

# TEXAS STATE BOARD OF EXAMINERS OF PSYCHOLOGISTS

EXECUTIVE DIRECTOR  
Darrel D. Spinks



## MEMBERS OF THE BOARD

Tim F. Branaman, Ph.D., Chair  
Dallas

Ronald S. Palomares, Ph.D., Vice-chair  
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Herman B. Adler, M.A.  
Houston

John K. Bielamowicz  
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Ryan T. Bridges  
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Angela A. Downes, J.D.  
Dallas

Susan Fletcher, Ph.D.  
Plano

Lou Ann Todd Mock, Ph.D.  
Bellaire

Andoni Zagouris, M.A.  
McAllen

## BOARD MEETING AGENDA

November 19, 2020

333 Guadalupe, Suite 3-900  
Austin, Texas 78701

Due to Governor Greg Abbott's March 13, 2020 proclamation of a state of disaster affecting all counties in Texas due to the Coronavirus (COVID-19) and the Governor's March 16, 2020 suspension of certain provisions of the Texas Open Meetings Act, the November 19, 2020 meeting of the Texas State Board of Examiners of Psychologists will be held by videoconference call, as authorized under Texas Government Code section 551.127. There will be no physical meeting location open to the public so long as the disaster declaration is in effect.

Members of the public will have access and a means to participate in this meeting, by two-way communication, by entering the URL address <https://zoom.us/j/92957434766> into their web browser or by calling (346) 248-7799 and entering the webinar ID 929 5743 4766. Additional telephone numbers and videoconference call access information can be found in the attached addendum. An electronic copy of the agenda and meeting materials will be made available at [www.bhec.texas.gov](http://www.bhec.texas.gov) prior to the meeting. A recording of the meeting will be available after the meeting is adjourned. To obtain a recording, please submit a request to [ppen.records@bhec.texas.gov](mailto:ppen.records@bhec.texas.gov).

For public participants, once the public comment item is reached on the agenda after the meeting convenes, the presiding officer will ask those joining by computer to use the "raise hand" feature to indicate who would like to make a public comment. Those individuals who raise their hand will then be unmuted to give public comment. Once all of the individuals with raised hands have been given an opportunity to make public comment, the individuals appearing by telephone will be unmuted and asked whether they would like to make a public comment. When making a public comment, please identify yourself and whether you are speaking individually or on behalf of an organization. All public comments will be limited to 3 minutes, unless otherwise directed by the presiding officer. In lieu of providing public comment during the meeting, you may submit written public comments via email to [General@bhec.texas.gov](mailto:General@bhec.texas.gov) in advance of the meeting. The written public comments received will be submitted to the board members for their consideration during the meeting, but will not be read aloud.

\*Topic requiring either agency action or discussion.

In the event Governor Greg Abbott's March 13, 2020 disaster declaration is not renewed or expires prior to November 19th, then pursuant to Tex. Gov't Code Ann. §551.127, notice is hereby given that one or more Board members may appear at the scheduled meeting via videoconference call, but the presiding officer will be physically present at 333 Guadalupe St., Ste. 3-900, Austin, Texas 78701. This location will be open to the public only in the event the March 13<sup>th</sup> disaster declaration is not renewed.

Please note that the Board may request input during the meeting from any interested parties or members of the public during its discussion of an agenda item.

If you are planning to attend this meeting and need auxiliary aids, services or materials in an alternate format, please contact the Board at least 5 working days before the meeting date. Phone: (512) 305-7700, E-MAIL: [general@bhec.texas.gov](mailto:general@bhec.texas.gov), TTY/RELAY TEXAS: 711 or 1-800-RELAY TX.

The Board may go into Executive Session to deliberate any item listed on this agenda if authorized under Texas Open Meetings Act, Government Code, Ch. 551.

The Board may discuss and take action concerning any matter on the agenda and in a different order from what it appears herein.

Thursday, November 19th, 10:00 a.m.

**I. Meeting Called to Order – Dr. Palomares, Ph.D., Vice-Chair**

Roll call for Members

**II. Public Comments** - Public comment is limited to three (3) minutes per individual, unless otherwise directed by the Board Chair.

**III. Approval of Minutes\***

**IV. Vice-Chair's Report – Dr. Palomares**

A. Update Regarding PSYPACT

B. TSBEP Town Hall Recap

C. ASPPB Update

1. Annual Conference Recap (*Mr. Adler*)
2. Awards and Recognition – Texas
3. COVID-19 Workgroup – *Sample Documents for Supervision* \*
4. Letter EPPP October 2020
5. Examination Stakeholder Technical Advisory Group
6. Guidelines for the Use of Social Media by Psychologist in Practice and by Psychology Regulatory Bodies

**V. Executive Director's Report – Ms. Moore**

\*Topic requiring either agency action or discussion.

