Society for Industrial & Organisational Psychology Australia
www.siopa.org.au

The Psychology Board of Australia
G.P.O. Box 9958
Melbourne VIC 3001

Dear Colleagues,

RE: SIOPA's Response to Psychology Board of Australia's Code of Conduct Consultation

SIOPA is pleased to submit our response to the Psychology Board of Australia's Public Consultation: A Code of Conduct for Psychologists. To inform this submission, we consulted with our member base and compiled a comprehensive response, consisting of the following components:

- This covering letter outlines high-level considerations relevant to the submission;
- A completed consultation protocol (Attachment A); and
- A supplementary document that details concerns about specific items or components of the proposed code, particularly within the various applications and operations of Industrial-Organisational (IO) psychology (Attachment B).

Support for Change and Concerns About the Draft Code

While SIOPA supports the departure from the APS Code of Ethics to a new Code in alignment with National Law, we do hold reservations concerning the Draft Code of Conduct. These concerns need addressing to provide support for registered practitioners in IO psychology settings recognising the obligation of all practitioners to operate under the Code. Additionally, the proposed new Code of Conduct appears to emphasise clinical contexts of practice, and in our view, may not adequately reflect the diverse range of practices in alternative settings, including community psychology, sport and exercise psychology, educational and developmental psychology, forensic psychology, and counselling psychology.

Below, we outline the key remaining concerns of SIOPA, supplemented by Attachment A and B.

1 Importance of Updating the Code

1.1 First Nations health and wellbeing and Closing the Gap

We acknowledge recent changes to regulatory settings relevant to health practitioners, including the additional objectives and guiding principles in the National Law about cultural safety for Aboriginal and/or Torres Strait Islander people and communities. Cultural safety and addressing systemic racism are vital considerations across all health professions and for all practitioners in Australia, regardless of their settings. Specific and targeted effort is a crucial foundational step towards addressing continuing health inequities in Australia. Given the ongoing health disparities for First Nations people and a lack of meaningful movement toward Closing the Gap, it is essential that the psychology profession addresses Cultural Safety and First Nations health in its code.

We also are far from workforce parity (with only 0.7% of the registered psychologists identifying as Aboriginal and/or Torres Strait Islander). In the context of the significant and complex mental health and wellbeing issues facing First Nations people and noting the complex social determinants of health and wellbeing (including education, work, community etc.) that comprise the scope of the range of psychology

practitioners outside of clinical settings, we feel strongly that this is a critical component of the future code for all psychology practitioners.

 SIOPA supports the incorporation of cultural safety as an essential domain in the future Code.

1.2   Supporting interdisciplinary practice
Adopting a shared code of conduct, applicable to twelve health professions, ensures a common language and consistent expectations across disciplines. This becomes especially critical as models of care evolve and health practitioners navigate increasingly complex environments.

SIOPA recognizes the importance of aligning with this shared code to foster interdisciplinary practice and coordination across various settings, including those settings that IO psychologists operate in.

2   Transitioning from Principles to Behaviours

SIOPA notes that the new proposed Code has a set of prescribed behaviours that are required or prohibited in practice. We understand and appreciate the rationale for this set forward by the Board (as outlined in the Board's Consultation Paper). However, feedback from members, SIOPA's Board, and IO Psychology practitioners suggests that the current approach has veered toward being overly prescriptive. This excessive detail, while applicable to clinical settings,often hinders understanding of how the Code applies to other areas of practice like IO Psychology. We have outlined some examples of this in following sections, and in Attachment A and B. There is a continued and deep concern of some practitioners regarding the regulation of IO Psychology, and anecdotally we hear that this means many students are opting not to pursue endorsement and practice as general psychologists, and some are choosing not to renew their general registration. This dilemma stems from the challenge of defining psychological practice in IO settings, which is difficult with a diverse group of practitioners who operate in vastly different settings.

This has been a concern of the IO profession for a long time, and we continue to see challenges in the regulation (including obligations to the Code of Ethics / Practice) in IO psychology settings. Historically, the principles-based approach to the Code of Ethics has allowed IO practitioners to apply their own ethical thinking to issues and determine appropriate actions as guided by the high-level principles, but the use of a behavioural code makes this highly challenging. The fact that practitioners would find it easier to not be registered than to maintain registration under the new proposed Code is a significant concern to the profession.

