

Claims for  
**PSYCHOLOGY MECA**  
Bargaining 2019



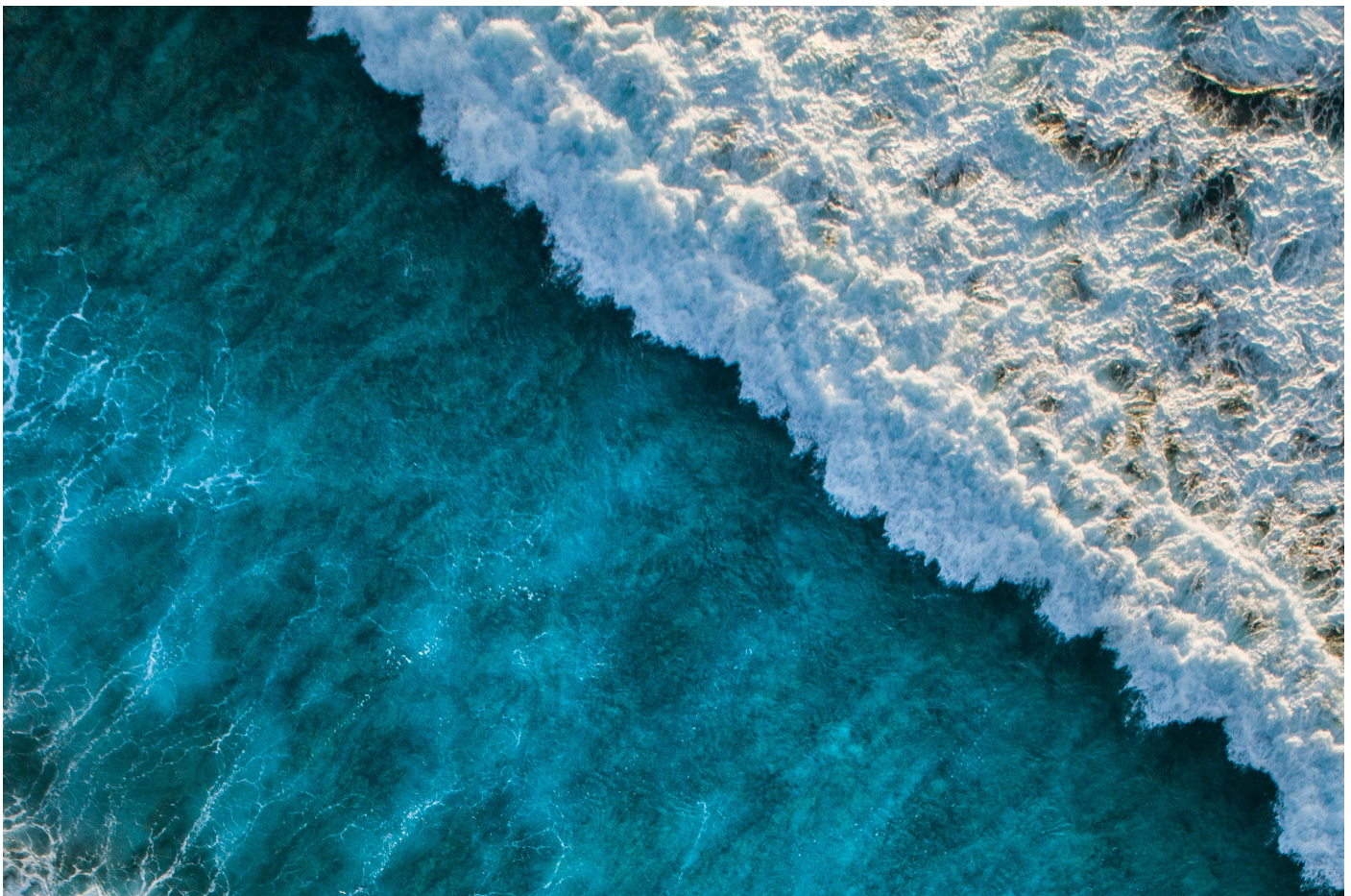
*Insert a new preamble into the beginning of the MECA:*

# PREAMBLE



APEX and the District Health Boards are committed through this agreement to supporting the future of psychology in mental and physical health services in Aotearoa/New Zealand.