- A. TSBEF Measures Report – 4<sup>th</sup> Quarter
- B. Governor’s Declared Disaster – COVID
- C. TPA Annual Conference Recap
- D. Jurisprudence Examination
- E. BHEC Elimination of License Renewal Permit

**VI. Selection of TSBEF Council Member\***

- A. Professional Member (*Term Begins Feb 1, 2021*)

**VII. Rules – Dr. Palomares**

- A. New Rules or Proposed Rule Changes Being Considered for Recommendation to the Executive Council\*
  - 1. 463.30, Examinations Required for Licensure
  - 2. 463.31, Minimum Passing Scores for Examinations
  - 3. 463.3, Use of Other Mental Health License During Supervised Experience
  - 4. 463.8, Licensed Psychological Associate
  - 5. 463.10, Licensed Psychologists
  - 6. 463.20, Special Provisions Applying to Military Service Members, Veterans, and Spouses
  - 7. 463.25, Health Service Psychologists Specialty Certification
  - 8. 463.35, Professional Development
  - 9. 465.1, Definitions
  - 10. 465.2, Supervision
  - 11. 465.6, Solicitation, Use of Titles, and Business Names
  - 12. 465.13, Personal Problems, Conflicts and Dual Relationship
  - 13. 465.18, Forensic Services
  - 14. 465.20, Research
  - 15. 465.38, Psychological Services for Schools
  - 16. 463.40, Licensing of Person with Criminal Convictions
- B. Rules Published in the Texas Register and Awaiting Adoption Recommendations\*

There are no rule proposals awaiting review or consideration at this time.

**VIII. Enforcement Matters and Report from General Counsel**

- A. Enforcement Staff:
  - 1. Review of Dismissals by Executive Director
  - 2. Status Reports (*4<sup>th</sup> Quarter and Annual*)
  - 3. Changes to Projected Time Schedules
  - 4. Discussion on scheduling of ISC Panels\* (*Dr. Palomares*)
- B. Agency Counsel:

**\*Topic requiring either agency action or discussion.**

1. Review of Agreed Orders Approved by Executive Director or Awaiting Ratification by the Council\*
2. Review of Contested Cases from the State Office of Administrative Hearings\*

**IX. Compliance – Dr. Mock and Mr. Adler**

- A. Review of Compliance with Agreed Orders

**X. Jurisprudence Examination Committee – Dr. Fletcher and Ms. Downes**

No new matters to report.

**XI. Applications Committee – Dr. Palomares and Mr. Zagouris**

No new matters to report.

**XII. Future Issues and Other Requested Agenda Items**

- A. Requests from Board Members for Future Agenda Items

**XIII. Meeting Adjourned**

**\*Topic requiring either agency action or discussion.**

### **Addendum: Additional Videoconference and Telephone Conference Call Information**

Regular meeting of the Texas State Board of Examiners of Psychologists.

When: Nov 19, 2020 10:00 AM Central Time (US and Canada)

Topic: Texas State Board of Examiners of Psychologists November 19th, 2020 Board Meeting

Please click the link below to join the webinar:

<https://zoom.us/j/92957434766>

Or iPhone one-tap :

US: +13462487799,,92957434766# or +12532158782,,92957434766#

Or Telephone:

Dial(for higher quality, dial a number based on your current location):

US: +1 346 248 7799 or +1 253 215 8782 or +1 669 900 9128 or +1 312 626 6799 or +1 646 558 8656 or +1 301 715 8592

Webinar ID: 929 5743 4766

International numbers available: <https://zoom.us/u/adLszYk5Tt>

# TEXAS STATE BOARD OF EXAMINERS OF PSYCHOLOGISTS



EXECUTIVE DIRECTOR  
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## Texas State Board of Examiners of Psychologists

### MINUTES

**August 13, 2020**

The Texas State Board of Examiners of Psychologists met via Zoom video conference on August 13, 2020. The following Board members were in attendance: Tim Branaman, Ph.D., Chair; Herman Adler, M.A.; John Bielamowicz; Ryan Bridges; Susan Fletcher, Ph.D.; Lou Ann Todd Mock, Ph.D., Vice-Chair; Ronald Palomares, Ph.D. and Andoni Zagouris, M.A. Also, in attendance was Darrel Spinks, Executive Director. Angela Downes, J.D. was absent from the meeting.

### **Thursday, August 13, 2020**

1. The meeting was called to order at 10:02 a.m. by Dr. Branaman.
2. The Board moved into Item II, Public Comments:
  - A. Comments were received regarding child custody evaluations from Alyssa Karsagi and Tara Coronado.
3. The Board moved into Item III, Meeting Minutes and Certified Agenda.

A MOTION WAS MADE BY DR. MOCK AND SECONDED BY MR. BRIDGES TO APPROVE THE MINUTES OF THE MAY 14, 2020, BOARD MEETING WITH CHANGES. THE VOTE CARRIED WITH MS. DOWNES ABSENT FROM THE VOTE.

