

Second International Congress on Licensure, Certification, and Credentialing of Psychologists

The Development of a Credentialing Program in Psychopharmacology

By: Patricia M. Bricklin, PhD

APA Practice Organization, College of Professional Psychology

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The American Psychology Association created the College of Professional Psychology in 1994 to certify psychologists in specific areas of practice and to develop examinations such as the one we have just completed, the Psychopharmacology Examination for Psychologists, or the "PEP, which was developed for use by U. S. and Canadian licensing boards and is the focus of my presentation today.

The fact that we have created this examination can, in and of itself, advance the prescriptive authority agenda because its very existence gives evidence to the public and to state and provincial legislatures of the seriousness of this agenda. A valid, legally defensible and secure exam gives additional reassurance to state and provincial legislatures that those who pass will be qualified and the public protected. By the activities in which they engage to prepare for prescribing legislation, licensing boards send the message that prescribing for psychologists is an idea whose time has come.

APA's College of Professional Psychology went to the APA Council of Representatives in 1997 to propose that it assist the prescriptive authority goals by overseeing the development of an examination to be offered for use by states and Canadian provinces in granting prescriptive authority to psychologists. The immediate response of Council was "You want to do what?" In response, the College presented data to support it as the appropriate body to oversee such a project. This was based particularly on its separation from the development of any psychopharmacology curricula, its experience in developing such an exam, the importance of subject matter experts and the right testing firm. The College believed that this was truly an idea whose time had come and the time was upon us in 1997. Why? Because it takes time to develop a valid examination, at least one year and usually longer. Because when legislation passes, the exam will be readily available if we start developing it in 1997, shortening the time between implementation of laws and psychologists' ability to prescribe.

In August 1997, the APA Council of Representatives authorized the development of the examination in psychopharmacology by the College of Professional Psychology for use by state and provincial licensing authorities (should they choose to use it) in granting prescriptive authority to psychologists.

That was the beginning. The College began by selecting Professional Examination Service (PES) as its test development contractor and by appointing the Expert Working Group after extensive outreach to relevant groups both in and outside the profession. A broad response was received and 19 persons were selected who met multiple criteria of expertise. They are psychologists, physicians, pharmacists, and advanced practice nurses. Seven of the 10 graduates of the Department of Defense's Psychopharmacology Demonstration Project are part of the group. Lynn Rehm, ASPPB's Examination Chair, represents that group on the College's expert panel. I attend meetings as Chair of the College.

The Expert Working Group's first task was to specify the knowledge necessary for safe and effective practice of psychology involving psychotropic medication. Approximately 100 additional subject matter experts participated in critical incidents interviews and three complete independent reviews of the content areas and knowledge statements.

A large-scale survey was conducted (~600) to validate the content areas, knowledge statements, tasks, and roles. We had an overall return rate of 54%. Content areas and tasks were rated on frequency and criticality scales. Knowledge statements were rated on acquisition (when) and criticality scales. The survey differentiated contrast and target groups. The ratings of the target sample validated the content and process based delineations. Test specifications were developed to include percentage weightings of content areas & lists of validated knowledge statements. A rating of the contrast group and psychiatrists was used to further investigate and/or confirm test specifications.

During Phase 2 two forms of the exam were completed and a recommended passing point was developed. Item analysis and key finalization cannot be completed until there are sufficient numbers who have taken the exam. Arrangements for computer based testing were finalized through Prometric, Inc. where stringent security is assured. The final test specifications are as follows:

- Integrating clinical psychopharmacology with the practice of psychology -15%
- Neuroscience - 8%
- Nervous system pathology - 9%
- Physiology and pathophysiology - 9%
- Biopsychosocial and pharmacologic assessment and monitoring - 10%
- Differential diagnosis - 13%
- Pharmacology - 12%
- Clinical psychopharmacology - 13%
- Research - 4%
- Professional, legal, ethical, and interprofessional issues - 7%

For each content area there are anywhere from 8 - 20 knowledge statements.

In the course of the development of the exam, in the interest of advancing the prescriptive authority agenda, the College has focused on communicating its efforts in two areas of external communication. First we have communicated with the practice community through continuous conversation with APA's Committee for the Advancement of Professional Practice (CAPP) and its prescriptive authority subcommittee, both providing information and gathering suggestions. We have explored the important issue of whether the exam can be useful now and still remain true to the primary purpose for our development of the exam (use by state and provincial licensing authorities).