The limitations of behaviour-based guidance for ethics in psychology have been widely discussed in the international sphere. Rigid and prescriptive guidance is one concern that has been raised previously. There is always the risk that the behaviours listed are interpreted as the full and complete list of what is and isn't allowed and lacks flexibility for addressing novel or different dilemmas. No single code can realistically anticipate all ethical issues and we note throughout our response that we do not think that the proposed Code currently captures the range of non-clinical settings and types of psychological practice, thus compromising the ability for practitioners to apply appropriate and ethical decision-making in practice.

SIOPA notes that there is a significant risk that practitioners might choose to not be registered than to operate under the proposed Code and that the behaviourally-based code is not suited to most settings / contexts.

3   Reflecting the Diversity of IO Psychology Practice

3.1   Complex and Contradictory Requirements in Different Settings

IO psychology encompasses various sectors, settings, and roles, often involving psychologists operating in multifaceted capacities. The current Code's applicability to these diverse roles and contexts is unclear, leading to ambiguity regarding obligations and expectations. The Code fails to accommodate the complexity of psychologists including those who might operate under multiple regulatory frameworks, and organisational policies. Psychologists operating outside of clinical settings (including but not limited to IO Psychology) often have multiple roles and responsibilities where they are, for example, a manager, psychologist, team member, general advisor, and so on. It is not clear in the code the extent to which or how the Code might apply to those roles. For example, the comments in the Code related to performance metrics and profits might be difficult for those psychologists who also operate in for-profit organisations to interpret and understand how this applies in practice. Without understanding what organisational psychology is and does, and having a clearly defined scope of practice for these practitioners that considers those tasks that might not usually be 'psychological practice' but should be considered as such (e.g., organisational design advice from a psychologist) we do not believe the current code would be appropriate for most settings. The complexity in this space is not just related to code but is an ongoing issue for understanding what the scope of the practitioner role versus other organisational roles.

There are also challenges in relation to understanding who the client in these settings is, which is discussed in 3.2 below.

SIOPA does not think that the proposed Code appropriately considers or reflects the diversity of settings, context, and practice in Psychology – including but not limited to IO Psychology.

3.2   Complex Multiple Clients and Relationships Outside Clinical Settings

When psychologists are operating outside of clinical settings, the complexity of multiple relationships and clients is often different and more nuanced than the code currently captures. The inherent assumption in the proposed Code is that the 'client' is always the most vulnerable in the relationship. In organisational contexts, the 'client' can oftentimes be an organisation, and actually the most vulnerable person might be an employee or other individual outside of the organisation, the general public (e.g., in policy/academic settings), and sometimes the practitioner themselves.

Understanding the complex ethical interactions that arise in these settings, and having appropriate ethical guidance to guide decision making, is crucial to protect the public, clients, and practitioners. This has been recognised internationally (e.g., by the APA and in the broader peer reviewed literature[1]) and requires detailed and concerted consultation, discussion, and design to address appropriately.

The proposed Code does not adequately consider the complex multiple client and relationships that often exist in work beyond clinical settings, or how this (1) would be governed by the proposed code, or (2) would guide practitioners' ethical decision making in these settings.

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[1] E.g., Watts, L., Lefkowitz, J., Gonzalez, M., & Nandi, S. (2023). How relevant is the APA ethics code to industrial-organizational psychology? Applicability, deficiencies, and recommendations. *Industrial and Organizational Psychology, 16*(2), 143-165. doi:10.1017/iop.2022.112

4   Supporting the range of diverse and vulnerable groups

SIOPA supports the inclusion of Aboriginal and/or Torres Strait Islander specific content and sections in the code. We believe that the separation of Aboriginal and/or Torres Strait Islander people from other culturally and linguistically diverse (CALD) or vulnerable groups is important and acknowledges the unique challenges and continued health inequities faced by First Nations people.

We also acknowledge a subsequent section that includes recognition of CALD groups. However, we note that there are a range of other diverse and/or vulnerable groups that are not recognised explicitly in the code. While we understand that an exhaustive list would never be possible and might date the document as things move and shift over time, we do think there should be more clear and specific recognition of this and the range of other diverse groups that might be impacted by the code.