4. The Board moved into Item IV, Chair's Report – Dr. Branaman.
  - A. Dr. Branaman introduced the new BHEC Psychology Program Specialist, Ms. Diane Moore.
  - B. ASPPB Update:

333 Guadalupe, Suite 2-450, Austin, Texas 78701  
(Administration) 512-305-7700 (Enforcement) 512-305-7709 (TDD) 1-800-735-2989  
(Fax) 512-305-7701 <http://www.tsbep.texas.gov>

The Texas State Board of Examiners of Psychologists is an equal opportunity employer and does not discriminate on the basis of race, color, religion, national origin, age, sex, disability, or sexual orientation.

- i. Dr. Branaman stated that the Board Chair July meeting turned out quite well. ASPPB is working on educational requirements of all jurisdictions so that they can publish them online for the training coordinators at the various universities. Dr. Branaman stated that there will be another Board Chair meeting sometime around October 2020.
  - ii. ASPPB annual meeting of delegates to be held in New York City was canceled, however they will have a virtual annual meeting. Mr. Adler will represent the Board. Dr. Branaman, Dr. Palomares and Mr. Zagouris will be attending. The cost will be \$50.00 per person.
  - iii. Early issue of adoption of EPPP2 had some challenges between jurisdictions.
- C. Update regarding Texas Behavioral Health Executive Council Operations:
  - i. Dr. Branaman stating that the website was up and working.
  - ii. Mr. Spinks discussed the links populated. Everything will be redirected from TSBEP website to BHEC website on 9/1/2020.
  - iii. Mr. Spinks stated that the FAQs will not be done by 9/1/2020, jurisprudence examination, applications and newsletter link are ready to go.
  - iv. Mr. Spinks stated that the agency has not received the LAR instructions.
  - v. Mr. Spinks stated that staff are having issues regarding the new BHEC offices.
- D. Update regarding PsyPact:
  - i. Mr. Hyde updated the Board:
    - a. E. Passport applications started on July 1, 2020;
    - b. Federal grant was received, so if anyone applies from now until the end of the year, their fees will be waived;
    - c. November meeting was to be held in Georgia, however due to Covid-19 the meeting will be held virtually; and
    - d. Newsletter will possibly be coming soon.

5. The Board moved into Item V, the Executive Director's Report – Mr. Spinks

- A. Mr. Spinks discussed the revision of the calligraphy license. Instead of sending the license to house print, we can print the license as soon as a licensee is licensed except for psychologist. This will also reduce cost to the agency.

- B. Budget Update:
  - i. Mr. Spinks reviewed the 3<sup>rd</sup> Qtr. Performance Measures for FY 2020.
  - ii. Mr. Spinks reviewed the Year-to-Date Financial report.
- C. Mr. Spinks updated the Board regarding Governor Abbott's disaster declaration.
- D. Mr. Spinks stated that Scot Kibbe is the new OOG Policy Analyst for the agency.

6. The Board moved into Item VI, Rules – Dr. Branaman, and Dr. Palomares.

- A. The Board discussed Board rules 463.30, Examinations Required for Licensure and 463.31, Minimum Passing Scores for Examinations. Mr. Spinks stated that the Board needs to decide if these rule changes would trigger an anti-competitive or good governance review at the Council; are they the type of rule that is going to need to go to the Governor's Regulatory Compliance Division; and how the rule be viewed by the OOG Budget and Policy Division.
- B. The Board will send out a mass email regarding this matter, draft and post letter discussing regarding the rule change, post the rule changes and have a 45 day comment period. The Board decided to hold a virtual Townhall meeting sometime in October. Mr. Spinks, Ms. Moore, the Board Chair, Dr. Palomares, Dr. Fletcher and Mr. Bielamowicz will attend the Townhall meeting.

A MOTION WAS MADE BY MR. ZAGOURIS AND SECONDED BY DR. PALOMARES TO HAVE A VIRTUAL TOWNHALL MEETING TO DISCUSS POSSIBLE RULE CHANGES. THE VOTE WAS APPROVED UNANIMOUSLY.

B. The Board reviewed the Adopted Rules:

- i. Repeal Chapter 463 and Adopt Applications and Licensing, 463.1, 463.2, 463.3.

A MOTION WAS MADE BY DR. MOCK AND SECONDED BY MR. BIELAMOWICZ TO APPROVE THE ADOPTED REPEALED RULES AND ADOPTED NEW RULES. THE VOTE WAS APPROVED UNANIMOUSLY.

- ii. Applications and Licensing, 463.8 – 463.14.

A MOTION WAS MADE BY DR. MOCK AND SECONDED BY MR. BRIDGES TO APPROVED THE ADOPTED NEW RULES. THE VOTE WAS APPROVED UNANIMOUSLY.

- iii. 463.20, Special Provisions Applying to Military Service Members, Veterans, and Spouses.



A MOTION WAS MADE BY DR. FLETCHER AND SECONDED BY DR. MOCK TO APPROVE THE ADOPTED NEW RULE. THE VOTE WAS APPROVED UNANIMOUSLY.

- iv. 463.25, Health Service Psychologist Specialty Certification.

A MOTION WAS MADE BY DR. MOCK AND SECONDED BY MR. BRIDGES TO APPROVE THE ADOPTED NEW RULE. THE VOTE WAS APPROVED UNANIMOUSLY.

