Reflections on the Future of Professional Psychology

Cynthia D. Belar, PhD, ABBP
APPIC 2012
Objectives

• Describe one opportunity
• Describe one challenge
• Identify steps needed to achieve recognition as a health profession
Opportunity: Psychology as a Health Profession
Health Care Reform

• Improve quality and safety
• Bending the cost curve
• Primary care as the base
• Growth of Patient Centered Medical Homes and Accountable Care Organizations
• Community Health Centers - the Nation’s Safety Net
Primary Care Health Centers
Insurance Source of Health Center Patients

- Uninsured: 14%
- Medicaid: 38%
- Medicare: 8%
- Other Public: 3%
- Private: 14%

National (2010)
Workforce Development
Psychology as a Health Profession

• Specialty mental health psychology
• Specialty clinical health psychology
• Primary care psychology: Where many specialties in professional psychology meet
Psychology is a primary care and a specialty care health profession.
Roles/Services in Primary Care

- Consultation (case centered and systems centered)
- Assessment and triage
- Psychological interventions
- Health promotion and disease prevention
- Team building
- Research (incl. QI)
- Program development
- Administration
- Supervision
- Education and Training
Primary Care Training

APPIC Directory

• APA accredited internships
  • 101 (22%) major rotation
  • 195 (42%) minor rotation
• 47 (37%) postdoctoral residencies
BEA Primary Care Training TF
Survey Results

54% of doctoral programs
58% of internships
54% of postdoctoral residencies
BEA PCTTF Survey

- Broad, general and diverse
- Adults most common population served
- All provided Intervention
- 90+% provided consultation and assessment
- >30% research in doctoral and internship (62% in postdoc)
- More program development at internship and postdoctoral levels (40%, 80%)
### Barriers to Primary Care Education and Training

<table>
<thead>
<tr>
<th>Barriers</th>
<th>Doctoral (n=28)</th>
<th>Internship (n=31)</th>
<th>Postdoc (n=25)</th>
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</thead>
<tbody>
<tr>
<td>Lack of access to primary care setting</td>
<td>35.7%</td>
<td>19.4%</td>
<td>20.0%</td>
</tr>
<tr>
<td>Lack of trainee interest</td>
<td>25.0%</td>
<td>12.9%</td>
<td>4.0%</td>
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<tr>
<td>Lack of trainee readiness</td>
<td>17.9%</td>
<td>9.7%</td>
<td>8.0%</td>
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<tr>
<td>Financial support for trainees</td>
<td>57.1%</td>
<td>41.9%</td>
<td>56.0%</td>
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<tr>
<td>Financial support for supervisors</td>
<td>60.7%</td>
<td>41.9%</td>
<td>44.0%</td>
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<tr>
<td>Faculty expertise</td>
<td>50.0%</td>
<td>22.6%</td>
<td>12.0%</td>
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<tr>
<td>Faculty attitudes</td>
<td>14.3%</td>
<td>12.9%</td>
<td>12.0%</td>
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<tr>
<td>Institutional barriers</td>
<td>25.0%</td>
<td>45.2%</td>
<td>52.0%</td>
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<tr>
<td>Insufficient time for adding new competencies</td>
<td>n/a</td>
<td>n/a</td>
<td>20.0%</td>
</tr>
<tr>
<td>Other</td>
<td>14.3%</td>
<td>25.8%</td>
<td>12.0%</td>
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# Similarity to Training in General Professional Psychology

<table>
<thead>
<tr>
<th>Similarity</th>
<th>% Agreement</th>
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<tr>
<td>Radically different</td>
<td>23%</td>
</tr>
<tr>
<td>Moderately different</td>
<td>60%</td>
</tr>
<tr>
<td>More similar than different</td>
<td>15%</td>
</tr>
<tr>
<td>Synonymous</td>
<td>2%</td>
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</table>
Action Steps

