Psychology Practice:

DESIGN FOR TOMORROW

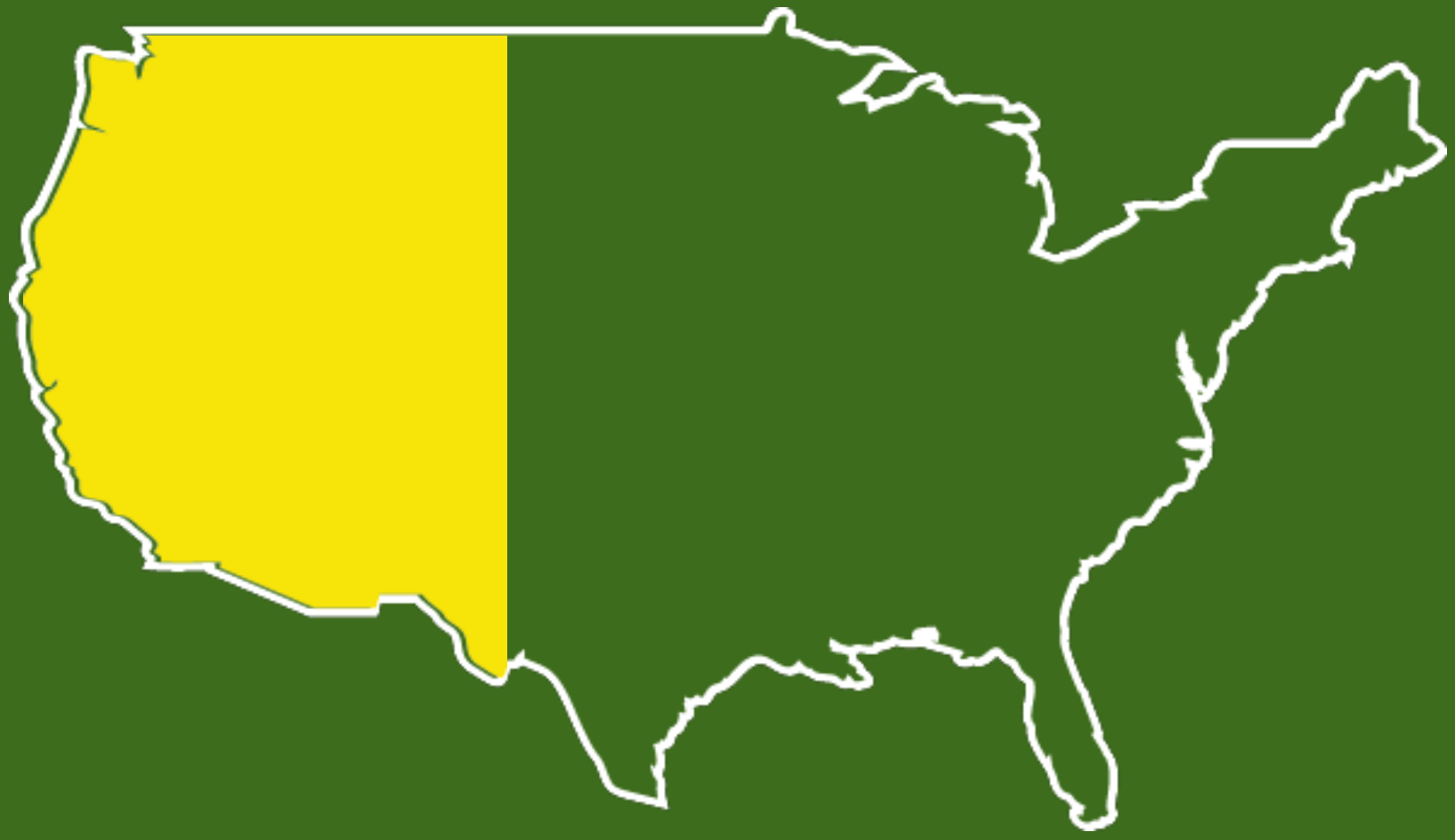


Carol D. Goodheart, EdD


VISION

THE STATE OF PRACTICE





How many people in the U.S. who need psychological services actually get them?

Less than half

The design for tomorrow's practice involves:

- Broader, longer term vision
- Closer connection between
  - practice and science
  - practice and public health
- Understanding of evolving *contexts* for services
- Better grasp of the *speed* of changes
- Learning agility

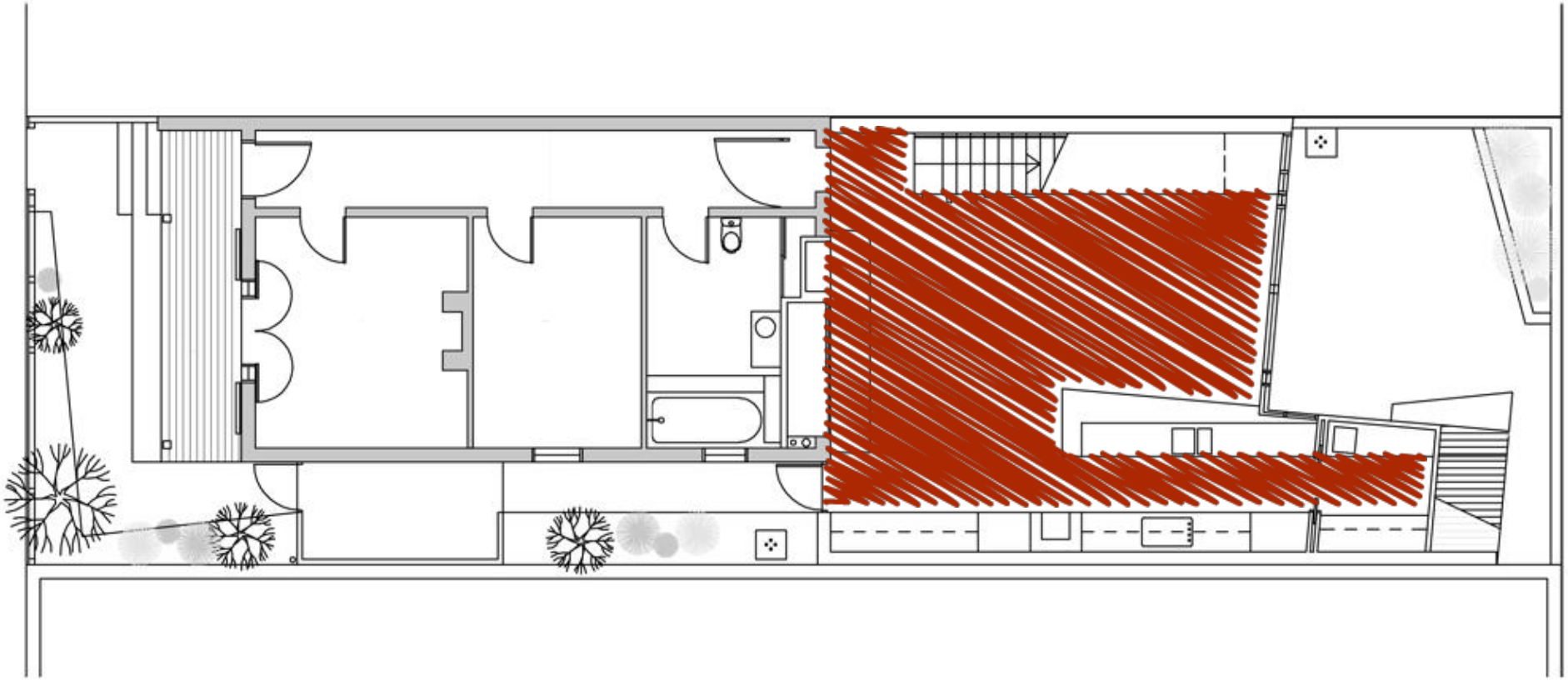

TRANSFORMATIVE EFFORTS


DISPARATE EFFORTS

- EBPP
- TREATMENT GUIDELINES
- TECHNOLOGY
- FUNCTION
- DIAGNOSIS
- OUTCOMES
- INTEGRATED CARE







What is the overall foundational framework?


