

**APA Board of Educational Affairs
Award to Advance Interdisciplinary Education and Training
In Professional Psychology**

**Department of Clinical and Health Psychology
University of Florida, Gainesville, FL**

The Department of Clinical and Health Psychology at the University of Florida has a lengthy, successful history of involvement in interprofessional education, training and healthcare services as well as interprofessional team science. The Department is home to a doctoral program in clinical psychology and a pre-doctoral internship in professional psychology; both accredited for over 50 years by the American Psychological Association. As the host of the *1990 National Conference on Scientist-Practitioner Education and Training for Professional Practice of Psychology* that reaffirmed and enhanced that training model, the Department has long subscribed to the tenet that “The scientist-practitioner model of education and training in psychology is an integrative approach to science and practice wherein each must continually inform the other” (Belar and Perry, 1991, p 7). As part of that “integrative approach,” the Department’s scientific, education, and service philosophy also is built on the principle of “establishing working relationships” (p 9) as a core competency in professional development. This is the key to successful day-to-day functioning in the interprofessional milieu of an academic health science center.

This nomination will highlight the Department’s ongoing (1) interprofessional didactic and clinical training activities, (2) long history of extramurally funded research and scholarly productivity based on what today is known as interdisciplinary team science, and (3) day-to-day clinical service responsibilities that involve interprofessional relationships with many of the specialties in medicine as well as with nurses, dentists, speech pathologists, members of the rehabilitation team like occupational and physical therapy, and our colleagues in public health. From an education and training perspective, each of these areas routinely involves our faculty and graduate students, interns, and postdoctoral fellows in the interplay of science and practice. Each carries with it the expectations of ongoing integration supported by the importance of developing critical thinking skills in an environment comprised of many, if not all, of the health profession disciplines found in an academic health science center and in today’s healthcare system in general.

Interprofessional Education

Each of our first year graduate students enrolls in a health science center wide interprofessional healthcare course, *Interdisciplinary Family Health*. Students from the health science center colleges of Nursing, Medicine, Pharmacy, and Public Health & Health Professions enroll in this course which is centered around the shared mission of collaborative training including discussion meetings and home visits with volunteer community families. The program’s learning objectives focus on core competency areas that exist in most healthcare disciplines: interviewing skills, knowledge of family systems, facilitating access to health care & community resources, and preventive medicine. Team based competencies and team building, cultural issues in health care, and patient safety are also key competencies developed. The course enrolls 617 students, 125 faculty, and 210 local volunteer families and lasts one academic year. Our departmental faculty have been an integral part of the academic core of this experience and thus role model for our students the importance of interprofessionalism in their own professional lives.

Our Department is nested within the College of Public Health and Health Professions and, as part of the interprofessional culture of our College, all of our graduate students enroll in two graduate level courses in public health. *Introduction to Public Health* provides our students with grounding in the five core areas of public health. Students also enroll in an *Epidemiology* course providing them an understanding of the study of mental, behavioral, and physical health, disease prevention, and health promotion from a public health perspective. These courses once again

reinforce that scientific and applied healthcare psychology is integrated into the broader community of health professionals and population health.

In the Department's graduate seminar in *Behavioral Medicine* a major presentation is provided by a faculty member from the Department of Behavioral Science and Community Health that helps our students integrate their scientific knowledge of behavioral medicine and health psychology from their clinical, bedside and consulting room perspective with the research approach taken by our population-based colleagues in community health. Reflecting the Department's intent to incorporate its traditional scientist-practitioner education with public health concepts, Muehrer, Afifi, Coyne, Kring, Merson, Prohaska, and Rozensky (2002) discussed the importance of integrating psychology's focus on mental and behavioral health with knowledge of public health. That article described training opportunities for students in the department seeking either a certificate in public health or the MPH while in residence. Several students have availed themselves of these opportunities and have been involved in public health research looking at such areas as anxiety, anger, and obesity in underserved populations and in healthcare management in at least two public health academic departments in our College. Developing basic public health competencies by all students, and advanced training by several, are positive outcomes in our goal of integration with public health. Further, the new chair of our department is a clinical psychologist and epidemiologist and intends to further integrate public health science with our ongoing scholarship and clinical training in substance abuse and infectious disease epidemiology.

Team Based Science

Our departmental faculty serve as principal investigators on over 20 extramurally funded grants totaling \$4.2 million a year and studying a full range of health related problems including adult & childhood obesity, pain, sleep, fibromyalgia, Parkinson's Disease, cognition & aging, ADHD in preschool children, traumatic brain injury, fear, anxiety & social phobia, cognitive effects on sleep, pain, & cytokines in gynecologic cancer, brain imagining in pain, treatment of Alzheimer's disease, and counseling in elementary school. To illustrate the success of the Departments interdisciplinary team science orientation, 70% of these funded projects include faculty from the colleges of Medicine, Nursing, Pharmacy, Dentistry, and other disciplines from our own Public Health & Health Professions College. Our faculty serve as mentors of junior faculty in other departments and students from many disciplines. Also, many of our students have availed themselves of mentoring from faculty in other colleges and disciplines.