SIOPA suggests that the code might better consider and represent other diverse and / or vulnerable groups.

5   Recommendations for Moving Forward

SIOPA appreciates the opportunity to provide detailed feedback, as outlined in this letter and the attached documents. While we support the shift from the APS code, the current Draft Code requires further refinement. We recommend the following steps:

1. The Psychology Board revisits the proposed Code with broader input from diverse psychology practitioners, ensuring representation across endorsement areas, practice fields, contexts, and settings.
2. Reconsider the transition to prescriptive behavioural expectations, including considering whether the Code should exclusively apply to clinical settings or if flexibility is required to encompass diverse applications.

Thank you for your attention to these matters. SIOPA is committed to working collaboratively to advance the ethical foundation of psychology practice in Australia. SIOPA is well-placed as a member-based organisation for organisational psychology in Australia to support or assist the Board as appropriate.

Should you have any further questions or wish to seek clarification on our submission, please feel free to contact myself as the current President via email siopapresident@gmail.com.

Kind regards,

Abby Haslehurst   Andrea Titus
SIOPA President   SIOPA Vice President

Attachment A: Response to provided consultation questions

Please see the following table that outlines SIOPA's response to the provided consultation questions this is supplemented by our provided covering letter and Attachment B.

Table 1. SIOPA responses to PsyBA consultation questions

General Questions
1.   **Do you support the Board's preferred option to implement a regulatory code of conduct?**
Response: SIOPA supports the need for an appropriate code of conduct for Psychology practitioners.
2.   **Do you agree with the Board's approach to develop the draft Psychology Board of Australia code of conduct based on the shared Code of conduct?**
Response: SIOPA supports the alignment of our professions code to the shared Code of Conduct for health practitioners. In our view this is a good step towards having a shared expectations and understanding across health professions and is an important part of supporting increasing interdisciplinary care and practice in both clinical and non-clinical settings.
3.   **Do you support the Board's proposal to adopt the draft Psychology Board of Australia code of conduct as the regulatory code for the psychology profession?**
Response: SIOPA supports the move away from the APS code of ethics but does not support the current proposed board-authored code of conduct. It does not adequately understand or capture the range of settings and types of practice of psychologist outside of clinical settings. We have significant concerns about the behaviourally anchored code and its flexibility to address novel or different ethical issues. We have significant concerns about the content of the code and its understanding of multiple clients and relationships. Detail of these concerns is outlined in our covering letter and in our provided Attachment B. We do not think the code will be appropriate to regulate IO psychology practitioners and anecdotal feedback is that some members will find it easier to not be registered than to practice under the proposed Code.
Content of the draft Psychology Board code
1.   **Does the draft Psychology Board of Australia code of conduct set the minimum standards expected of psychologists by their professional peers and the public?**
Response: SIOPA thinks that the proposed Code sets out well the expectations and minimum standards for clinically based psychologists, but that the code does not clearly articulate expectations for practitioners, peers, clients, or the public for practitioners outside of clinical settings.

2. Are there any specific areas of psychological practice that are not adequately addressed in the draft Psychology Board of Australia code of conduct?

Response:

Any psychological practice outside of clinical settings does not seem to be adequately addressed in the proposed Code. Our response is presented from the lens of organisational psychology, but we anticipate that there would be similar concerns from other endorsement areas and for clinical psychologists who are not delivering one-on-one clinical services. This includes, but is not limited to:

- Understanding for-profit settings of psychology outside of clinical settings
- The range of roles including policy, academic, internal consultant, external consultant, and so on that psychologists might operate in
- The understanding of the *multiple roles* psychologists might hold – including as managers, business owners, and organisational members – and the range of expectations and requirements of this role (in order to give guidance as to when these expectations or requirements clash with obligations under the proposed Code)
- The settings in which there are multiple clients or other involved stakeholders and the required nuanced understanding about who is the vulnerable party in these settings (noting that for some practitioners, the vulnerable group might be the public, another stakeholder / group, or even themselves)

3. Are there any sections of the draft Psychology Board of Australia code of conduct that would be unworkable for your organisation and/or stakeholders?