The parties recognise the importance of ensuring the wellbeing of psychologists in their workplace, providing appropriate support and resources for them to do their jobs; and to providing opportunities to participate in service improvement, clinical leadership and professional development.



# IN THEIR RELATIONSHIP, BOTH PARTIES WILL PRO-ACTIVELY:



- Work to ensure New Zealanders have access to high quality psychological services through the health system.
- Provide for participation of union delegates and members in decision-making where those decisions may have an impact on the work or working environment of those members.
- Recognise psychologists' role as advocates for their patients and respect and recognise the right of psychologists to comment publicly and engage in public debate on matters within their expertise and experience.
- Recognise the obligations psychologists have to practice in accordance with their Code of Ethics.
- Work to reduce the burden of bureaucratic or administrative tasks on clinicians.
- Take all practicable steps not to cause psychologists harm by reason of volume, character or nature of the work provided.
- Support psychologists to develop all core competencies in an integrated and wholistic way.
- Provide sufficient clinical resources and organisational support for psychologists to focus on whanau and early intervention; lead work addressing systemic causes of health issues; facilitate closer collaboration between services and integration with primary care; innovate within and beyond our current models of care; improve managerial and clinical governance systems; and engage the full scope of their professional practice.

# TERM

1 March 2019 to 28 February 2020

# SALARY SCALES

## Psychologists

Step	2/10/17		1/3/19
18**	115,561		
17**	113,007	18**	140,000
16**	110,455	17**	136,000
15**	107,900	16**	132,000
14**	104,990	15**	128,000
13**	102,208	14**	124,000
12**	100,469	13**	120,000
11**	97,142	12**	115,000
10**	94,992	11**	110,000
No	Auto	Step	Here
9	91,135	10	104,491
8	87,278	9	100,248
7	83,118	8	96,006
6	78,548	7	93,869
5	75,238	6	91,430
4	72,991	5	86,403
3	70,278	4	82,762
2	68,913	3	80,290
1	65,745	2	77,306
		1	75,804

\*\*Merit or designated position

(10%, one step off the bottom, an additional automatic step and evening out of merit steps - \$5000 or \$4000 increments).



## Intern Psychologists

Step	2/10/17	Step	1/3/19
2	56,607	1	62267
1	53,164		

## Explanation of Transition

Intern step 1 and 2 translate to new intern psychologist step 1.

Transition is directly across for all automatic steps including intern scale up to step 10 (i.e. step 8 to step 9).

Steps 11 to step 13 translate across and down one step (i.e. old step 12 to new step 12).

Steps 14 to 14 translate to new step 14.

Steps 16 to 18 translate to new step 16.

All transitions happen on 1 March 2019.

## Merit Progression

Amend the merit progression criteria to allow those on steps 3 to 9 to make a merit application and move up one step upon approval (does not reset anniversary date).

Amend clause 9.2 (a) to state - "An intern who has completed their internship, and is awaiting their thesis examination/marking, or for graduation, is to be back paid to step 1 of the psychologists' scale from the date they submitted their thesis to the date they gain full registration as a psychologist."

Amend clause 9.2 (c) to include - "To address hard to fill vacancies or to recognise specialist skills or experience the DHB may appoint a psychologist higher than their starting step which would have been calculated as years' experience."

Add a new clause 9.2 (e) "Leadership positions - a psychologist appointed into a leadership position such as a professional leader or clinical leader shall be paid no less than step 15."

Amend the merit progression criteria to include new optional tasks:

- Acts as the Responsible Clinician for a patient under the Mental Health (Compulsory Assessment and Treatment) Act 1992 or the Substance Addiction (Compulsory Assessment and Treatment) Act 2017.
- Improves delivery of digital and/or online services.
- Completes a project that is in line with the recommendations of *He Ara Oranga: the Report of the Government Inquiry into Mental Health and Addiction*.