- v. Examinations, 463.30 – 463.31.

A MOTION WAS MADE BY DR. MOCK AND SECONDED BY DR. FLETCHER TO APPROVE THE ADOPTED NEW RULES. THE VOTE WAS APPROVED UNANIMOUSLY.

- vi. 463.35, Professional Development.

A MOTION WAS MADE BY DR. MOCK AND SECONDED BY MR. BRIDGES TO APPROVE THE ADOPTED NEW RULE. THE VOTE WAS APPROVED UNANIMOUSLY.

- vii. 463.40, Ineligibility Due to Criminal History.

A MOTION WAS MADE BY DR. FLETCHER AND SECONDED BY MR. BRIDGES TO APPROVE THE ADOPTED NEW RULE. THE VOTE WAS APPROVED UNANIMOUSLY.

- viii. Repeal Chapter 465 and Adopt Rules of Practice 465.1 – 465.38.

A MOTION WAS MADE BY DR. MOCK AND SECONDED BY DR. MOCK AND SECONDED BY MR. BRIDGES TO APPROVE THE REPEALED RULES AND ADOPTED NEW RULES. THE VOTE WAS APPROVED UNANIMOUSLY.

A MOTION WAS MADE BY MR. PALOMARES AND SECONDED BY MR. BIELAMOWICZ TO BRING BOARD RULE 465.2, SUPERVISION TO THE NOVEMBER 2020 BOARD MEETING WITH CHANGES THAT TPA REQUESTED. THE VOTE WAS APPROVED UNANIMOUSLY.

- ix. Repeal Chapter 470 and Adopt 470.1, Schedule of Sanctions.

A MOTION WAS MADE BY MR. BRIDGES AND SECONDED BY MR. ADLER TO APPROVED THE REPEALED RULES AND ADOPTED NEW RULE. THE VOTE WAS APPROVED UNANIMOUSLY.

- x. Repeal Chapter 461, 469, 471 and 473.

A MOTION WAS MADE BY DR. FLETCHER AND SECONDED BY DR. MOCK TO APPROVE THE REPEALED RULES. THE VOTE WAS APPROVED UNANIMOUSLY.

The Board recessed for a break at 11:48 a.m.

The Board reconvened from a break at 11:59 a.m.

7. The Board moved into Item VII, Enforcement Matters and Report from General Counsel.

A. Mr. Fernandez reviewed the cases dismissed by the Executive Director:

B. Mr. Fernandez presented the dismissal recommendation for Board ratification:

i. 2020-00084-2765

A MOTION WAS MADE BY DR. MOCK AND SECONDED BY DR. FLETCHER TO APPROVE THE DISMISSAL. THE VOTE CARRIED WITH DR. PALOMARES, MR. ADLER AND MR. BRIDGES RECUSED FROM VOTING.

C. Mr. Fernandez reviewed the Status Report.

D. Mr. Fernandez discussed the Projected Time Schedule – 97 cases.

E. November 2020 ISC attendees will be Dr. Palomares, Mr. Zagouris, and Mr. Bielamowicz.

F. February 2021 ISC attendees will be Dr. Palomares, Mr. Adler, and Mr. Bridges.

G. May 2021 ISC attendees will be Dr. Fletcher, Mr. Bielamowicz, and Mr. Zagouris.

H. August 2021 attendees will be Dr. Fletcher, Mr. Adler and Mr. Bridges.

I. Mr. John Bridges presented the Agreed Orders for the Board's approval:

i. The Board reviewed Agreed Order No. 2020-00059-13923, in the matter of Lorena Olivas, Ph.D.

A MOTION WAS MADE BY MR. BIELAMOWICZ AND SECONDED BY MR. ADLER TO APPROVE THE AGREED ORDER. THE VOTE CARRIED WITH DR. FLETCHER, MR. ZAGOURIS AND MR. BRIDGES RECUSED FROM VOTING.

ii. The Board reviewed Agreed Order No. 2020-00057-13205, in the matter of Edward Scott Hamilton, Ph.D.

A MOTION WAS MADE BY DR. MOCK AND SECONDED BY DR. PALOMARES TO APPROVE THE AGREED ORDER. THE VOTE CARRIED WITH DR. FLETCHER, MR. ZAGOURIS AND MR. BRIDGES RECUSED FROM VOTING.

- iii. The Board reviewed Agreed Order No. 2020-71-9323 and 2020-00092-9323, in the matter of Michael James Leach, Ph.D.

A MOTION WAS MADE BY DR. PALOMARES AND SECONDED BY MR. BIELAMOWICZ TO APPROVE THE AGREED ORDER. THE VOTE CARRIED WITH DR. FLETCHER, MR. ZAGOURIS AND MR. BRIDGES RECUSED FROM VOTING.

- 8. The Board moved into Item VIII, Compliance – Dr. Mock and Mr. Adler – nothing to report.
- 9. The Board moved into Item IX, Jurisprudence Examination Committee – no items to discuss.
- 10. The Board moved into Item X, Applications Committee – Dr. Palomares and Mr. Zagouris.
  - A. Dr. Kemp and Mr. Bob Stear spoke regarding her application for reinstatement.