Response:

There are multiple areas of the code that would be difficult / near impossible to understand or apply to the diverse IO psychology roles and settings.

We have provided a more detailed description of this in Attachment B but note that this might not be an exhaustive list, noting the timeframes for consultation mean that some stakeholders / members may not have had an opportunity to contribute their views.

4. Is the language and structure of the draft Psychology Board of Australia code of conduct helpful, clear and relevant?

Response:

As mentioned previously, the behaviourally-anchored structure of the proposed Code makes it difficult to understand or interpret outside of clinical settings. The language also at times remains quite clinically focused, which might be difficult for diverse practitioners to interpret and / or for the general public to understand.

Community Impact
1. Would implementation of the draft Psychology Board of Australia code of conduct result in negative or unintended effects for Aboriginal and Torres Strait Islander Peoples? If so, please describe them.

Response:

SIOPA supports the inclusion of discrete and separate principles for Aboriginal and/or Torres Strait Islander people and communities. However, we do not feel we are the appropriate group to describe or anticipate any impacts for First Nations people.

2. **Would endorsement of the draft Psychology Board of Australia code of conduct result in negative or unintended effects for other diverse groups or vulnerable members of the community? If so, please describe them.**

Response:

As we have mentioned in our response to other questions, SIOPA does feel that there is a risk that some IO psychology practitioners (including those endorsed and those with general registration) will not feel they can operate as psychologists under the proposed code. They will then choose to not maintain their registration (with likely minimal impact to the scope of work they can and do complete). IO psychology often operates in a fairly unregulated market where many other practitioners in the space are not trained nor registered as psychologists.

It is SIOPA's view that registration is a good mechanism for supporting the quality and safety of the public in the range of settings we operate in. In our view, the risks associated with some IO psychology practice mean that, while not required in most cases, registration is a good mechanism for supporting the quality, safety, and rigour of psychological practice.

It is almost impossible to get a good sense of the potential impact or risks associated with more practitioners choosing not to be registered, or who this would impact. But given the range of roles IO psychology completes and the number of individuals impacted by this practice – the impacts could be significant and widely felt. For example, having IO psychologists who understand and advocate for fair and culturally appropriate personnel assessment means that organisations implement better practice to support vulnerable groups in selection processes.

3. **Would endorsement of the draft Psychology Board of Australia code of conduct result in any adverse cost implications for health practitioners, higher education providers, employers, clients/consumers, governments or other stakeholders? If so, please describe them.**

Response:

We believe that the impact on IO psychology would be significant and detrimental to the profession, its practitioners, and the people who receive and access the range of services we provide.

Transition and implementation
1. **Do you agree with the proposed transition timeframe?**
Response:

SIOPA has no concerns with the timeframes, except that it does not allow for any time to review the Code in light of the provided feedback from the profession.

2. Would there be any implementation issues for your organisation and/or stakeholders that the Board should be aware of?

Response:

As per our response to the question above. In addition, we anticipate a lot of confusion from IO psychology practitioners and students about what the proposed Code means for them in their context.

General feedback

1. Do you have any other feedback or comments about the draft Psychology Board of Australia code of conduct?

Response:

Please see the detail provided in our covering letter and in Attachment B.

Attachment B: Examples of concerns / issues identified

Please see the following table that outlines some of the concerns / issue identified by practitioners / SIOPA. Please note this is in order of where these issues arise in the document, and not in order of importance.

Note: this feedback is provided in the context of our overarching feedback that the current proposed Code is not fit for purpose or appropriate for IO Psychology practitioners, practice, and settings.