ft
in
25ft.
EBPP

Evidence-Based Practice, defined:

IOM definition
The integration of the best research evidence with clinical expertise and patient values

APA definition
The integration of the best available research evidence with clinical expertise in the context of patient characteristics, culture, and preferences

Policy adopted by COR:
http://www.apa.org/practice/guidelines/evidence-based.pdf

Report of the 2005 APA Presidential Task Force on Evidence-Based Practice: http://www.apa.org/practice/resources/evidence/evidence-based-report.pdf

EBPP in a nutshell

- The APA policy is descriptive, not prescriptive
- Based on empirical research & reasoned theories
- Integrates all elements through clinical expertise
- Tailors treatment to patients
- Incorporates new clinical phenomena, research, consensus
- Demonstrates effectiveness

Implications for practitioners: *Words are magic*

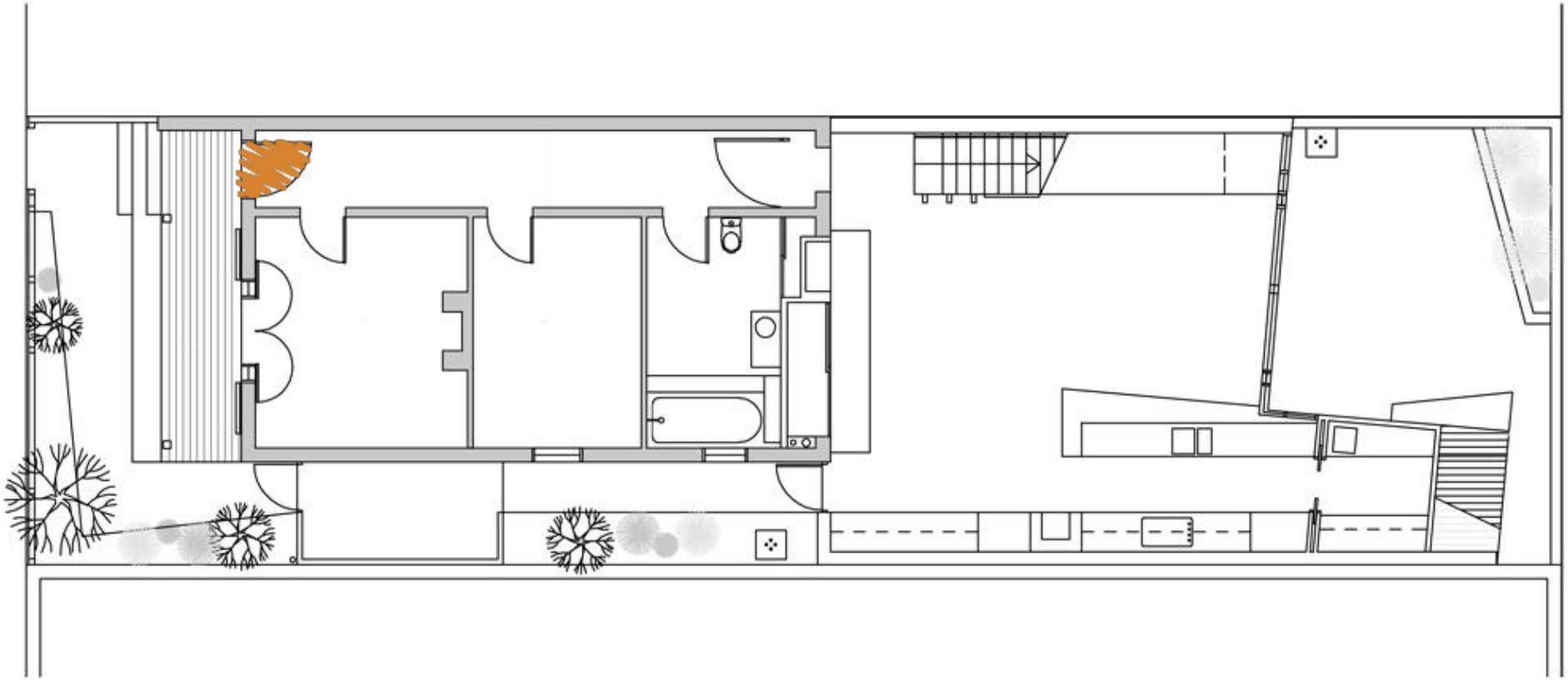
What is called "evidence-based" determines

- what treatment is conducted
- what is taught
- what is funded

Norcross, J. (2005, August). *EBPP: Implications for Practice, Training, and Policy*. APA Convention symposium presentation.

EBPP construct is often misused/abused

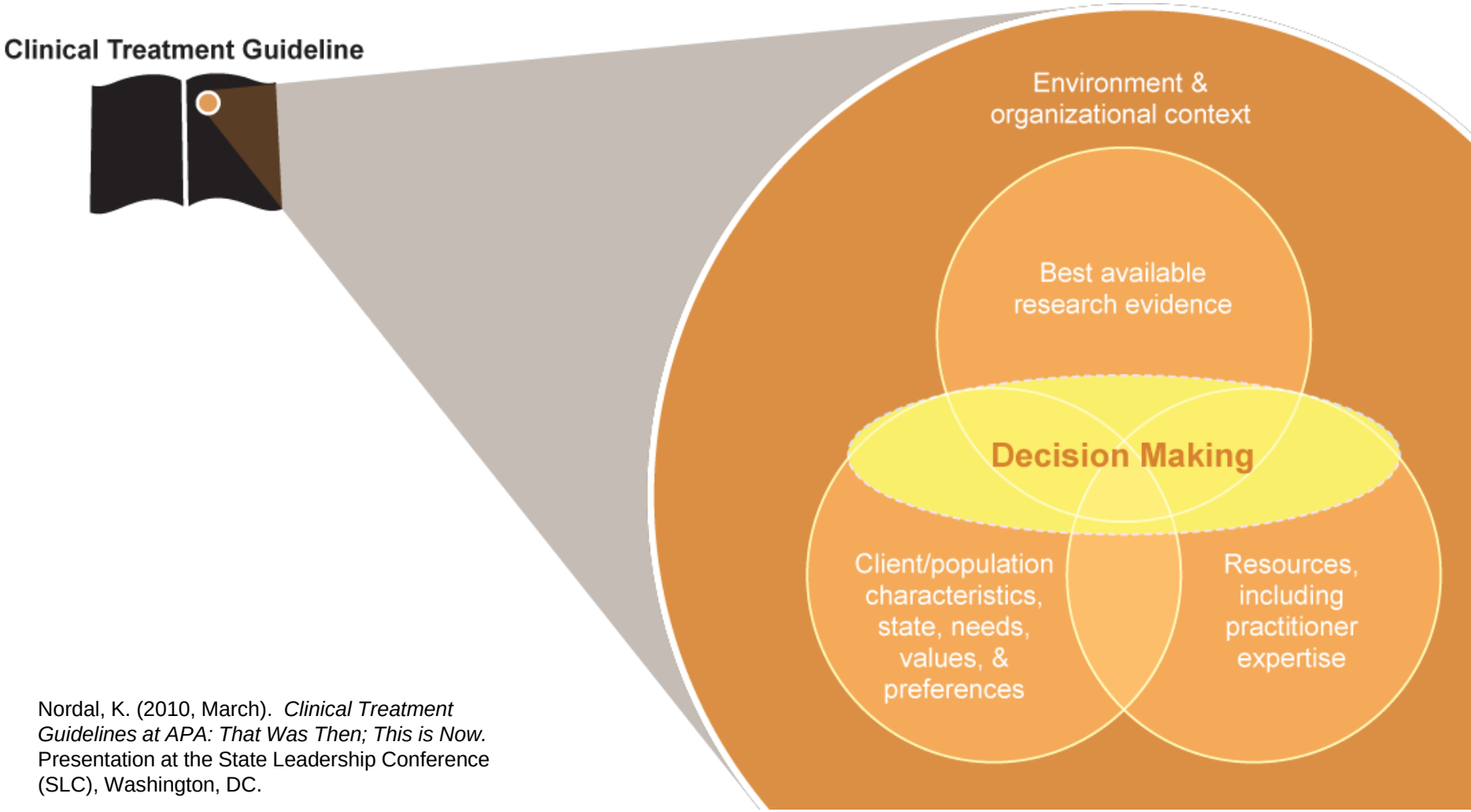
If we do not advocate, others will interpret as they wish