A MOTION WAS MADE BY MR. BIELAMOWICZ AND SECONDED BY DR. PALOMARES TO DENY THE REQUEST FOR RELICENSURE AND DR. KEMP COULD NOT APPLY FOR TWO YEARS. THE VOTE WAS APPROVED UNANIMOUSLY.

- 11. The Board moved into Item XII, Future Issues and Other Requested Agenda Items.
  - A. Dr. Fletcher discussed the proposed newsletter article regarding Test Data versus Test Materials.

A MOTION WAS MADE BY MR. ADLER AND SECONDED BY MR. BIELAMOWICZ TO APPROVE THE NEWSLETTER WITH CHANGES.

- 12. The meeting was adjourned at 1:39 p.m. by Dr. Branaman.





# ASPPB

Association of State and  
Provincial Psychology Boards

## Certificate of Recognition

In recognition of the Texas State Board of Examiners of Psychologists'  
extraordinary contribution to ASPPB  
and to the regulation of psychology as part of the PSYPACT Commission  
at the time of implementation on July 1, 2020.

TX HB 1501 (Enacted on 6/10/2019)

*Andrea H. Young, PhD*

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President

*MBA Lueck*

\_\_\_\_\_  
Executive Officer





# ASPPB

Association of State and  
Provincial Psychology Boards

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Supporting member jurisdictions in fulfilling their responsibility of public protection.

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Darrel Spinks, Executive Director  
Texas Board of Examiners of Psychologists  
333 Guadalupe, Tower 2, Room 450  
Austin, TX 78701

RE: ASPPB Presidents' Award

Dear Darrel:

I am pleased to inform you that the ASPPB Board of Directors has selected the Texas Board of Examiners of Psychologists to receive a Certificate of Recognition in recognition of the Texas Board's extraordinary contribution to ASPPB and to the regulation of psychology as part of the PSYPACT Compact at the time of implementation on July 1, 2020. Please accept our sincere congratulations.

ASPPB will be holding its' Annual Meeting virtually this year on October 16 – 17, 2020. We will be recognizing our award winners in a very brief session on Saturday, October 17, 2020 at 2:00 PM Eastern Daylight Time. We would like to extend an invitation to you, or a member of your Board to attend the award session. The entire Annual Meeting will be October 16 - 17, 2020 and you are certainly welcome to register to attend the full meeting if you wish.

Please watch your email as we get closer to the meeting for the link to attend the Annual Meeting awards session.

It is a privilege for the Association to recognize your contributions to psychology in this way. I look forward to seeing you at the virtual ASPPB Annual Meeting.

Sincerely,

C. Gerald O'Brien, PhD  
ASPPB Past-President  
Chair, ASPPB Nominations Committee

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President, Board of Directors – Sheila G. Young, PhD

Chief Executive Officer – Mariann Burnetti-Atwell, PsyD

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215 Market Road • PO Box 849 • Tyrone, Georgia • 30290 • (678) 216-1175 • [www.asppb.org](http://www.asppb.org)





# ASPPB

Association of State and  
Provincial Psychology Boards

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Supporting member jurisdictions in fulfilling their responsibility of public protection.

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November 3, 2020

Dear Colleagues,

To deal with uncertainties, and to determine if there are any unintended consequences from the COVID-19 crisis which might impact students, applicants for licensure, and licensed or registered psychologists, the Association of State and Provincial Psychology Boards (ASPPB), in June 2020, created a workgroup to gather information on how the crisis and the post crisis, 'new normal' might affect the practice of psychology. ASPPB is concerned that, due to no fault of their own, students, applicants for licensure, and licensed or registered psychologists might experience increased difficulties getting the requisite education, training, and supervised experiences needed for licensure or meeting the requirements to maintain their license or registration.

The ASPPB COVID-19 Workgroup consists of members from ASPPB along with a representative from the Association of Canadian Psychology Regulatory Organizations (ACPRO), the Board Administrators/Registrars Committee (BARC), and the Board Chairs Committee (BCC). This group, through three virtual meetings, together began discussions with representatives from the education and training community, the professional practice community, the Canadian and U.S. regulatory community, and groups within Canadian and U.S. national psychological organizations to find out what they were hearing about unintended consequences impacting the practice of psychology, and if they had considered how to deal with these potential problems.

As a result of these meetings, the ASPPB Workgroup grew to include one representative each from the education and training community, the professional practice community, and the provincial regulatory community with the plan of developing resources for the training and practice communities to assist students to document their experiences during the pandemic in a standardized way that can be provided to psychology boards and colleges to assist in their review of credentials, educational experiences and/or practice requirements. To begin with, this group expanded on the work that recently occurred in Canada to capture education and training experiences for those students and trainees impacted by COVID-19. Specifically, the ASPPB Workgroup developed four forms that can function as resource tools to assist individuals to consistently capture the nuances that are occurring in their training programs, during practicum, internship, and in their post-doctoral experiences.

