

Sample Congressperson Letter for AMP members to cut and paste and tweak:

[Date x, xxxx]

Dear [Veterans Administration or Congressperson]

I write to you as a licensed psychologist and, as a member of the Academy of Medical Psychology (AMP) – the comprehensive leader for credentialing medical psychologists in the United States and other countries – with regards to the recently-emerging crisis in the Veteran’s Administration (VA). Personally, and through AMP initiatives we have consistently been supporters of quality and timely treatment for veterans.

This tangible crisis exposed current delays, flagrant manipulation of waiting lists and inadequate care for 200,000 Veterans suffering from Post-Traumatic Stress Disorders (PTSD), and showed practices of over-medicating and undertreating where more appropriate treatments -- including psychotherapy, and other behavioral interventions -- readily available, are not being utilized. These unwarranted and unprecedented treatment deficiencies and delays in scheduling of initial evaluations and follow-up appointments go hand-in-hand with blocked referrals to specialists, i.e., psychologists and medical psychologists for psychological assessment and intervention, and jeopardize our returning veterans unnecessarily.

Contributing to this shortage of competently trained personnel to handle our veterans’ healthcare needs is an over-reliance on psychiatrists in the VA. This is a significant problem for multiple reasons: 1) There is a shortage of psychiatrists world-wide; 2) medical trainees are decreasingly applying for psychiatric residencies in favor of other, more lucrative specialties; 3) due to various factors there is an ever-increasing emphasis on psychopharmacology as a sole focus of training, with a concomitant marked reduction in psychiatrists’ preparation in behavioral health knowledge and intervention.

By contrast, psychologists training focuses on behavioral and psychological assessment and intervention from the beginning of their graduate studies. Psychologists’ training delineates personality dynamics and the individual’s response to his or her environment to mitigate illness and promote healing. This tailored treatment approach supports an active remedial relationship for the wounded veteran and veteran needing skills to vanquish his or her trauma. We cannot continue to pretend that “medication only approaches” or being treated as a passive, powerless patient are effective “change processes” or “adequate care”. The science clearly shows the limitations of these approaches, even when the veteran can access them. Auspiciously, Medical psychologists have additional post-doctoral training in psychopharmacology and treatment of the psychological aspects of chronic medical diseases integrated with their behavioral health training. They are the world’s most highly educated and prepared diagnosticians and treatment prescribers for behavioral health and psychological aspects of medical illnesses and trauma. While there has long been confusion with regard to the difference between psychiatrists and psychologists training and roles, medical psychologists are trained in both medical screening and identification of the need for medical referral and

collaboration, behavioral treatment, and many are prescribing or collaborating with physicians with regard to psychoactive medication selection and patient monitoring (what we describe as LII and LIII psychopharmacology practice). They are the most highly trained US provider to render effective skill based therapies. Hence, the Medical Psychologist and affiliated clinical psychologists are the essential discipline necessary in enhancing access, quality of care, and filling the gap of psychiatrist shortages in the VA system.

There are 10,000 recently licensed graduates of clinical psychology programs that could be utilized in the VA system which would promptly address veterans' mental health needs, returning them to productive lives and reintegrating them into the community. Exemplary of psychologists' potential contributions include the major beneficial impact on veterans' health through their direct involvement in combat units in Afghanistan, diagnosing behavioral disorders and clinical needs and prescribing psychoactive medications in consort with more comprehensive treatment plans in All Branches of the Military. Psychologists in these acute settings provide immediate care to affected soldiers with attentiveness to a full range of medical and behavioral interventions.

Effectiveness of employing psychologists in these combat settings has been such that the Department of Defense (DoD) created the Behavioral Health Optimization Program (BHOP) which embeds medical psychologists into primary care physician panels in military hospitals. These medical psychologists provide timely, direct mental health consultation to primary care doctors during their routine medical appointments.

As an advocate for quality healthcare, the VA system, and as a medical psychologist and a member of AMP I encourage the BHOP model also be employed state side in VA hospitals and outpatient clinics. Such an arrangement would insure full utilization of available specialists and increase veterans' access to a team of healthcare providers while improving the accuracy and efficiency of assessment and quality of care which will decrease intake and treatment delays. Additionally, I encourage modification of barriers to recruitment of psychologists that enforce restriction to guild approval and issues and encourage establishing a licensed and good standing to practice psychology in a state, adequate references and work history, and a willingness to serve veterans as the "hiring criterion" for psychologists. I would also urge that psychologists rules and regulations in the VA be modified to allow psychologists to be able to practice within their full scope of practice with regard to their diagnostic, writing of treatment orders, admission and discharge in collaboration with general physicians handling the medical aspects of the patient's condition, and with regard to prescribing and collaborating upon psychoactive medication (LII and LIII psychopharmacology) for which they are duly licensed in any state.

In summary, I urge Congress to streamline hiring of medical psychologists in the VA system to diagnose and treat soldiers suffering from mental illnesses and substance abuse disorders; and, I urge Congress to authorize those psychologists with Board Certification in Medical Psychology, or specialty post-doctoral training in psychopharmacology to prescribe psychotropic medications in VA facilities towards addressing this woeful shortage of available specialists. These measures would ameliorate the suffering of our returning heroes and

prevent needless tragic suicide or lost productivity as our soldiers reintegrate into their families, and civilian lives and communities.

Yours truly and sincerely,

Dr.

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815 South Ash • Nevada, Missouri 64772 • Office: [417-667-8352](tel:417-667-8352) •

FAX: [417-667-9216](tel:417-667-9216)

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