Which door opens the way to better clinical decision-making?



TREATMENT GUIDELINES



Nordal, K. (2010, March). *Clinical Treatment Guidelines at APA: That Was Then; This is Now.* Presentation at the State Leadership Conference (SLC), Washington, DC.

Benefits of treatment guidelines

- Translate evidence into practice
- Framework for clinical decisions
- Benchmarks for evaluating treatments
- Improve patient care
- Identify gaps in clinical care & research
- Flexible, useful, & transparent tools

Nordal, K. (2010, March). *Clinical Treatment Guidelines at APA: That Was Then; This is Now.* SLC, Washington, DC.

Treatment Guidelines **ARE**

- Based on rigorous reviews
- Based on relevant aspects of clinical presentation and patient characteristics
- Patient focused (vs. practitioner focused)
- Educative re available effective treatments

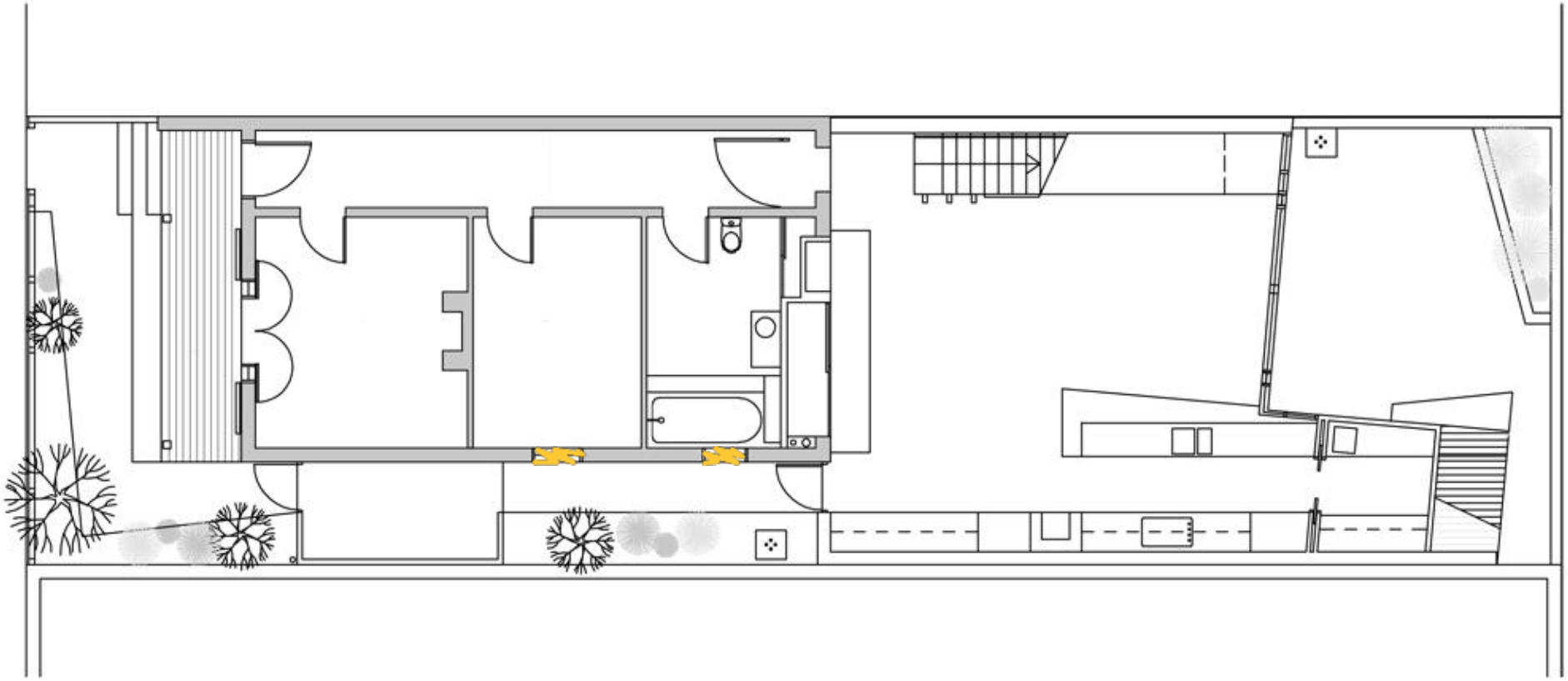
Clinical Treatment Guidelines are **NOT**

- Performance measures or standards
- Legal precedents or standards of care
- Treatment manuals, protocols, or cookbooks
- A substitute for good clinical judgment
- Sole determinants of treatment plans
- Reimbursement policies

Nordal, K. (2010, March). *Clinical Treatment Guidelines at APA: That Was Then; This Is Now.* SLC, Washington, DC.

A Guideline is **NOT** a Manual

- Guidelines are *decision aids*
- Protocols are *directives*



How do we envision the clinical, scientific, and practice information we need?


TECHNOLOGY

Amara's Law

"There is a natural human tendency to overestimate the impact of technology in the short run and underestimate it in the long run."

—Roy Amara, President, Institute for the Future, 1972–1990

Morrison, I. (2009, May). Summit on the Future of Psychology Practice, San Antonio, TX.