These forms are not meant to take the place of any licensure requirement or needed document, or to give the impression or promise that the completion of these forms will ensure licensing. These forms are intended, however, to assist individuals to better log information about their personal training experiences during COVID-19 and while the experiences are fresh in their minds and students and trainees are still closely working with those who can properly attest to their work and training experiences.

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President, Board of Directors – Sheila G. Young, PhD | Chief Executive Officer – Mariann Burnetti-Atwell, PsyD

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As a result, the ASPPB COVID-19 Workgroup is excited to share the work they have done on this project. Please find attached four developed resource tools:

- COVID-19 Modification-Education Form
- COVID-19 Modification-Practicum Form
- COVID-19 Modification-Internship Form
- COVID-19 Modification-Post-Doctoral Experience Form

These forms can also be accessed on the ASPPB website at:

<https://www.asppb.net/page/COVID19ModificationForms>

In addition, ASPPB would like to thank those groups listed below that helped to guide the work of the Workgroup. Without the willingness of these groups to come together, these forms could not have been produced:

- APA Board of Educational Affairs
- APA Commission on Accreditation
- Committee on Early Career Psychologists
- Council of Chairs of Training Councils
- Council of Executives of State, Provincial and Territorial Psychological Association
- APA Ethics Committee
- APA of Graduate Students
- APA Office of Legal & Regulatory Policy
- APA Professional Practice
- Association of Canadian Psychology Regulatory Organizations
- Association of Counseling Center Training Agencies
- Association of Psychology Postdoctoral and Internship Centers
- Canadian Council of Professional Psychology Programs
- Canadian Psychological Association
- Council of Counseling Psychology Training Programs
- Council of Directors of School Psychology Programs
- Council of Professional Associations of Psychologists
- Council of University Directors of Clinical Psychology
- National Council of Schools and Programs of Professional Psychology
- Veterans Administration

ASPPB and the ASPPB COVID-19 Workgroup hope these documents will prove to be useful resources to you and to those you are charged to assist and support.

Respectfully,



Mariann Burnetti-Atwell, PsyD  
Chief Executive Officer, ASPPB



## COVID-19 Modifications- Internship Form

*This form will serve as a standardized way for trainees and their supervisors, directors of training, and others who might be attesting to the information, to supply information to licensing boards/colleges about any accommodations or adjustments that were made during the COVID-19 pandemic. Please note that supplying the information in this format **does not guarantee** licensure in any particular jurisdiction, nor does this guarantee that an applicant has met a particular jurisdiction's requirements for licensure."*

**Applicant Name & Title:** \_\_\_\_\_

Attestor Name & Title: \_\_\_\_\_

Attestor Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Attestor License Number & Jurisdiction: \_\_\_\_\_

Primary Supervisor Name & Title: \_\_\_\_\_

Primary Supervisor Email: \_\_\_\_\_ Phone: \_\_\_\_\_

### Training Agency

Name of Training Agency: \_\_\_\_\_

Address of Training Agency: \_\_\_\_\_

Agency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

### Internship Details

Internship Dates: \_\_\_\_\_ to \_\_\_\_\_

Duties and Responsibilities:

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What modifications were made in training due to the COVID-19 pandemic for the intern to accomplish these duties and responsibilities? (For example, did the internship go from face-to-face psychotherapy to virtual psychotherapy, go from individual face-to-face supervision to virtual supervision, utilize simulated patients, and/or utilize simulated testing or have intern review raw testing data in lieu of face-to-face assessment?)

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### COVID-19 Modifications- Internship Form

Was the internship American Psychological Association (APA) accredited when this intern completed training? \_\_\_\_\_

Was the internship Canadian Psychological Association (CPA) accredited when this intern completed training? \_\_\_\_\_

Was the internship a member of APPIC when this intern completed training? \_\_\_\_\_

### Internship Hours

1. Total number of weeks of internship (excluding all leave): \_\_\_\_\_ Did the number of weeks during the 2019-2020 training year differ from a standard internship year? \_\_\_\_\_

Please detail any modifications made to the weeks of internship due to the pandemic.

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2. Average number of hours per week of internship: \_\_\_\_\_ Did the number of hours per week during the 2019-2020 training year differ from a standard internship year? \_\_\_\_\_

Please detail any modifications made to the number of hours per week of internship due to the pandemic.

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3. Total number of hours of internship: \_\_\_\_\_ Did the total number of hours during the 2019-2020 training year differ from a standard internship year? \_\_\_\_\_

Please detail any modifications made to the total number of hours of internship due to the pandemic.

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4. Total hours of individual supervision from all licensed psychologists: \_\_\_\_\_ Did the total hours of individual supervision during the 2019-2020 training year differ from a standard internship year? \_\_\_\_\_

Please detail any modifications made to the total hours of individual supervision due to the pandemic.

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### COVID-19 Modifications- Internship Form

5. Total hours of group supervision from all licensed psychologists: \_\_\_\_\_ Did the total hours of group supervision during the 2019-2020 training year differ from a standard internship year? \_\_\_\_\_

Please detail any modifications made to the total hours of group supervision due to the pandemic.