• Develop resources for faculty/supervisor and program development
• Promote research and training in program and patient outcomes research
• Continue advocacy efforts for funding for training
• Expand primary care competency models and competency assessment tools.
Interprofessional Practice
Values and Ethics

Work with individuals of other professions to maintain a climate of mutual respect and shared values.
Roles and Responsibilities

Use the knowledge of one’s own role and those of other professions to appropriately assess and address the healthcare needs of the patients and populations served.
Interprofessional Communication

Communicate with patients, families, communities, and other health professionals in a responsive and responsible manner that supports a team approach to the maintenance of health and treatment of disease.
Interprofessional Education

“When students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes” (WHO, 2010)
BEA Award for Interdisciplinary Training

- University of Florida, Department of Clinical and Health Psychology, interdisciplinary science, practice and teaching – doctoral, internship, postdoctoral

- Geisinger Medical Center – pediatric psychology - postdoctoral and primary care providers
Working with psychology trainees improves my communication with patients, families, communities, and other health professionals. (Cubic, 2011)
The presence of psychology trainees at the family residency sites has lead to an increased emphasis on psychosocial issues overall. (Cubic, 2011)
Patient-Centered Primary Care Collaborative

www.pcpcc.net

• APA member of Executive Committee
• Education and Training Task Force
• Summit October 21, 2011 – 2 panels
• Webinar on interdisciplinary training. Barbara Cubic, PhD.
• Curriculum Resources: http://www.pcpcc.net/educateform1
 medEdPORTAL

- Association of American Medical Colleges (AAMC)
- Dr. Grus represents APA on advisory group
- Collect competency-based learning and assessment resources
- Funded in part by the Josiah Macy Jr. Foundation
- Call for submissions: www.mededportal.org/ipe
Institute of Medicine
Global Forum on Innovation in Health Professional Education

• Multinational, multidisciplinary approach to exploring promising innovations in health professional education
• Provide an ongoing, innovative mechanism to cultivate new ideas through global, multidisciplinary collaboratives
Challenge for Psychology: Defining a Workforce
Psychologists are recognized as Health Service Providers if they are **duly trained** and experienced in the delivery of preventive, assessment, diagnostic and therapeutic intervention services relative to the **psychological and physical health** of consumers based on: 1) having completed scientific and professional training resulting in a doctoral degree in psychology; 2) having completed an internship and supervised experience in health care settings; and 3) having been licensed as psychologists at the independent practice level. (APA, 1996)
Education and Training for Health Service Psychologists Work Group (E&T4HSP)

- APA, Council of Chairs of Training Councils (CCTC), Council of Graduate Departments of Psychology (COGDOP)
- Blueprint July 2012
Advancing the Culture of Competence

Defining “duly trained” for HSP
Overlap

Clinical Psychology

School Psychology

Counseling Psychology
Health Service Psychology
Why is this important?
Trends in Health Care

• Increased national concerns about quality health care and preparation of health professions

• Safe, effective, efficient, patient-centered, culturally competent, team based
Benefits of articulating HSP competencies

- Inform E&T programs, students, employers, policymakers and the public
- Inform APA Commission on Accreditation
- Move away from training model wars
- Help in “branding”
The competencies of psychologists who provide health services should be clearly articulated and understood by faculty, students, regulators and the public.

- Scientific Knowledge and Methods
- Research/Evaluation
- Professional Values and Attitudes
- Individual and Cultural Diversity
- Ethical and Legal Standards and Policy
- Reflective Practice
- Relational
- Evidence-based Practice
- Assessment
- Intervention
- Consultation
- Teaching
- Supervision
- Interdisciplinary Systems
- Professional Leadership Development
- Advocacy
Implications for E&T

- More focus on biology, genetics
- Interprofessional competence
- Self-assessment and lifelong learning
- Health policy and population perspectives
- Consultation, supervision, leadership
All health service providers in psychology should have skills in conducting practice-based research.