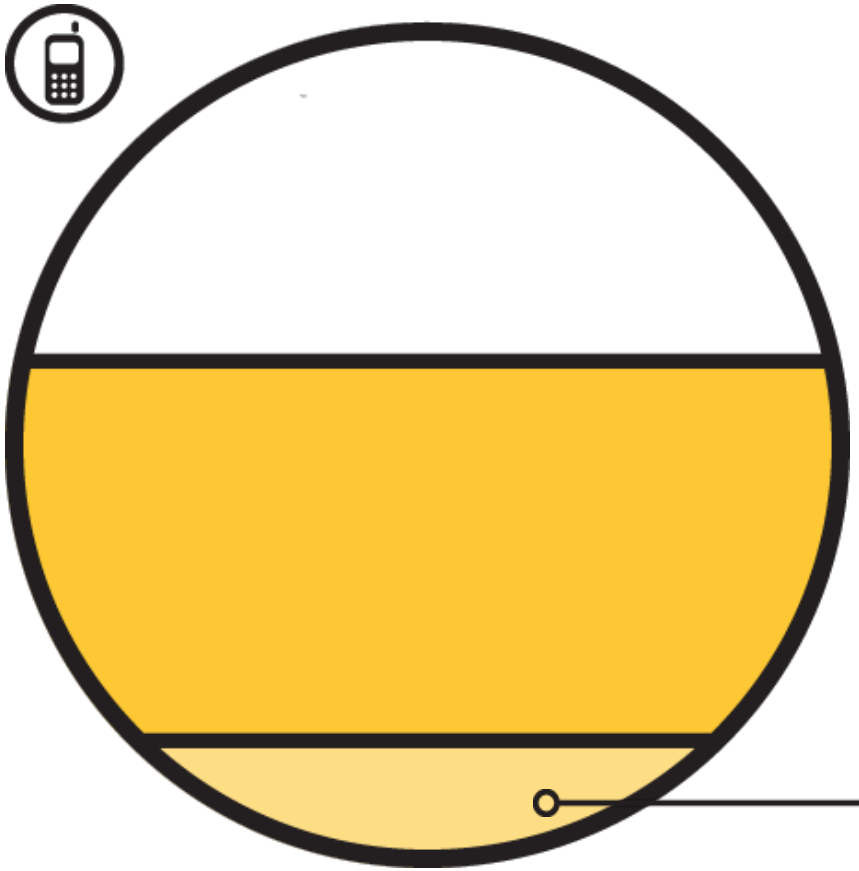
Global Internet use



over 1.6 billion Internet users globally

60% are outside of the U.S. and European Union

Global cell phone use



60%

of the world population has a cell phone

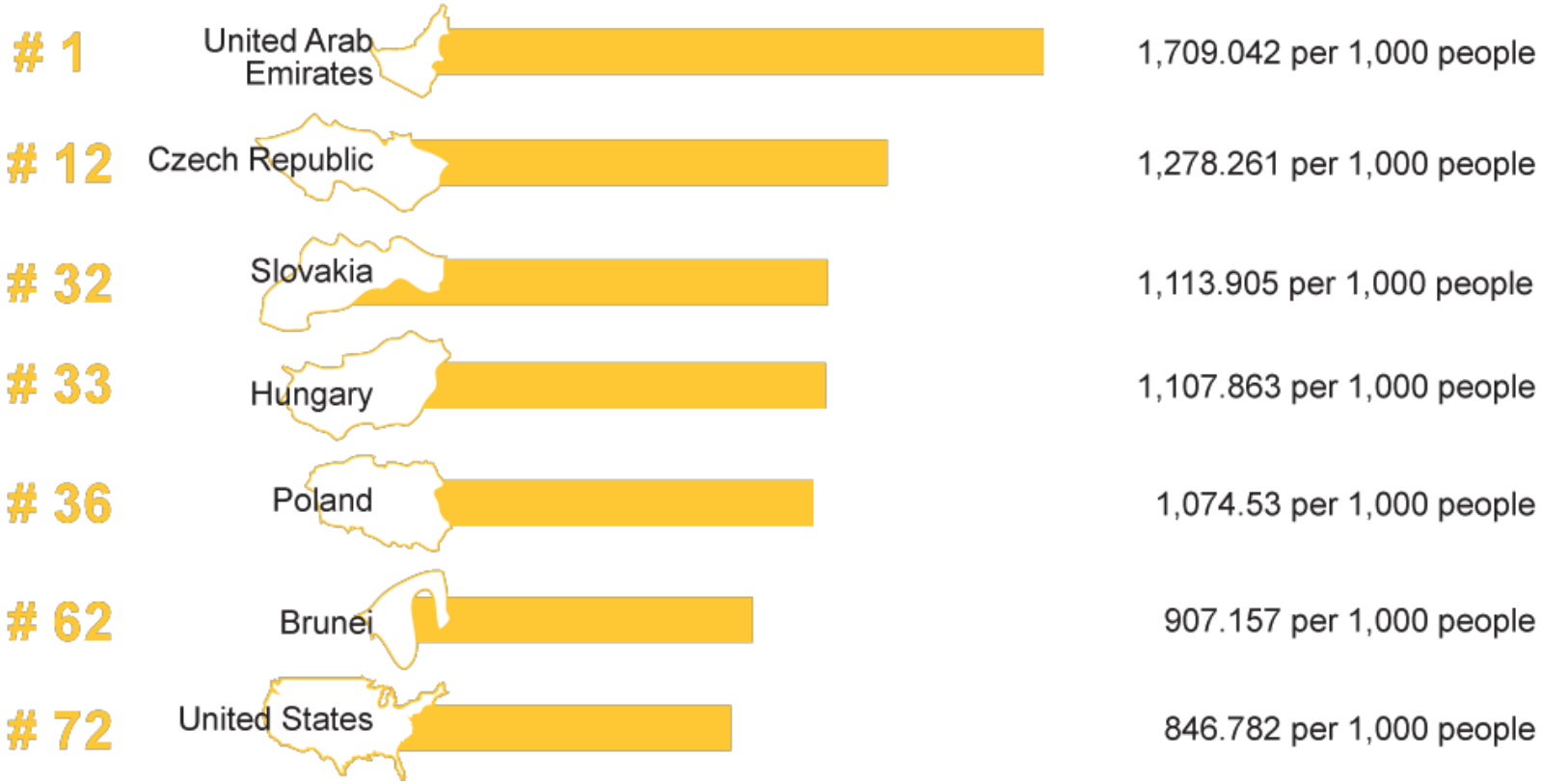
up from 15% in 2000

Technology

Communications, Services, Records

Global cell phone rankings





Based on 2007 statistics from http://www.nationmaster.com



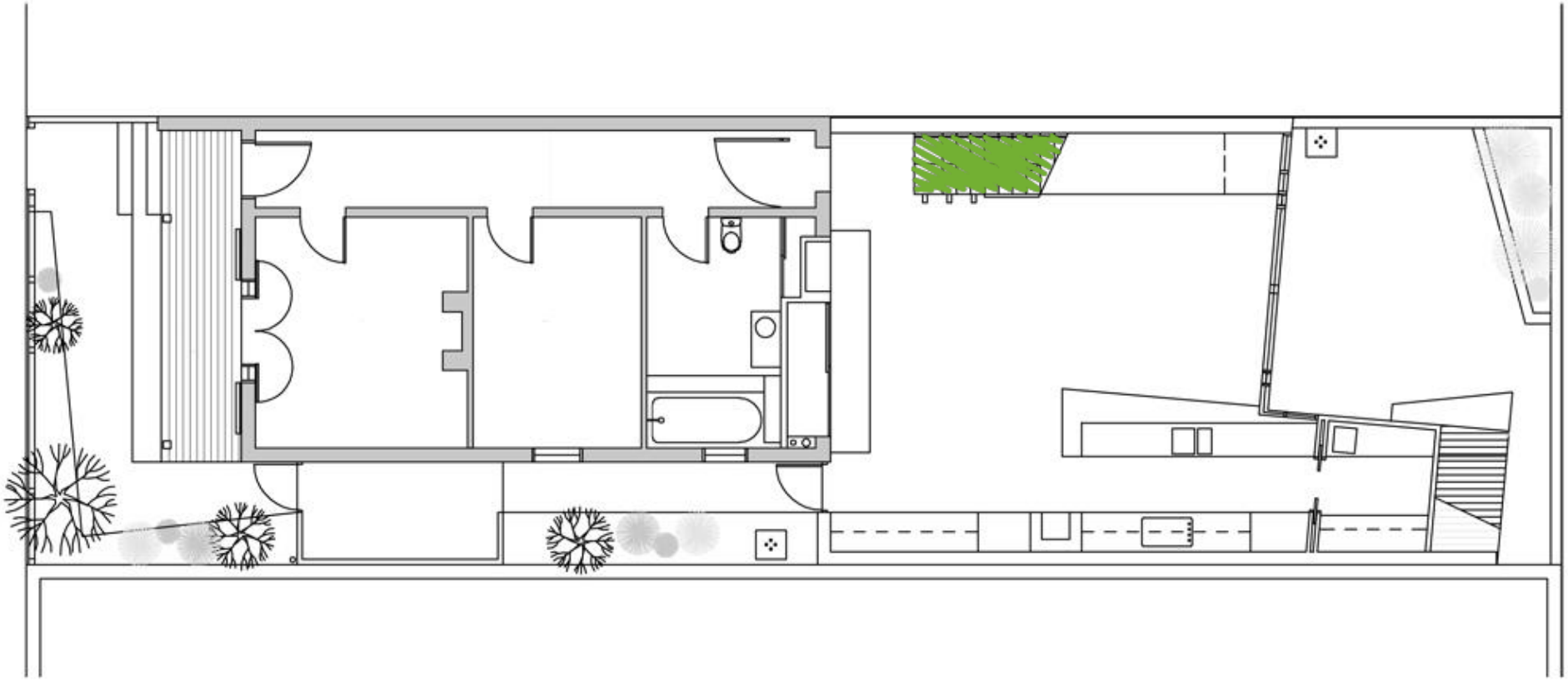
Technology

Communications, Services, Records

Technology and ethics

- Licensure and mobility issues
- Safety and security
- Privacy and confidentiality
- Social networking

gradPsych, 2009. http://www.apa.org/gradpsych/2009/09/crib-sheet.aspx