## ALLOWANCES

The following responsibilities, positions or skills shall attract an additional allowance of \$5000 per annum, paid fortnightly, provided however that a maximum of two allowances may be paid to an employee at any one time.

- Where a psychologist is asked to cover the work of a vacant position or colleague on leave;
- Hard to recruit position (position was vacant for more than six months before appointment);
- Co-ordinates a group outside ordinary hours, at least monthly, for patients/whanau;

- Sole psychologist in a service;
- Intern/Trainee Psychologist's Supervisor;
- Practicum/Placement Student Supervisor;
- Fluent in Te Reo Maori, New Zealand Sign Language or a Pasifika language (as determined by the DHB's cultural advisor or other suitable person).
- Approved Specialist under Substance Addiction (Compulsory Assessment and Treatment) Act 2017.

## FLEXIBLE WORKING ARRANGEMENTS

Insert a new clause 4.8:

**"An employee who makes a request for flexible working arrangements shall have their request considered in accordance with Part 6AA of the Employment Relations Act. All employees will have the right to reduce their FTE status to 0.5FTE upon completion of five years' service with the employer."**

## ATTENDANCE AT MEETINGS

Amend clause 21 to allow leave on full pay for attendance at the following meetings:

- Psychologists Board and its committees;
- The Health and Disability Commissioner;
- Professional association executive or governance meetings;
- APEX national or divisional executive meetings.



## ON CALL RATES

Amend clause 10.3 to provide on call rates of \$8 and \$10 for public holidays.

## WORKPLACE FACILITIES

Amend clause 13 to include four additional paragraphs:

"For psychologists to work most effectively with clients we need consulting rooms that are predictable, consistent, soothing and quiet.

Psychologists shall be provided with offices that are sufficiently quiet to have telephone conversations with professionals/clients about what may be confidential information. Wherever possible, including at the stage an employer is designing or refitting buildings, psychologists shall be provided with dedicated offices to meet with patients and conduct assessments, therapy psychological testing, clinical supervision and consultation work.

Client meeting spaces shall be sufficiently safe, welcoming, appropriately furnished and soundproof to enable clients to successfully engage in psychological services.



Behavioural approaches note how physical environments act as stimuli that contribute to the client's emotions and social behaviour.

Unpredictable or harsh environments can emotionally unsettle or dysregulate clients. This is especially important with traumatised, emotionally dysregulated clients often seen by psychologists. Conversely stable, predictable, soothing environments facilitate emotional processing and the therapeutic process."

## SABBATICALS

Seek a new clause in the Psychologists MECA:

### "Sabbatical leave

(a) Psychologists with more than six years' service (as defined in clause 2) shall be able to apply for a sabbatical.

(b) Sabbatical leave is paid of up to three months, or other approved time, whether a continuous period or a series of separate periods, to spend time at other clinical units or centres, universities or research institutes for the purposes of strengthening or acquiring clinical knowledge or skills or undertaking an approved course of study or research in matters relevant to practice as a psychologist.

(c) The application shall be to a committee composed of two DHB nominated psychology representatives and one APEX nominated psychology representative. The Sabbatical Committee shall determine its process and criteria and ensure all psychologists covered by this agreement are aware of this information and the approved applications.

(d) Psychologists may take one sabbatical every five years."

## SUPERVISION

Amend clause 15 to include a new sentence:

"Supervision relationships within a DHB shall be subject to yearly audit by the Psychology Leadership Committee. Where either a psychologist or DHB is not satisfied the amount, quality, appropriateness of supervision provided is sufficient to meet the clinical and supervisory needs, they may bring the issue before the Psychology Leadership Committee for determination."

## CONTINUING PROFESSIONAL DEVELOPMENT

- Amend clause 14.3 to \$4000 CPD per annum.
- Amend clause 14.4 to allow for accrual up to three years.
- Add a new sentence in clause 14.2 to the MECA - providing for a minimum ten days' professional development leave per annum, pro-rated for

those in private practice.

## There is a need to ensure greater consistency, promptness and transparency in CPD processes.

- Add in a new clause 14.11:

"Reasonable and agreed travel time shall not be deducted from the CPD leave entitlement.