- Quality improvement research
- Outcomes research
- Program evaluation
- Needs assessment
- Cost-benefit models
Challenge:

Quality Assurance
What is a Profession?

3 Core Components
1. Specialized body of knowledge

- requires “advanced knowledge in a field of science or learning customarily acquired by a prolonged course of specialized intellectual instruction”
- “predominantly intellectual”
- “consistent exercise of discretion and judgment”
- preparation occurs within institutions of higher education

(Fair Labor Standards Act 29 C.F.R. x541.301(a)(2007))
2. Standards including ethics code

- Self-regulating
- Ethics Code, National Register, ABPP
- For E&T: Accreditation – the only form of self-regulation/QA that is actually overseen by the federal government
3. Uses its knowledge and skills to serve the public and promote human welfare.
The Social Contract
Accountability

Given a number of trends in our society, including the rise of consumerism, the public has increasingly wanted more accountability and transparency for its part in this contract, and where this has not seemed forthcoming, the government, on behalf of the public, increases regulatory efforts.
There is only one accrediting body recognized by the U.S. Secretary of Education for preparation in professional psychology.

- Membership criteria and designation do not address issues of quality or quality enhancement
- Regional accreditation is for institutions, not programs
APA Commission on Accreditation

- Commissioners nominated from communities of interest
- Peer review process
- Independent in decision-making
- Financially self-supporting
- Self-study expected of programs is expected of the CoA
Quite simply, if a program were to have as its goal the preparation of psychologists to provide entry level health care services, the outcomes should then reflect the competencies seen as essential by the profession for those psychologists.
We cannot say that the workforce in psychology has been prepared in programs that have met the standards of the profession and gone through a recognized quality assurance method.
The Critical Question

What will it take for governments to have confidence in the self-regulating aspect of education and training for professional practice in psychology and refrain from defining it themselves?
Need to move forward:

A single standard

A single standard regarding psychologists who are prepared for entry to practice that includes a quality assurance method defined by the profession and trusted by the public.
Why

• To demonstrate accountability
• To self-regulate as expected of a mature autonomous profession
• To protect and empower students
• To diminish the influence of external bodies in defining standards for psychology
• To gain greater access to federal funding for E&T in psychology
• To sit as equals with other health professions
To set a vision for the future and ensure the health of psychology as an autonomous profession.

If we don’t do it, who will?
Need to move forward: 
Mechanisms for growth

- New programs and innovations
- A pathway to accreditation
- Out for public comment
- http://apaoutside.apa.org/AccredSurvey/Public/
Need to move forward:
Expansion of accredited internships

- Internship imbalance
- Workforce analyses
- Unmet needs
- Financial support
Graduate Psychology Education Program (GPE)

- Health service psychologists, interdisciplinary, underserved populations

- **Total funding for GPE since 2002:** $31.7 million
HRSA Bureau of Health Professions

- **SEC. 756. MENTAL AND BEHAVIORAL HEALTH EDUCATION AND TRAINING GRANTS**
- RFP expected April 2012
- $5 million in FY2012 to expand APA accredited internship programs
APA Advocacy
BEA Internship Stimulus Package

• $3 million
• Expand capacity for quality internship training
  – “Shovel ready”
  – Jump start new programs
• In collaboration with APPIC
Federal Education Advocacy Coordinators

10 Regions
20 FEDACs
450 Campus Training Representatives
The “New York 22”
Collaborative Advocacy

- APA (ED, APAGS, Dr. Ellen Garrison)
- APPIC – Dr. Gene D’Angelo
- NYSPA – Tracy Russell

Carolyn George
Kristen Horan

Kerry Torrell

Jason Edgar
Alexandra Morris
Akeisha Mitchell
EdAT

Education Advocacy Trust
State/Private Level

- Participation in Medicaid plans
- Insurance industry support
  - Direct support of training
  - Reimbursement of intern services
APPIC’s Secret Weapon
Thank you
cbelar@apa.org