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6. Number of hours per week of individual and group supervision from all other licensed health care professionals: \_\_\_\_\_ Did these hours during the 2019-2020 training year differ from a standard internship year? \_\_\_\_\_

Please detail any modifications made to the number of hours per week of individual and group supervision from all other licensed health care professionals due to the pandemic.

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7. Number of hours/week of Direct Psychological Services/Face-to-Face Patient/Client Contact: \_\_\_\_\_

Please detail any modifications made to the number of hours per week of Direct Psychological Services/Face-to-Face Patient/Client Contact due to the pandemic. Please include any modifications made to how the intern acquired the hours of Direct Psychological Services/Face-to-Face Patient/Client Contact (e.g., use of virtual platforms to obtain direct client hours, and/or use of simulated patients or simulated assessments to meet direct clinical hours).

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8. Number of hours per week of Indirect Psychological Services: \_\_\_\_\_

Please detail any modifications made to the number of hours per week of Indirect Psychological Services due to the pandemic. Please include any modifications to how the intern acquired the hours of Indirect Psychological Services (e.g., scoring and interpreting raw data rather than direct test administration, and/or use of simulated patients).

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9. Total number of hours of General Psychological Services/Support Activities completed during this internship: \_\_\_\_\_



### COVID-19 Modifications- Internship Form

Please detail any modifications made to the total number of hours of General Psychological Services/Support Activities due to the pandemic. Please include any modifications to how the intern acquired the hours of General Psychological Services/Support Activities (e.g., increased professional development training, virtual learning opportunities to replace didactics).

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10. Percentage of total supervision provided by licensed psychologists: \_\_\_\_\_

Please detail any modifications made to the percentage of total supervision provided by licensed psychologists due to the pandemic. Please include any modifications to how supervision was provided to the intern (e.g., virtual supervision).

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11. Percentage of total supervision provided by all other licensed healthcare professionals: \_\_\_\_\_

Please detail any modifications made to the percentage of total supervision provided by all other licensed healthcare professionals due to the pandemic. Please include any modifications to how supervision was provided to the intern (e.g., virtual supervision).

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12. Were any other modifications made to the program due to the pandemic that were not captured above? \_\_\_\_\_

13. In what ways did adjustment to COVID-19 afford the intern new learning opportunities?

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14. If modifications were made to the internship program based on the pandemic, did the program provide sufficient opportunities for this individual to demonstrate all required competencies and for the training program to fully assess those competencies? In other words, do you have sufficient data on which to base an opinion about this individual's competency in all required domains? \_\_\_\_\_

If "no," please detail what areas you were able to assess. \_\_\_\_\_

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**COVID-19 Modifications- Internship Form**

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Attestor Signature: \_\_\_\_\_

Date: \_\_\_\_\_



## COVID-19 Modifications- Practicum Form

*This form will serve as a standardized way for trainees and their supervisors, directors of training, and others who might be attesting to the information, to supply information to licensing boards/colleges about any accommodations or adjustments that were made during the COVID-19 pandemic. Please note that supplying the information in this format **does not guarantee** licensure in any particular jurisdiction, nor does this guarantee that an applicant has met a particular jurisdiction's requirements for licensure.*

**Applicant Name & Title:** \_\_\_\_\_

Direct Supervising Psychologist Name: \_\_\_\_\_

Direct Supervisor Email: \_\_\_\_\_ Phone: \_\_\_\_\_

### Practicum Site

Name of Practicum Site: \_\_\_\_\_

Address of Practicum Site: \_\_\_\_\_

Direct Supervising Psychologist Title: \_\_\_\_\_

Direct Supervising Psychologist License Number & Jurisdiction: \_\_\_\_\_

### Academic Program Details

Academic Training Director Name: \_\_\_\_\_

Training Director Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Institution Name: \_\_\_\_\_

Academic Program: \_\_\_\_\_

### Practicum Details

Practicum Dates: \_\_\_\_\_ to \_\_\_\_\_

Academic Term & Year: \_\_\_\_\_

Duties and Responsibilities:

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### COVID-19 Modifications- Practicum Form

What modifications, if any, were made in training due to the COVID-19 pandemic for the practicum student to accomplish these duties and responsibilities? (For example, did the practicum go from face-to-face psychotherapy to virtual psychotherapy, go from individual face-to-face supervision to virtual supervision, utilize simulated patients, and/or utilize simulated testing or have practicum student review raw testing data in lieu of face-to-face assessment?)

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#### Practicum Hours

1. Total number of weeks of practicum (excluding all leave): \_\_\_\_\_ Did the number of weeks during this training year differ from a standard practicum year? \_\_\_\_\_

Please detail any modifications made to the weeks of practicum due to the pandemic.

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2. Average number of hours per week of practicum: \_\_\_\_\_ Did the number of hours per week during this training year differ from a standard practicum year? \_\_\_\_\_

Please detail any modifications made to the number of hours per week of practicum due to the pandemic.

