner, the FACS Caseworker will have informed the practitioner of any personal safety risks or concerns relating to the client's or family's behaviour which may pose a risk to the practitioner.

Private practitioners are generally expected to provide psychological services with Family and Community Services' clients in their own professional rooms. Services may, if necessary, be provided in the client's home. For instance, it may be necessary to collect observational data in the home or care environment. Safety in such situations is the responsibility of the private practitioner.



It is important that the private practitioners do not see Family and Community Services' clients in offices that are situated in the private practitioner's own home. This requirement is to ensure practitioner safety.

If private practitioners have any concern about their own safety, or if they have been threatened or intimidated in any way, they are advised to discontinue assessment or intervention services with the client(s). In such circumstances the private practitioner must report their concern to the Family and Community Services staff who they have been working with or with the person who made the referral for their services.

- **Use of Interpreters**

If an interpreter is required, the private practitioner should arrange for an interpreter to be available for the appointment as per the *Interpreters and language services* procedure.

If the interpreter is late for a session, or fails to present, or any other difficulties are experienced in relation to the interpreting provided, the private practitioner is encouraged to contact and discuss the arrangements with the Family and Community Services Caseworker.

## **2. Referrals to private practitioners who are not on the approved practitioner register**

If an urgent referral is required and the private practitioner is not on the approved register but is already known to Family and Community Services or has appropriate referees and there has been consultation and approval from the District Team Leader Psychological Services or Manager District Psychological Services, the referral for services can be sought, contingent on

the private practitioner subsequently applying to Family and Community Services to be approved and placed on the register.

The practitioner must be known to Family and Community Services in some way or have been through a vetting process. The private practitioner must hold a “Working with Children Check” or “Certificate for Self-Employed People in Child-Related Employment” (see <https://check.kids.nsw.gov.au/#self-employed>) and must satisfy the requirements of the *Service Agreement*.

The same referral and practice processes should apply as those detailed above in *Section 1. Referral and engagement with approved private practitioners*.

### **3. Access to private practitioners through the Medicare Benefits Schedule (MBS)**

Medicare benefits are available for a range of specified psychology services for people with certain mental health and other conditions. The *Better Access to Psychiatrists, Psychologists and General Practitioners* through the MBS (*Better Access*) initiative aims to improve outcomes for people with a clinically-diagnosed mental disorder through evidence-based treatment. Under this initiative, Medicare rebates are available to patients for selected mental health services provided by general practitioners (GPs), psychiatrists, psychologists (registered clinical and general psychologists) and eligible social workers and occupational therapists. Assessment and treatment packages are also available for children with other conditions such as autism.

Rebates for psychological services may be available through MBS. Access to a Medicare rebate, which often covers a significant portion of the private practitioner’s fee, is made possible by following the correct referral process. As per the processes previously outlined, the Caseworker must first consult

with the relevant person within Psychological Services before seeking a referral to a private practitioner through the MBS.

### ○ Referral & Services

To receive psychological services under Medicare, a person must be referred by his/her GP or in some instances by a psychiatrist or a paediatrician. The GP may either prepare a GP Mental Health Treatment Plan, or make a referral to a psychiatrist who may prepare a psychiatrist assessment and management plan. Alternatively, the GP may refer to a psychiatrist or paediatrician who, once an assessment and diagnosis is in place, can directly refer to allied mental health services. Whether a patient is eligible to access allied mental health services is essentially a matter for the treating health practitioner to determine.

The *Better Access* initiative covers people with mental disorders arising from:

- adjustment disorders
- alcohol use disorders
- anxiety disorders
- attention deficit/hyperactivity disorder
- bereavement disorders
- bipolar disorder
- conduct disorders
- co-occurring anxiety & depression
- depression
- eating disorders
- obsessive compulsive disorder
- panic disorder
- phobic disorders
- post-traumatic stress disorder
- psychotic disorders
- schizophrenia
- sexual (paraphilic) disorders
- sleep problems
- substance-related disorders.

It should be noted that IQ testing, neuropsychological assessment, forensic assessment and parenting capacity assessments are not covered for Medicare rebate.

Extra expenses may be incurred where the doctor or specialist charges above the MBS fee for their service.

- [Further Information and MBS updates](#)

Further information on MBS items and mental health and related programs can be obtained at the following links:

- [Better Access to Mental Health Care](#)
- [MBS Primary Care Items](#)
- [DoHA Mental Health programs](#)
- [Medicare - services provided by psychologists](#)
- [Medicare information for health professionals](#)

Medicare contact details:

- Medicare Australia on 132 011 or at <http://www.medicareaustralia.gov.au/about/contact.jsp>

## APPENDIX I – Referral Flowchart & Reporting Processes