How can we move beyond symptoms to broader biopsychosocial classification?


step into the world of
FUNCTION

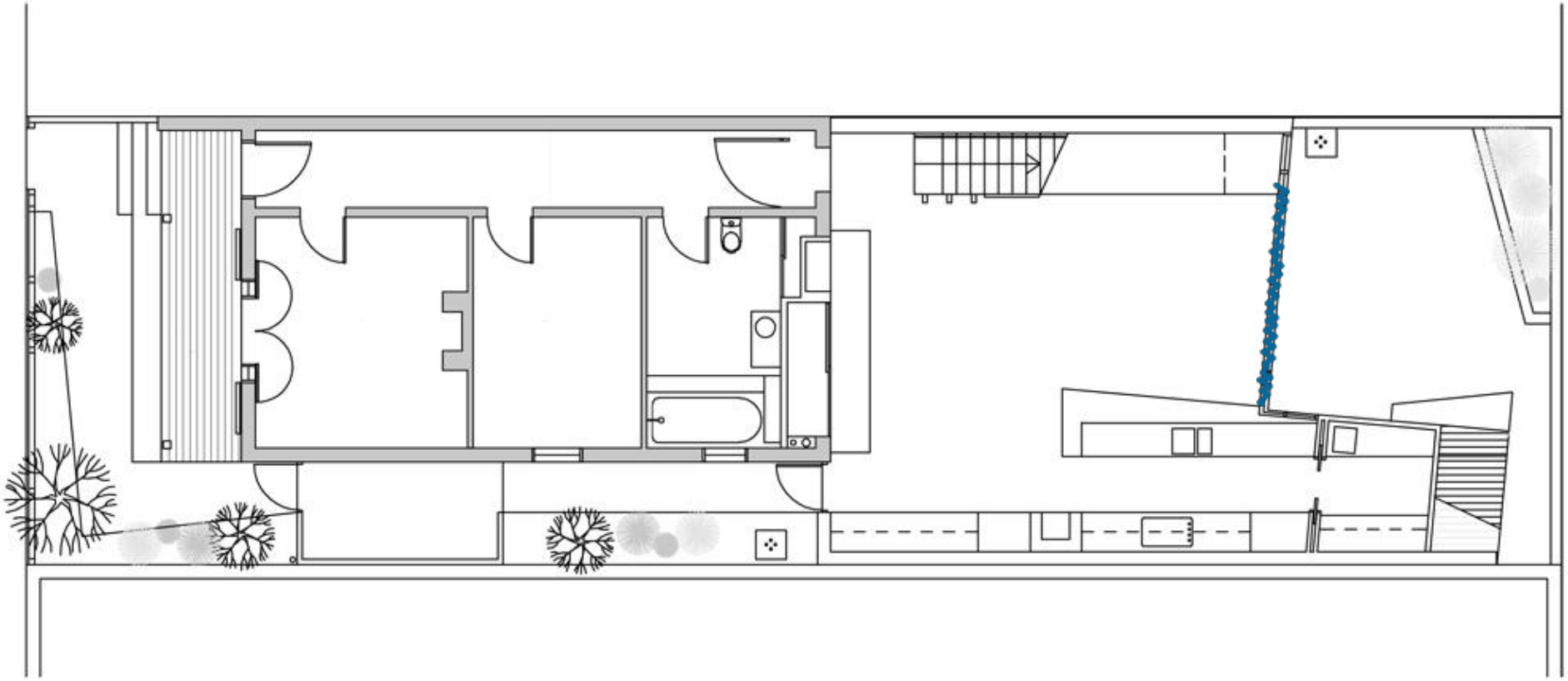
The *ICF*:

- A system related to health/mental health
- Designed to assess & categorize function
- Classifies
  - function, not disease
  - health/health-related domains & aspects of well-being
- Attends to personal, social, environmental factors affecting function

http://www.who.int/classifications/icf/en/



- *ICF* is companion to *ICD-10*
- Designed for real-world settings with differing assessment techniques
- Orients services and outcomes toward function, not just symptoms
- *Very* important for psychology
  - Productivity, recovery, resilience, well-being, and thriving



How do we organize the new architecture?