Books and electronic devices such as a tablet or laptop can be purchased with CPD, where those items are necessary for clinical work.

DHBs shall ensure accurate and accessible tracking of the psychologists' CPD entitlement."

- Amend clause 14.7 to provide for processing of applications for CPD within 14 days, and allow for referral of an unsuccessful application for CPD to the psychology leadership committee.
- Amend clause 14.2 to provide for a day-in-lieu for each non-work day on which CPD is attended.
- New clause 14.12:

"Any unspent CPD money from the entitlements of an individual that expires shall be transferred to a CPD pool under the direction of the DHB's psychology leadership committee. This money must be allocated and spent within 24 months of it being redirected to the pool or shall expired."



## REIMBURSEMENT OF COSTS

- Amend clause 11 to provide for reimbursement of a psychologists' individually subscribed indemnity costs.
- Amend clause 10.2 and clause 14.5 to read "employees in secondary employment as a psychologist or private practice."

## ANNUAL LEAVE

Psychologists at Corrections are entitled to 5 weeks annual holidays after 1 years' service, increasing to 6 weeks after completing 4 years current continuous service. DHB medical staff also receive six weeks' annual leave.

- Amend clause 16.1 and 16.2 to allow for five (5) and six (6) weeks annual leave, depending on service.

## PARENTAL LEAVE

Amend clause 23.15 to provide for **22** weeks paid parental leave.



## TECHNICAL CHANGES

To be discussed.

## DOMESTIC VIOLENCE

New clause 40:

"In addition to the provisions of the Domestic Violence – Victims Protection Act 2018, the parties agree that:

1. An employee shall become entitled to domestic violence leave from their commencement of employment; and
2. Under clause 72E of the Act ("Employee must notify employer of intention to take domestic violence leave") the employee shall be entitled to chose the manager to whom they feel comfortable in making an application, and that manager shall keep information pertaining to that application confidential other than any reasonable disclosure necessary for the application of the Acts provisions and employer's business."

## SICK LEAVE

Amend clause 18.2 to include an additional sentence:

"Where an employee requires time off work for treatment for illness, for example for physiotherapy, chemotherapy or radiotherapy, and they have exhausted their sick leave, they shall be provided with additional leave on production of a medical certificate."



## PSYCHOLOGY LEADERSHIP COMMITTEES

**New clause 41 to provide for psychology leadership committees in every DHB:**

"Each DHB shall provide for a DHB-wide committee of psychologists. This committee at a minimum will include the professional leader(s) and APEX delegate(s). As appropriate it will include representatives of various departments and from across the spectrum of the profession including consultant, senior, early in career and intern psychologists.

The committee will be provided sufficient resources to effectively carry out its business and committee members will be released from other duties to attend once a month.

Each committee will determine its own rules for participation and decision-making.

The committee will oversee, make recommendations and implement work on matters such as:

- Induction and orientation of intern psychologists and psychologists;

- Auditing the efficacy and safety of clinical pathways, interventions and assessments;
- Advising clinical governance, operational management and DHB governance on psychological services within the overall model of care/change;
- Ensuring a high-quality programme of clinical education throughout the year including case reviews, grand rounds and journal clubs as appropriate;
- Support to psychologists during/after clinical incidents;
- Improving workplace facilities;
- Integrating DHB psychology with Te Ao Maori;
- Ensuring Pasifika client needs are met;
- Safe workloads and caseloads;
- Continuing professional development;
- Merit progression process and applications;
- Supervision;
- Allocation of psychology FTE;
- Scope of psychologists' role and duties including ensuring position descriptions adequately describe and reflect a positions' clinical work, teaching, research and consultative duties;
- Access to a range of training experiences for early in career psychologists;
- Proper use of the titles of senior and consultant clinical psychologist."





## TE AO MAORI

### New clause 42:

"The employer will take all reasonable steps and provide adequate resourcing to ensure all psychologists are culturally competent to work with Maori.

The employer will actively support, develop and implement strategies to increase the Maori psychology workforce.

The employer will actively support and contribute to the development of an indigenous Maori psychology profession that is better able to meet the needs and aspirations of Maori consumers of psychological services."



