



New Guidelines Inform Practice in Health Care Delivery Systems



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Psychologists practice in an increasingly diverse range of health care delivery systems. In February 2011, the American Psychological Association (APA) adopted *Guidelines for Psychological Practice in Health Care Delivery Systems* to help practitioners and others conceptualize the roles and responsibilities of psychologists in a variety of practice settings.

The guidelines are available online at www.apa.org/about/governance/council/policy/hospital-privileges.pdf.

Good Practice interviewed Mary Ann McCabe, PhD, 2010 chair of the Committee on Professional Practice and Standards, which developed the guidelines. Dr. McCabe addressed the following questions about the content and uses of the health care delivery system guidelines.

Q: To what practice settings do these guidelines pertain?

A: The 2011 guidelines build upon earlier APA guidelines and practice documents focused on psychology practice in hospitals. Over the last few decades, psychologists have assumed more diverse roles in mental, behavioral and physical health care, and the systems in which psychologists practice have evolved. These new guidelines pertain to the full range of health care delivery systems, including integrated primary care facilities, tertiary care hospitals, rehabilitation centers, nursing homes, outpatient surgery centers and mental health/substance abuse treatment centers.

Q: How are changes in the U.S. health services delivery system reflected in the new guidelines?

A: Practice guidelines are intended to facilitate the continued, systematic development of the profession. The health care arena is changing more rapidly than ever before, and psychologists are positioned to assume an ever greater role in advancing health, mental/behavioral health

and health care systems. The new APA guidelines are sufficiently broad to cover the full range of activities and settings in which psychologists are practicing currently, and yet also accommodate the many changes in health care, both anticipated and unanticipated, before these guidelines expire in 2021. The focus on both preventive care and integrated care in the Patient Protection and Affordable Care Act of 2010 is reflected in these guidelines, as is the anticipated rapid growth in the use of technology and electronic health records.

Q: How do the guidelines support psychologists' involvement in integrated, team-oriented care?

A: Integrated care is built upon the recognition that mental/behavioral health is key to both maintaining physical health and treating medical conditions effectively. The guidelines emphasize that psychologists are not only experts in mental and behavioral health; they also have special expertise in communication, behavior, patient decision making, human interaction and systems that will be useful in the design and operation of integrated care or the health care home. This same expertise will be critical to interprofessional training for the future health workforce.

Q: Do these guidelines acknowledge that many practitioners continue to provide diagnostic, assessment and treatment services in traditional settings?

A: Psychologists' expertise in diagnosis, assessment and psychological treatment is the foundation for both the endurance and the evolution of the profession. The guidelines were specifically constructed to include psychologists' continuing roles in these core services no matter how they interface with health care delivery systems.


For example, some psychologists are employed by a health care organization. Others work primarily in independent

practice but have privileges at a local hospital or provide contracted services to a health care facility. Many others either need to seek hospital privileges for continuity when one of their patients moves into a health care delivery system or refer patients to hospitals or other facilities for inpatient or intensive outpatient treatment. Therefore, most practicing psychologists can benefit from a deeper understanding of how these systems work.

Q: *How can the APA guidelines help interested practitioners explore potential new opportunities for providing professional services?*

A: The guidelines can assist psychologists in conceptualizing new roles for themselves in a range of health settings. For example, practitioners with appropriate training can provide services in such diverse areas as health promotion/disease prevention, integrated care, screening for mental health conditions, behavioral medicine, care of patients with chronic medical conditions, rehabilitation and end-of-life care. The guidelines assist psychologists in maintaining a distinct professional identity while working seamlessly in collaboration with other professions. In addition, the guidelines were written in such a way that psychologists can use them to educate other health care providers, administrators in health care delivery systems and the public to understand the unique training and skills of psychologists and how they complement those of other health care professionals.

Q: *How do these guidelines encourage psychologists to cultivate leadership roles?*

A: The guidelines acknowledge that health care delivery systems can be complex and often highly structured organizations. Therefore, they advise psychologists about issues that are likely to require their advocacy—for example, confidentiality, health records, budgets and clinical privileges. And the guidelines clearly indicate that psychologists' background and expertise often prepare them to assume leadership roles in programs, departments, committees and administration of health care settings. These roles might include oversight of service delivery and access, quality improvement and risk management, credentialing and privileges, and institutional policies and procedures—pertaining not only to psychology but to the full range of health professions. 

EXCERPTS FROM THE GUIDELINES

On collaboration with other disciplines: [Psychologists'] training and expertise are well-suited for collaboration with other disciplines, such as:

- Enhancing communication with patients
- Observing behavior change in relation to symptom/disease progression, medication and other interventions
- Attending to problems with continuity of care
- Facilitating decision making
- Problem-solving to maximize adherence to treatment regimens
- Adjusting practices as needed for patients with developmental, behavioral or psychiatric conditions
- Attending to gender, age, culture, spirituality, socioeconomic status and other factors related to health beliefs and behavior
- Attending to life span developmental issues and aging
- Involving family or other support systems in order to maximize treatment outcome
- Ensuring quality-of-life considerations in treatment decision making, including end-of-life care
- Negotiating differences of opinion among patients, families or health care providers

(From Guideline 6)

On psychologists' wide-ranging roles: In health care delivery systems, psychologists are called to take on wide-ranging roles within their areas of expertise. These include but are not limited to:

- Providing psychological assessment
- Developing and implementing prevention programs
- Consulting
- Leading and participating in multidisciplinary treatment planning
- Conducting psychotherapeutic or counseling intervention
- Taking a leadership role in admission, diagnosis, treatment, consultation order and discharge decision making
- Training and professional development for both psychologists and professionals from other disciplines
- Engaging in scientific research
- Serving in health care delivery system management and administration roles

(From Guideline 9)