through greater clinical utility in

DIAGNOSIS



Revision of the *ICD-10*

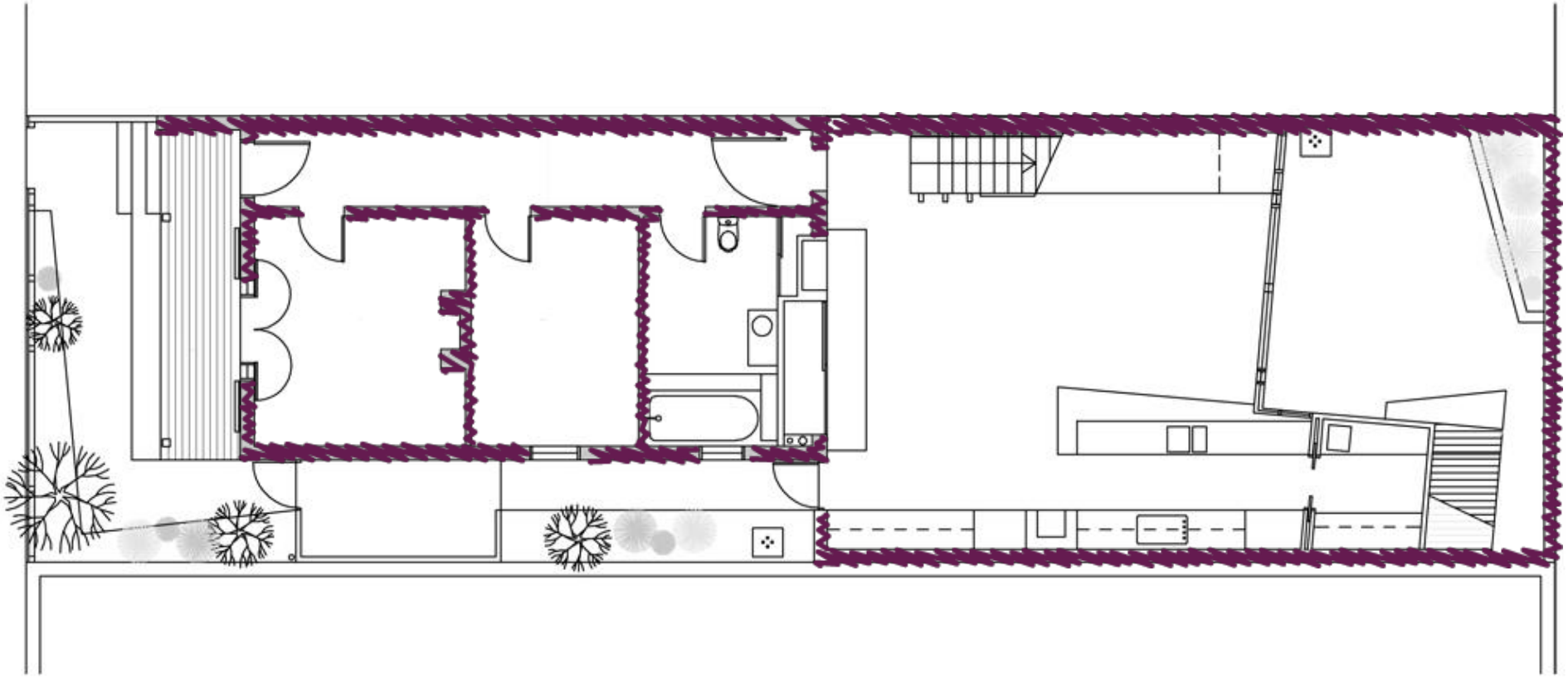
- Clinical & research standard for the world
- Key objective: clinical utility
- Field trials: categories, entities, descriptions
- 2013: adoption of *ICD-10* in U.S.
- 2014: *ICD-11* scheduled for WHO approval
- APA is committed to *ICD* revision project

Reed, G., Project Director, Dept. of Mental Health and Substance Abuse, WHO 2010.

Rationale for a new system

Current systems are:

- Inefficient
- Complex
- Difficult to use or not accurately descriptive



What is the best way to demonstrate the effectiveness of psychological services?



OUTCOMES

monitoring—a framework relevant to practice

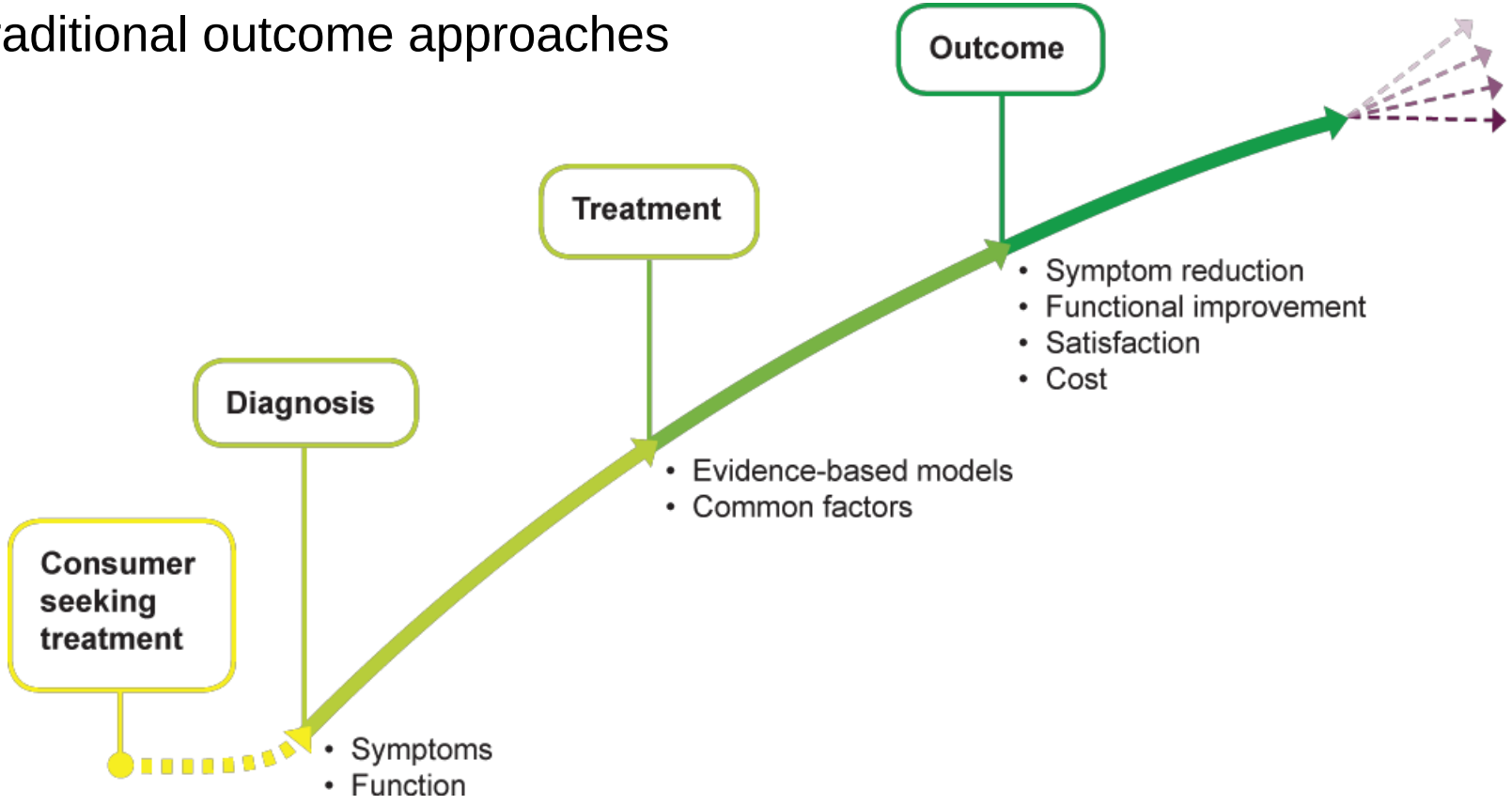
Why the interest in outcomes?

- Costs
- Parity
- Accountability

Doucette, A. (2010, March). *Outcomes Measurement: APA Presidential Taskforce on Advancing Practice*. SLC, Washington, DC.