Our faculty and students routinely publish scholarly papers that include members of other disciplines as a reflection of the positive outcomes of this integrative process of research and scholarship. Last year, as an example, the department published 75 peer reviewed articles of which most included students and other faculty from our own department and a full 60% included colleagues from other disciplines (this outcome data is collected as part of our College's annual faculty reviews).

A member of our faculty directs the Bachelor of Health Science honors program in our College. Departmental faculty also teach courses in ethics, critical thinking, and the honors research seminar to those undergraduates who are preparing for graduate education in the full range of health professions from medicine, to nursing, occupational and physical therapy, social work, physician assistants, and psychology. Thus, along with our faculty routinely mentoring honors undergraduates from the College of Liberal Arts and Science Psychology Department, we also mentor students from other disciplines and once again role model for our own graduate students the importance of including all health professionals in our research laboratory activities.

Finally, the department is affiliated with eight interdisciplinary research "centers of excellence" across the health science center and four of those are directed by our faculty. Again, this reinforces our commitment to interdisciplinary team science.

Interdisciplinary Clinical Service Delivery

Our department has a clinical presence throughout all the healthcare services of the health science center, Shands Hospital (our teaching hospital), and various community-based primary and tertiary care facilities that are part of the University of Florida's healthcare system.

Space does not allow a detailed description of each of these services but it should be noted that in the following list, it is not only our faculty, but *all* our graduate students, interns, and postdoctoral fellows who are day-to-day participants in these interprofessional healthcare services. Besides *ad hoc* consultations across both in- and outpatient programs in the health center, our department has formal clinical services that are often physically integrated within the following clinical services: pediatric gastroenterology, craniofacial clinic, childhood HIV, orthopedic trauma, spinal cord & TBI services, solid organ & bone marrow transplant, Neurology's Movement Disorder, Parkinson Disease, Epilepsy, & Memory Clinics, various pain clinics including those located in dentistry, physiatry, & anesthesiology, the sleep clinic, geriatric services, and our system's rehabilitation hospital. Our trainees participate in a community based *Open Access Clinic* with students and faculty from across the health center. Our department was one of the first recipients of a Graduate Psychology Education Grant from the Bureau of Health Professions. That grant focused on interprofessional education and services in primary care for underserved, rural citizens. Currently, our clinical services, and training opportunities, include a (required) core practicum in integrated primary care including services in the Veterans Affairs hospital and community clinics (we have VA affiliated faculty), a school district-based mental health service, and community health clinics. Our primary care services have been part of our training and scholarly canon for almost 20 years. Our students leave for internship with integrated primary and tertiary care very much second nature to their philosophy of clinical service as developed competencies. With one of our outcome measures being successful intern match rates and a readiness to further developing competencies, our match rate and then licensing exam pass rates suggest a well prepared cohort of students. Interns arriving from other universities routinely seek training in our department because of our reputation as a truly integrated healthcare facility and academic program. Lastly, faculty in our department have had national roles in development of healthcare policy related to integrated care and primary care including leadership roles in federal policy discussions and with NGOs, like the Carter Center, with its recent focus on recommendation to enhance interprofessional education and training in integrated primary care.

Conclusion

To augment the broad and general training of our cadre of clinical psychology graduate students and interns, our department has three Major Areas of Study, clinical health psychology, clinical neuropsychology, and clinical child psychology and one area of focus in emotion/neuroscience. When each of those first three areas sought formal recognition by the APA as a specialty, our department's curriculum was cited by each as an exemplar in that specialty. Explicit in those areas of study is the scientist-practitioner emphasis on integration of scholarly pursuits with clinical services and the detailing of the importance of interprofessionalism in science and service. Our quarterly and annual evaluations of each student and each intern utilizes a competency-based assessment; besides the broad & general competencies in science and practice, several places in those evaluations each trainee is reviewed for their competence in working in team-based science, interprofessional consultation, and interprofessional health related service delivery. From our required interprofessional course work and ongoing clinical practice, through day-to-day interdisciplinary team science, the Department of Clinical and Health Psychology values its place in a truly integrated healthcare and educational environment and as a role model of interprofessionalism for our students.

Belar, C.D. and Perry, N.W. (1991). *Proceedings: National Conference on Scientist-Practitioner Education and Training for the Professional Practice of Psychology*. Sarasota FL: Professional Resource Press.

Muehrer, P, Afifi, A, Coyne, J., Kring, A., Merson, M., Prohaska, T., and Rozensky, R. (2002). Research on Mental Disorders: Overcoming Barriers to Collaborations Between Basic Behavioral Scientists and Public Health Scientists. *Journal of Clinical Psychology in Medical Settings*, 9, 252-262.