## RESPONSIBLE CLINICIANS

### New clause 43:

"During the term of this agreement DHBs will develop and implement a national training programme for psychologists to gain the skills and experience to take on the responsible clinician role under the Mental Health (Compulsory Assessment and Treatment) Act 1992."

## SCHEDULE A

### Insert a new clause in Schedule A:

*"Auckland Specific*

All employees who were employed prior to 1 October 2010 shall be able to apply for a retiring gratuity from their employer as per schedule B."

## INSERT NEW SCHEDULE D: PSYCHOLOGY WORKFORCE DEVELOPMENT STRATEGY

"The parties agree to work towards staffing District Health Boards at 20 FTE per 100,000 people in the population of the District.

The DHB's psychologists' committees will consider local needs and develop plans for the improvement of access to psychological services to be implemented as additional funding and psychologists become available.

The parties acknowledge that the Psychology FTE listed below represents the actual FTE of the DHBs as at 1 March 2019 and there will be no reduction in this FTE over the term of this agreement. Where the DHB proposes a reconfiguration of FTE within the current resourcing, it shall require the approval of the DHB's psychology leadership committee.

The DHBs acknowledge the importance of attracting graduate psychologists to rural and provincial areas. Psychologists in their first three years of work post-graduation who take up a position at a non-metropolitan District Health Board (Northland, Waikato, Bay of Plenty, Taranaki, Lakes, Tairāwhiti, Midcentral, Hawke's Bay, Whanganui, Wairarapa, Nelson Marlborough, Southern) shall be placed two steps higher on the salary scale than they would normally be entitled.

The employer parties shall establish a Psychology Workforce Development Service to forecast future workforce needs and to work with government to ensure adequate numbers of training positions at New Zealand universities, ensure secure funding of internship places at District Health Boards, and adequate supervision, support, mentorship and training for psychologists in their first three years of post-graduate practice.

The Psychology Workforce Development Service shall be under the joint governance of DHBs and APEX, with participation invited from the New Zealand Psychologists Board and professional associations as appropriate."

# AUCKLAND DHB

Directorate	FTE
Child Health	13.7
Mental Health and Addictions	57.83
Cardiovascular Services	1.8
Adult Community and LTC	6.7
Adult Medical Services	1.7
Surgical Services	1.2
Cancer and Blood Services	2.35
Support Services	0.4
Women's Health	1
<b>Total</b>	<b>86.68</b>

# CANTERBURY DHB

Area	FTE
Cardiology	0.4
Respiratory Outreach	0.5
Diabetes	1
Cancer Services Programs	3.5
Clinical Haematology	0.5
Nephrology	0.5
Child Health Cluster Wide	1.2
Paediatrics	1.5
Child Protection	0.5
CAF School Based Team	1.95
Psych Consultation	1.5
Mothers & Babies Community	1.5
Anxiety Disorders	3.5
Eating Disorders Community	2.9
Clinical Research	0.4
C Ward	2.1
CADS/CORS	0.1
North Community	2.3
East Community	2.2
West Community	2
South Community	2.3
Rural Community	0.5
Ashburton Community	0.6
Seagar	1
Hereford	0.5
IDPH Community	1
Te Whare Mauri Ora	1
Te Whare Manaaki	2
Forensic Community Team	0.8
SMHS Clinical Support	5.3
CAF Intensive Care	1
Youth Forensic Team	2.5
CAF Community South	5.2
Child & Adolescent Inpatient	1.5
Totara	1
PSAID Community	1
Child Development Service	1.4
Burwood Hospital Services	7.8
OPMH Community Team	3.7
Community Stroke	0.9
<b>Total</b>	<b>78.45 FTE</b>

# BAY OF PLENTY DHB

Division	cc Description	FTE
Allied Health	Allied Health: Management	0.80
Mental Health & Addiction Services	Child & Adolescent Services	7.20
	Voyagers	2.00
	Community Services - Whk MH CMH Adult	2.00
	Consumer Liaison	0.50
	Maternal MH	0.60
	Team North MH CMH Adult	3.40
	Team South MH CMH Adult	2.60
	Psychiatric Liason MH Older People	1.00
	Psychiatry for Elderly	1.80
Surgical Services	Clinical Pain Service	0.80
Woman Child & Family	Paediatrics Med: Tga	1.00
<b>Total</b>		<b>23.70</b>