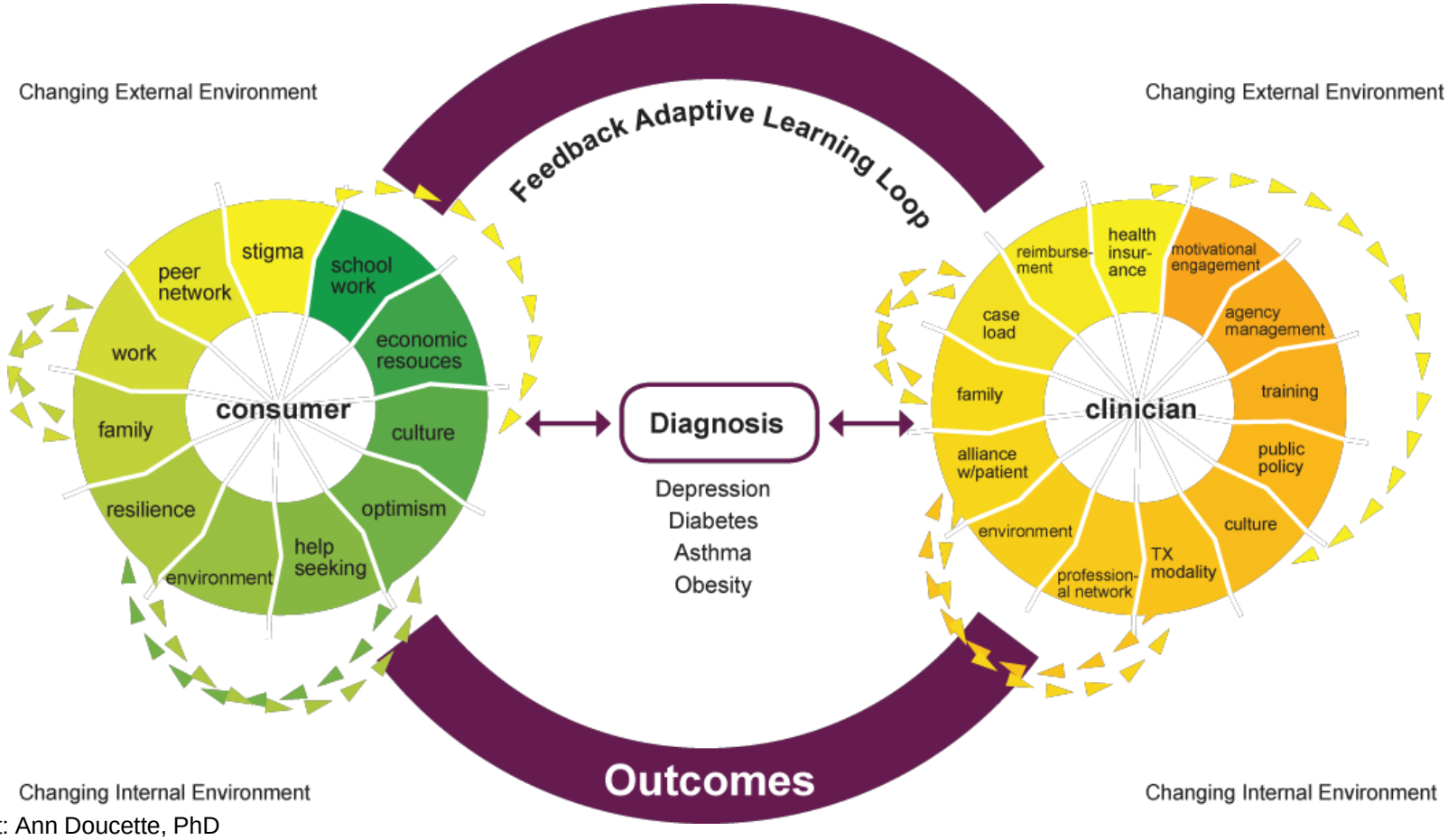
Characterizing the Treatment System

Traditional outcome approaches



Credit: Ann Doucette, PhD

Characterizing Outcome Complexity



Credit: Ann Doucette, PhD

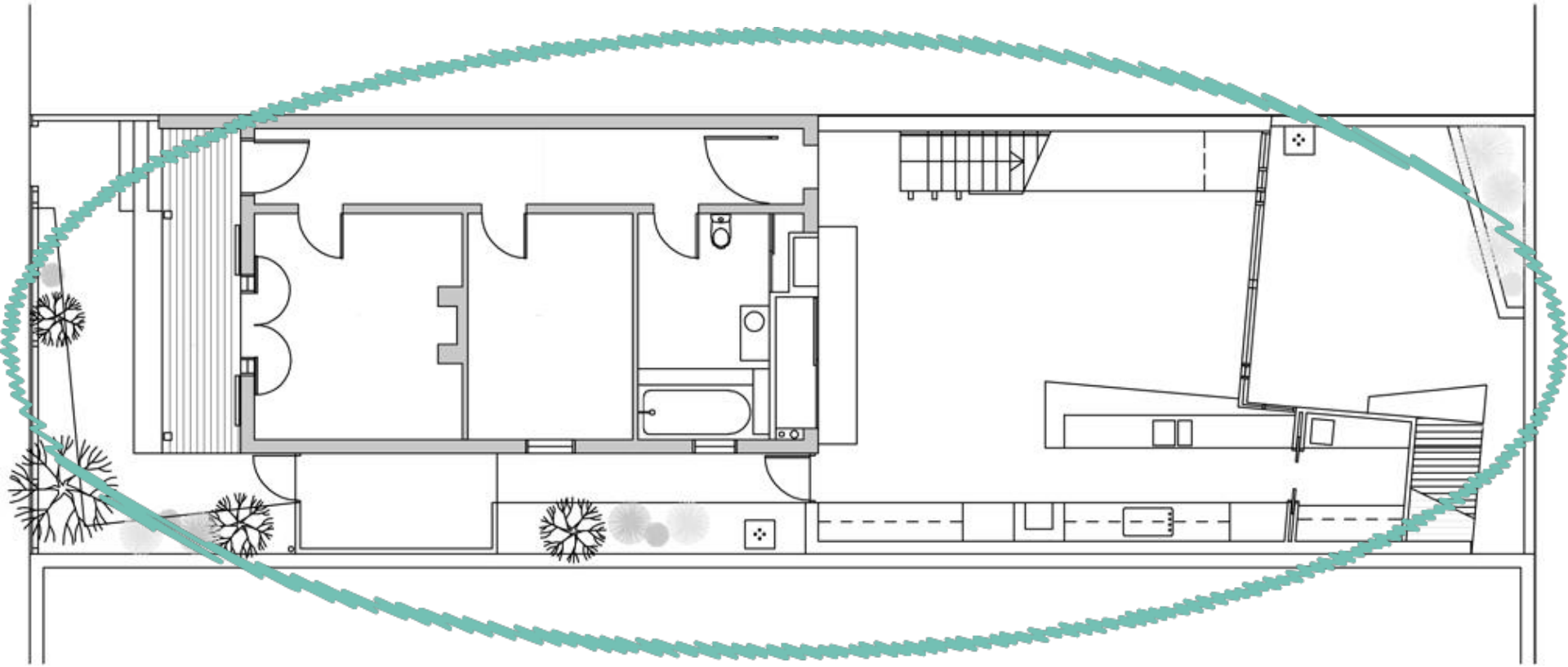
To be relevant and useful, outcomes must be:

- Accessible and easy to interpret
- Meaningful in optimizing care
- Informative
- Specific re inclusion/exclusion criteria
- Sensitive to incentives and disincentives

Doucette, A. (2010, March). *Outcomes Measurement: APA Presidential Taskforce on Advancing Practice*. SLC, Washington, DC.