Table 2. Examples of concerns / issues related to content in the proposed Code

Section / area	Issue / Concern	Recommendation if any
Preamble – scope of the code	SIOPA would like to note that we are not sure most practitioners would understand the scope of co-regulatory authorities or what this means in the context of the code.	Links / reference to more guidance about this might be appropriate. Training / guidance for students and newly trained practitioners might be important.
Preamble – what the code does not do	SIOPA would like to note that the point (b) (referring to employment issues being outside of scope) seems to contradict the fact that there are employment issues included in the scope of the code (e.g., in relation to bullying and harassment).	Refine and clarify content.
Preamble – professional values and qualities	We note that the list of qualities is of value. However, we suggest: 1. The inclusion of wellbeing in point (b) recognising the different dimensions of wellbeing as part of health 2. The inclusion of other settings in point (h) …. E.g., _"committed to safety and quality in healthcare and all settings in which they operate and practice"_	Please see suggestions in the description of issues.
1 - 1.2 (f)	We understand the importance of ensuring that practice is based on best available evidence, and that this should be the guiding factor rather than financial gain / incentives. However, there are times where, for example, value for money from the perspective of the organisation might also guide decision making about assessment / intervention options and it might be up to a psychologist to make a recommendation that has to consider and balance these aspects to inform a pragmatic option.	Clarity about how this might be included or note in the proposed Code would be of benefit to IO psychology practitioners.
1 - 1.2 (g) / 1.2 (i)	These are some examples of the use of 'client' which is complex and difficult to understand and interpret in IO settings.	Reconsider wording and/or the definitions of clients in scope of the Code and clarify throughout

1 – 1.2 (k)	SIOPA does not think that the wording for this is clear enough (in this section and in other sections e.g., 1.3 where psychological service resourcing is discussed) for some practitioners and most of the public to understand or interpret. We understand that this is a complex space and has many complex factors (e.g., MBS items, rebates, Better Access session numbers, etc.).	More clarity in the wording and intention of this item including consideration of the application to settings outside of clinical / MBS access.
2.2	Cultural safety is critical and important to acknowledge in the context of the proposed Code. We understand the need for the Code to align with the National Scheme's definition of cultural safety, however, it was raised by some members that the reference to specific health plans might date the document and mean that it becomes outdated quickly.	Reconsider the reference to dated health plans / content in all sections to ensure that the Code remains applicable over time.
3.2 (j)	We understand the intent of this item, and agree it is important that the roles and responsibilities of the psychologist are carefully described. However, in IO psychology settings there might be a range of different parties and the practicality and purpose of this is more complex, especially in relation to describing financial arrangements (e.g., does this include specifying who is funding a service?). This point provides an example of (1) the practical implications to IO practitioners to operate in line with the code is complex; and (2) how the lack of clarity as to what is included / considered in the scope of psychological services is unclear.	Review this and other related items in the context of IO psychology and/or other psychology settings. Review and clearly define what the scope of 'psychological services' is in relation to the proposed Code.
3.3 (e) / (j)	We assume that the intention of 'records' is in relation to health records and data. If so, this should be clear.	Clearly define records.
3.3 (i)	We are unsure as to the scope of this item and how it might apply for some IO psychology practitioners. For example, those involved in large projects that culminate in a report that might include deidentified feedback from stakeholders / relevant people. Would this be considered a breach under this item? The practicality of getting written and informed consent for large data collection is something that is often considered in most projects, but might be challenging in some settings. Some practitioners in consultation also raised	Review and reconsider the item including its scope and purpose.

	concerns that, for example sharing on LinkedIn that they had run a workshop or training session in org settings, might be considered a breach under this code as currently written.	
3.3 (k)	An example of an item only applicable to some practitioners. While this is not in and of itself an issue, it might be worth considering the extent to which it is and has been made clear that some items might not apply to all practitioners.	Consider clarifying / review.
4	Please note that the inclusion of *'participate in their care'* in the principle means that it is inherently quite clinically focused.	Review and reconsider wording and use of 'care' here and throughout the document.
4.1	This is an example of a place where the wording of 'client' would not make sense in the context of IO psychology.	Reconsider the use of client throughout the document and recognise the different types of clients that might existing in psychology.
4.1 (d)	We understand and appreciate the intent of this item and agree in principle. However, as raised in our covering letter, we think this fails to consider the range of different groups that might be involved in IO psychology work and how the 'client' might not always be the one with the least power in that relationship.	Reconsider the wording / context of this and similar use of 'client' throughout the proposed Code.
4.2 (g), (h), (i), (j), (k), (l)	These items are examples of behaviours that might not be pragmatic, practical, or apply to the scope of IO psychology work.	Consider the applicability of items to settings outside of clinical work, in these examples and throughout the proposed Code.
4.7	An example of where there is no ability to apply this principle outside of clinical settings.	Consider the applicability of items to settings outside of clinical work, in this example and throughout the proposed Code.
4.8	We understand and appreciate the intent of this item and agree in principle. However, as raised in our covering letter, we think this fails to consider the range of different groups that might be involved in IO psychology work and how the 'client' might not always be the one with the least power in that relationship. In addition, conflicts of interest in organisational settings is often more complex and novel than other settings, and could be expanded in this section (and in 8.12).	Reconsider the wording / context of this and similar use of 'client' throughout the proposed Code. Consider more context relating to complexities about conflicts of interest in IO settings.
4.9	Multiple relationships in IO settings can be complex. For example, the client might be an organisation, and then an employee of that organisation might access / be the focus of that service / intervention.	Review and reconsider the descriptions of multiple relationships in consideration of the complexity in IO settings.