We conducted extensive telephone interviews with members of CAPP, state psychological associations, members of APA's Board of Directors, members of ASPPB's Board of Directors, state licensing board liaisons from state psychological associations, practice divisions, non-practice divisions, graduate of the DoD Demonstration Project, schools of psychopharmacology education, members of the Presidential Task Force on Prescribing, graduates of psychopharmacology training programs and psychopharmacology-related organizations external to APA.

We found several trends in response to our interviews. Respondent wanted us to allow graduates of psychopharmacology programs to take the exam after the didactic portion of their training. This, they said, would allow them to bank their scores for eventual licensure when legislation is passed and would serve as "firepower" to take to the legislature. Respondent said that even before laws are passed, licensing authorities might want a score on record.

The College has also communicated along the way with state and provincial licensing authorities at several national meetings of ASPPB where Jan Ciuccio, Executive Administrator for the College, and I presented. Our purpose was to sensitize licensing authorities to the prescription agenda, to discuss the amount of work involved for licensing authorities from the time a law is passed until it can be

implemented and to make them aware of the process of development of the exam so that they might consider ways in which it might be useful. Individual licensing authorities' responses ranged from interest and excitement to "it won't happen in my state for many years to come" and "We have too much to do to consider it now." The majority was interested. Their responses to our inquiry about how we can be helpful ranged from, "We'll review education and experience and you take care of the exam," to "Could you set up a system to do credentials review and give the exam too?" We raised the issue of banking scores and discussed the pros and cons of this.

The exchanges with licensing authorities and with the practitioner community have been helpful in the development of the next steps. Where are we now? The exam is ready. It is called the Psychopharmacology Examination for Psychologists (PEP), an examination for practitioners. Application materials are available. Based on the discussions with CAPP, other members of the practice community, and members of state and provincial licensing authorities, we have decided on the following four requirements for admission to the PEP: 1. A doctoral degree in psychology; 2. Provision of health services in psychology; 3. Current psychology licensure in good standing to engage in the independent practice of psychology; and 4. Successful completion of a post-doctoral program of education in an organized program of intensive didactic instruction. Details of the fourth requirement can be found in the PEP informational brochure available at this meeting.

Psychologists will have individual access to the PEP. Alternatively, a psychology licensing authority may review an applicant's education and admit them to the exam. The licensing authority may also request that the College review applicant's educational credentials and admit them to the exam. In all cases, scores will be banked for future use by licensing authorities. Candidates who take the exam will have access to their scores, how they did compared to a recommended passing point and will receive feedback on how they did in each of the 10 knowledge-based content areas.

Psychopharmacology graduates and educational program will also benefit by administration of the exam. When a sufficient volume of exam scores to enable meaningful comparisons is available, the College will provide psychopharmacology educational programs with aggregated comparative data about graduates' performance while maintaining the confidentiality of individual examinees. Practitioners who are contemplating psychopharmacology training will also find this data of assistance in evaluating available programs.

Individual state and provincial licensing authorities can be involved now. The state of Louisiana is a perfect example. The Louisiana Board has asked the College to review and admit to the exam those Louisiana psychologists who have met the criteria. The College will bank the examinee's scores. Such a process will put Louisiana psychologists and their Board ahead in the process when the legislature passes a prescribing law. Other licensing authorities may follow suit.

To what end all of this? What if? Imagine, that suddenly, while we are meeting here in Oslo and the opposition had gone fishing, a state legislature passed a prescribing privileges bill and the governor (or appropriate official), in an act of unprecedented awareness of the needs of the community, signed the bill into law! Next Monday morning, the psychology licensing board will have to implement the law and draft regulations.

Would they be ready for this moment? It might not happen on Monday of next week, but it will happen on some day in the not too far distant future. Though many state licensing board officials may believe this is an unlikely event in their particular state, there are things they could consider right now to plan for the future. The APA has created the PEP so that it can offer states and provinces an exam that is legally

defensible and well constructed. The PEP will be one of the options for state regulators who will have a full plate when prescribing laws are passed.

Other countries considering a prescribing capability for psychologists are well aware of the complexity of this process involving education and training components, legislative components, and often intense politics both within the profession and with other professions. From our perspective, a valid and defensible examination can play a critical role in answering the always-present questions about what is an appropriate knowledge base that will serve to protect the public. Since this is the piece of the process of adding prescribing to psychology's scope of practice we know the most about, we would certainly be willing to discuss adaptation of the PEP for international use. We do recognize that there are additional complex issues involved in such discussions including cultural and ethnic issues, language issues, and differences in use and availability of medication. The exam, as constructed, is appropriate for a particular population, and would certainly need to be adapted for use by other populations. But such discussions may well serve us all well by helping us more fully understand the practice of psychology all over the world.