APA Task Force Product: Relational Outcomes Measurement Database

- Menu of outcomes measures
- Same template for each measure, for easy comparison among choices
- Posted by invitation/permission to test developers
- All must meet scientific criteria for inclusion
- Searchable via PsycLink for members



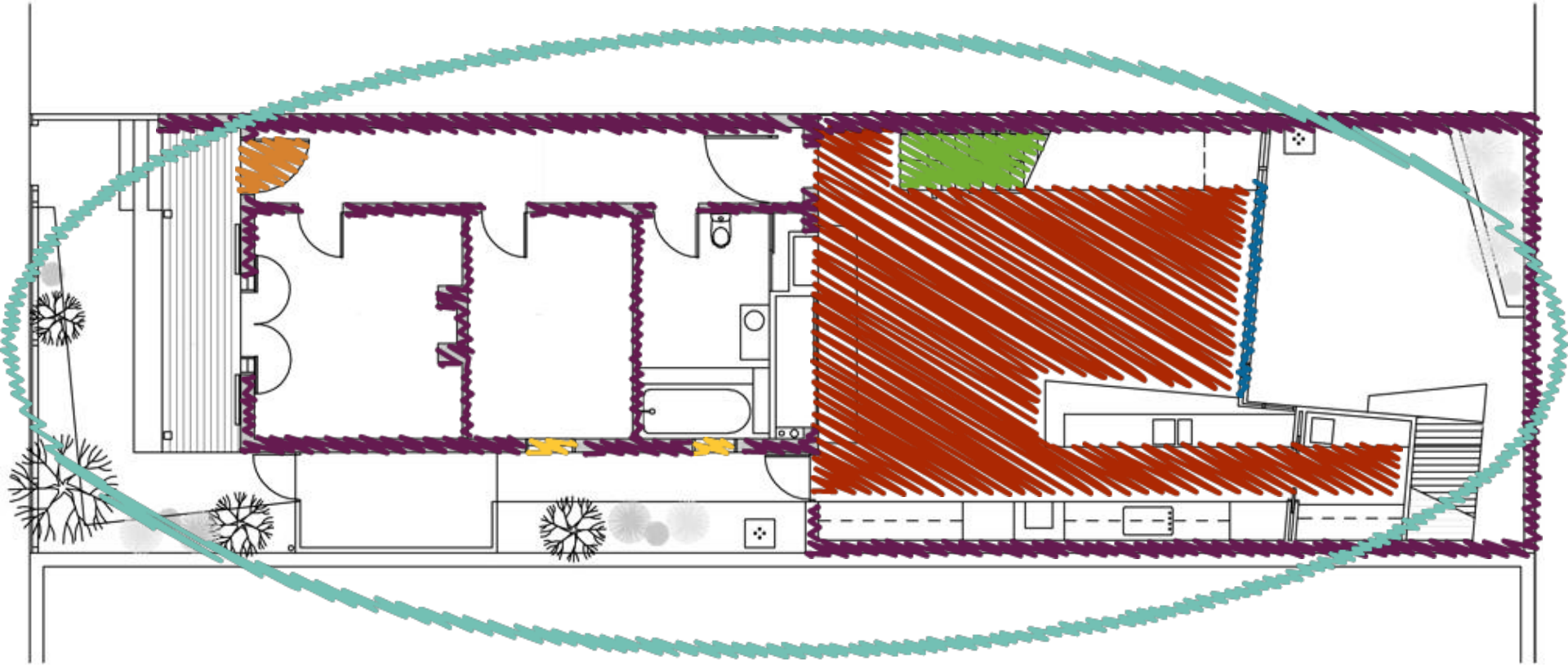
How do we bring everything under one roof?


INTEGRATED CARE

Integrated Care:

- Better, more cost-effective outcomes across health spectrum
- Improved adherence to treatment, outcome, patient satisfaction
- More successful referrals within same setting
- Potential for health promotion and prevention services

Goodheart, C. (2010). Economics and psychology practice. *Professional Psychology: Research and Practice, 41*, 189–195.



Design for Tomorrow

The Blueprint

Integration

- *ICD* ***diagnosis*** offers more useful “units” that can allow development of …
- ***Treatment guidelines*** that work across diagnostic classifications, groups, and can align with …
- *ICF* structure that looks at ***functional status*** related to health, environment, etc., which are tracked by …
- ***Outcomes*** that measure distress and functional status, not just symptoms

We need to conceptually align:

- The **Diagnosis** project (*ICD-10* revision)
- The **Function** project (*ICF*)
- The **Treatment Guidelines** project (APA)
- The **Outcomes** project
  (APA Presidential Initiative)

For implementation of EBPP with meaning in the real world

And to achieve integrated care that better serves our patients

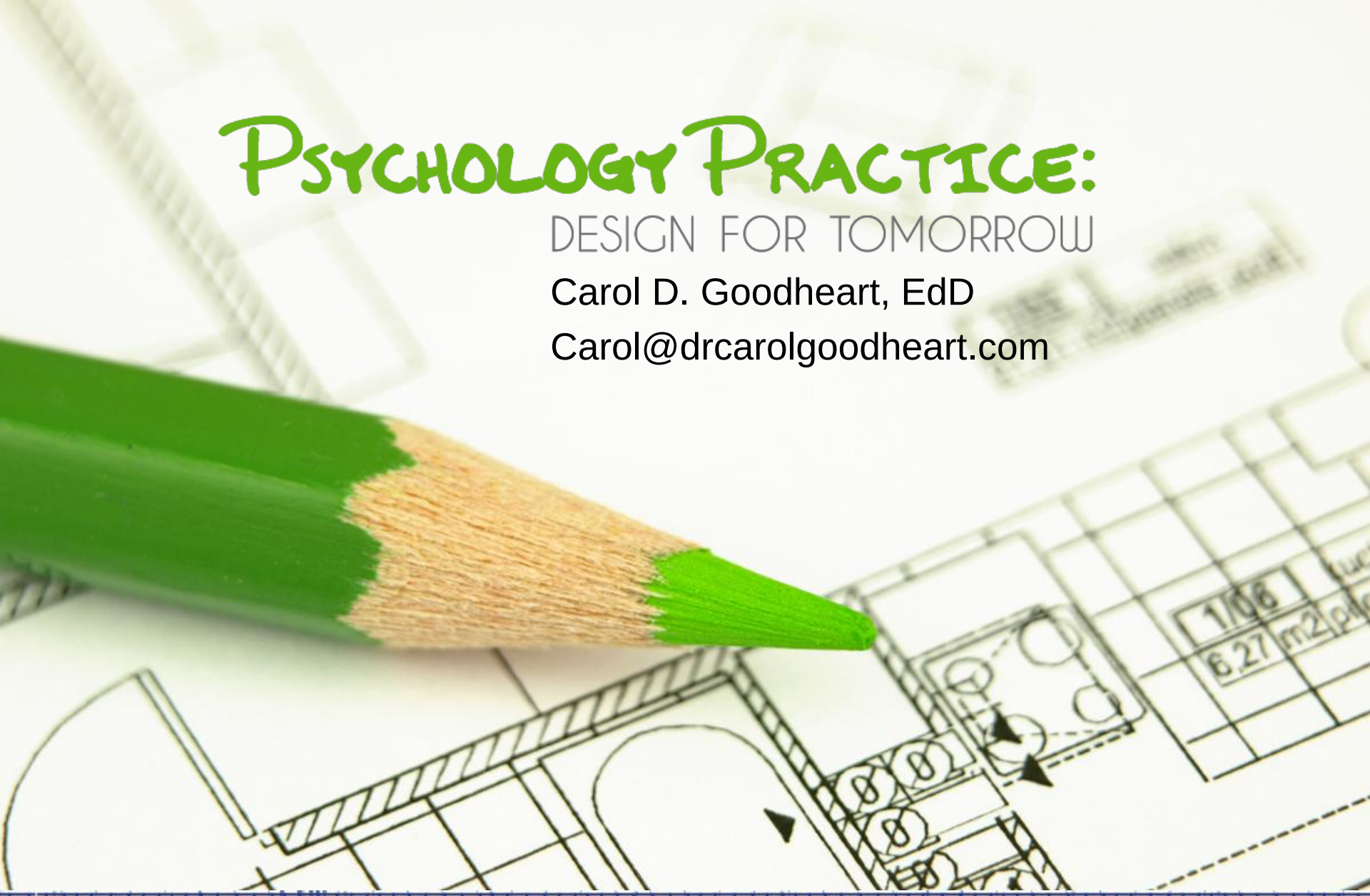


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American Psychological Association