# CAPITAL AND COAST DHB

Location	FTE
General Health	7.8
CCDHB MHAIDS	40.15
CCDHB MHAIDS Excluding Regional & Sub-regional Services	28.15
Professional Leadership	2.6
<b>Total</b>	<b>50.55 FTE</b>

# COUNTIES MANUKAU DHB

Division	FTE
ARHOP (Adult Rehab/Health of Older People)	3.0
Emergency, Medicine & Integrated care	5.4
Kidz First	1.0
Mental Health	41.89
Surgical, Anaesthesia & Perioperative	3.8
<b>Total</b>	<b>55.09</b>

# HAWKE'S BAY DHB

Division	FTE
Oncology, Hastings	0.5
Older Persons Mental Health Service, Hastings	1.0
Adult Community Mental Health, Wairoa	0.7
Adult Community Mental Health, Hastings	1.6
Child and Family Service, Hastings	4.7
Child Development Service, Hastings	1.95
Renal	0.3
Professional Advisor	0.2
Adult Community Mental Health, Napier	2.0
<b>Total</b>	<b>12.95</b>

# HUTT VALLEY DHB

Department	FTE
Child Development	2.1
Community Mental Health & Addictions Services	2.4
Community Mental Health & Addictions North	0.8
Mental Health ICAFS	15.56
Mental Health CREDS	1.7
Older Persons MHS	0.8
Social Work	1
<b>Total</b>	<b>24.36</b>

# LAKES DHB

Department	FTE
Cancer Unit Rotorua	0.9
Child Health Rotorua	0.9
ICAMHS Rotorua	1.6
ICAMHS Taupo	1.8
Adult Taupo	1.2
Adult Rotorua	2.6
PRIMHAS - Rotorua	1.1
PRIMHAS - Taupo	0.8
<b>Total</b>	<b>10.9</b>

# MIDCENTRAL DHB

Based in	FTE
Adult Community Mental Health	3.7
Child, Youth and Family Services Mental Health	5.125
Child Development Service	1.8
Alcohol and Other Drug Unit Rehabilitation Service	2.8
Maori Mental Health	0.6
<b>Total</b>	<b>14.9125</b>

# NELSON MARLBOROUGH DHB

Based in	FTE
Child and Adolescent Mental Health - Nelson Hospital	4.5
Child and Adolescent Mental Health - Wairau Hospital	1.5
Child Development/Paediatrics	0.6
Adult Community Nelson	4.3
Adult Community Tasman	3.8
Adult Community Marlborough	2.3
Inpatient	1
Alcohol and Drug	0.8
Psycho-Oncology	0.3
Psychology Liaison	0.6
Older Persons Mental Health	0.4
<b>Total</b>	<b>20.1</b>

# NORTHLAND DHB

Location	Area	FTE
Far North	Community Adult Mental Health and Addiction Services	0.6
	Child and Youth Mental Health and Addiction Services	1.0
Mid-North	Community Adult Mental Health and Addiction Services	1.0
	Child and Youth Mental Health and Addiction Services	1.0
	Community Adult Mental Health and Addiction Services	5.4
	Child and Youth Mental Health and Addiction Services	4.4
	Maternal & Infant Mental Health and Addiction Services	1.0
	Inpatient	1.2
	Psychiatry for Older People	0.6
	Child Health Centre	2.3
Whangarei	Oncology	0.5
	Psychology Professional Advisor	0.4
<b>Total</b>		<b>17.6</b>