	The description as it currently stands does not recognise the ways in which IO psychology often has multiple relationships, or give appropriate guidance to practitioners / students as to the ethical issues face and how to manage them. The option of discontinuing the relationship is not always possible in these settings.	
5.1 (d)	This item currently reads in a way that seems to imply commercial arrangements with colleagues are sometimes or often exploitive in nature. There is a fine balance between appropriate commercial interest and profit that is not clearly captured in the current Code, especially outside of direct clinical healthcare settings.	Consider revising and rewording.
5.2	While this might apply in clinical settings, it does not recognise the ways in which multidisciplinary teams might function in other settings.	Consider revising and rewording.
5.3 (a) and other items	The extent to which this might mean that some psychologists in organisational settings are or feel obligated to report issues is complex. It also fails to recognise the occasions in which reporting might put the person experiencing issues at risk, or the risk carried by the practitioner and the complex ethical decision making associated with this.	
6.3	There are some items in this section that could be considered to be a scope of practice issue. For example, better design of workplaces to support health and wellbeing would be the scope of Organisational psychology trained practitioners, intervention in school settings of education and school trained practitioners and so on.	Consider adding wording to specify that the decisions about practice and efforts to support wellbeing should be within the appropriate scope of that practitioner.
8.5	The extent and nature of records relevant in the range of IO psychology roles is unclear. As such, expecting practitioners to be able to comply with this without broader consideration as to what those records are, and how the can and should be maintained when there might be overarching confidentiality agreements in place (e.g., with an organisation, or between organisations such as through a SOA arrangement) needs consideration and explanation.	Review the content from the lens of IO psychology and other non-clinical work.

	Who owns and maintains information (e.g., individual versus organisation) also needs to be considered.	
8.8	It is unclear if this would extend to circumstances relevant to IO psychology, such as assessment of candidates in a job selection process. If so, this should be clarified.	Review and revise from an IO psychology perspective.
8.12 (g)	It is usual practice in many organisations to have appropriate performance metrics, targets and key performance indicators at individual, team, group and organisational levels. This as currently worded seems to imply that there are some potential or real issues with performance metrics, which might not be true of all practitioners. The extent to which practitioners will or can control the organisational metrics they are held to is oftentimes limited and might mean they are inclined to discontinue registration.	Review and consider original intent and purpose of item in the context of non-clinical settings.
8.13	This section, in the context of IO psychology where an organisation may be a 'client' would not be commercially competitive or viable. We would also appreciate further clarification from the Board in relation to (g ii.) and how this might apply or not to IO psychology practice and settings.	Review and consider original intent and purpose of item in the context of non-clinical settings.
9.1 / 9.2	Psychosocial hazards at work is an important area of practice for IO psychology and other relevant professions. In Australia, there is a rapidly growing body of work about what these hazards and risks are and codes of conduct that govern their management by people who conduct business. Understanding these hazards, and the way in which system / organisational factors contribute to risk (not individual factors) is a crucial point to understand. We do not think that the current content in 9.1 demonstrates a good understanding of these hazards and risk factors, or appropriately models the fact that system / job design and intervention is often part of risk mitigation.	Review and reconsider this section in line with best practice and regulatory frameworks in Australia.