# SOUTHERN DHB

Location/Division	FTE
Community Rehab	2
Early Discharge	1
Physio	1
Fredrick St Outpatients	0.3
Paediatrics	2.4
Cardiology	0.35
Psychosocial	1.4
Pain Clinic	0.5
CAFS - Southland	2
CMHT - Gore	1
CMHT - Invercargill	1.6
CMHT - Queenstown	3.4
Community Alcohol & Drug	1
Early Intervention	1
Family & Adolescent Mental Health	2.5
Forensic Allied Health	0.5
Intellectual Disability	2.3
MH - Older People	0.5
MH - Balclutha	0.4
MH - Dunstan	0.5
MH - Waitaki	0.9
Psych Day Allied Health	0.5
Psych Team North	2.5
Psych Team South	2
9B	0.8
Youth Forensic	1.1
Youth Speciality Services	2.3
<b>Total</b>	<b>35.75</b>

# TAIRAWHITI DHB

Division	FTE
Child & Adolescent Mental Health	2
Community Mental Health	0.875
Medical Day Ward	0.2
<b>Total</b>	<b>3.075</b>

# TARANAKI DHB

Location/Division	FTE
Adult - MH Inpatient	0.7
Older Persons - MH	1.5
Adult - MH Community	3.3
Adult - MH Community (Intern)	1
Adult - MH Community (Hawera and South Taranaki)	1
Child and Adolescent - MH	4.1
Paediatrics - Physical Health and Psychology	1
Adult - Physical Health Psychology	1.2
Professional Advisor	0.3
<b>Total</b>	<b>14.2</b>

# WAIKATO DHB

Location/Division	FTE
Adult Community MH - Hamilton	7.45
Child & Adolescent MH - Hamilton	10.25
Speciality & Acute Services - Hamilton	5.4
Rehab & Allied Health Services - Hamilton	12.8
Forensic MH Services - Hamilton	6.8
Adult Community MH - Te Awamutu	2
Child & Adolescent MH - Te Awamutu	2
Adult Community MH - Thames	3.6
Child & Adolescent MH - Thames	1.6
Speciality Services - Thames	1
<b>Total</b>	<b>52.9</b>

# WAIRARAPA DHB

Division	FTE
Child & Adolescent Mental Health	3.2
Adult Mental Health	2
<b>Total</b>	<b>5.2</b>

# WAITEAMATA DHB

Division	FTE
<b>Adult Mental Health Services</b>	<b>21.3</b>
North Auckland	5.9
West Auckland	5
Rodney Auckland	3.1
He Puna Waiora In patient Unit	1
Waiaatarua In Patient Unit	1
Liaison Psychiatry	1.8
Mental Health Admin	0.4
<b>Cultural Services</b>	<b>2.8</b>
Moko - Maori Mental Health	1
Isa Lei - Pacific Mental Health	1.8
<b>Community Alcohol and Drug Services</b>	<b>3.4</b>
Pregnancy and Parental Service	1
Youth Services	0.6
Across all other Community, Alcohol and Drug Services	1
Clinical Advisor	0.8
<b>Child and Youth Mental Health Services</b>	<b>18.6</b>
Early Psychosis Intervention	2
Pupuke Moana	1
Maternal Mental Health	1
Marinoto Rodney	1.5
Marinoto West	6.4
Infant	0.6

<b>Forensic Services - Mason Clinic</b>	<b>13</b>
Acute Hub	2.8
Rehab Stream 1	2.1
Rehab Stream 2	1.7
Kaupapa Maori Stream Rehab Stream 2	1.7
Rimu/Forensic Community Team	1.4
Pohutukawa/Intellectually Disabled Offenders Liaison Service	2
Court Reports	1.3
<b>Mental Health Services Older Units</b>	<b>5.6</b>
Kingsley Mortimer Unit	1
Community Mental Health North	1.6
Community Mental Health West and Sub-acute Treatment and Rehabilitation Team	2
Community Mental Health Rodney	1
Physical Health	4.2
Cancer Services	1.4
Child Health	1
Diabetes	0.5
Cardiology	0.4
Pain Clinic	0.9
<b>Total</b>	<b>68.9</b>

# WHANGANUI DHB

Division	FTE
Community AT&R	0.875
Community Mental Health - Marton (Waimarino and Rangitikei)	0.9
Community Mental Health - Whanganui	3
Child and Adolescent Mental Health	1.7
<b>Total</b>	<b>6.475</b>

# NOTES





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