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3. Total number of hours of practicum: \_\_\_\_\_ Did the total number of hours during this training year differ from a standard practicum year? \_\_\_\_\_

Please detail any modifications made to the total number of hours of practicum due to the pandemic.

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4. Total hours of individual supervision from all licensed psychologists: \_\_\_\_\_ Did the total hours of individual supervision during this training year differ from a standard practicum year? \_\_\_\_\_

Please detail any modifications made to the total hours of individual supervision due to the pandemic.

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### COVID-19 Modifications- Practicum Form

5. Total hours of group supervision from all licensed psychologists: \_\_\_\_\_ Did the total hours of group supervision during this training year differ from a standard practicum year? \_\_\_\_\_

Please detail any modifications made to the total hours of group supervision due to the pandemic.

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6. Number of hours per week of individual and group supervision from all other licensed health care professionals: \_\_\_\_\_ Did these hours during this training year differ from a standard practicum year? \_\_\_\_\_

Please detail any modifications made to the number of hours per week of individual and group supervision from all other licensed health care professionals due to the pandemic.

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7. Number of hours/week of Direct Psychological Services/Face-to-Face Patient/Client Contact: \_\_\_\_\_

Please detail any modifications made to the number of hours per week of Direct Psychological Services/Face-to-Face Patient/Client Contact due to the pandemic. Please include any modifications made to how the practicum student acquired the hours of Direct Psychological Services/Face-to-Face Patient/Client Contact (e.g., use of virtual platforms to obtain direct client hours, and/or use of simulated patients or simulated assessments to meet direct clinical hours).

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8. Number of hours per week of Indirect Psychological Services: \_\_\_\_\_

Please detail any modifications made to the number of hours per week of Indirect Psychological Services due to the pandemic. Please include any modifications to how the practicum student acquired the hours of Indirect Psychological Services (e.g., scoring and interpreting raw data rather than direct test administration, and/or use of simulated patients).

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9. Total number of hours of General Psychological Services/Support Activities completed during this practicum: \_\_\_\_\_



### COVID-19 Modifications- Practicum Form

Please detail any modifications made to the total number of hours of General Psychological Services/Support Activities due to the pandemic. Please include any modifications to how the practicum student acquired the hours of General Psychological Services/Support Activities (e.g., increased professional development training, virtual learning opportunities to replace didactics).

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10. Percentage of total supervision provided by licensed psychologists: \_\_\_\_\_

Please detail any modifications made to the percentage of total supervision provided by licensed psychologists due to the pandemic. Please include any modifications to how supervision was provided to the practicum student (e.g., virtual supervision).

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11. Percentage of total supervision provided by all other licensed healthcare professionals: \_\_\_\_\_

Please detail any modifications made to the percentage of total supervision provided by all other licensed healthcare professionals due to the pandemic. Please include any modifications to how supervision was provided to the practicum student (e.g., virtual supervision).

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12. Were any other modifications made to the program due to the pandemic that were not captured above? If so, what were they?

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13. In what ways did adjustment to COVID-19 afford the practicum student new learning opportunities?

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14. If modifications were made to the practicum program based on the pandemic, did the program provide sufficient opportunities for this individual to demonstrate all required competencies and for the training program to fully assess those competencies? In other words, do you have sufficient data on which to base an opinion about this individual's competency in all required domains? \_\_\_\_\_





## COVID-19 Modifications- Practicum Form

If "no," please detail what areas you were able to assess.

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### Practicum Questionnaire

1. Did this setting have, as part of its organizational mission, a goal of training professional psychologists? \_\_\_\_\_
2. Did this setting have a Licensed/Trained Psychologist identified as the person responsible for maintaining the integrity and quality of the experience of the practicum student? \_\_\_\_\_
3. Did the applicant's training program provide oversight for this practicum experience? \_\_\_\_\_
4. Was the practicum experience based on appropriate academic preparation of the student? \_\_\_\_\_
5. Was the practicum part of an organized, sequential series of supervised experiences of increasing complexity for the student? \_\_\_\_\_
6. Was there a written training plan between the student, the practicum training site and the graduate program? \_\_\_\_\_
7. Was the practicum training an extension of the applicant's academic coursework? \_\_\_\_\_
8. Did the student successfully complete the practicum? \_\_\_\_\_
9. If you answered "no" to any questions above, please explain.

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10. What, if any, modifications were made between the practicum site and academic program due to the pandemic?

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**COVID-19 Modifications- Practicum Form**

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Directing Supervising Psychologist Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Director of Training Signature: \_\_\_\_\_

Date: \_\_\_\_\_



## COVID-19 Modifications-Graduate Education Form

*This form will serve as a standardized way for trainees and their supervisors, directors of training, and others who might be attesting to the information, to supply information to licensing boards/colleges about any accommodations or adjustments that were made during the COVID-19 pandemic. Please note that supplying the information in this format **does not guarantee** licensure in any particular jurisdiction, nor does this guarantee that an applicant has met a particular jurisdiction's requirements for licensure.*

**Applicant Name & Title:** \_\_\_\_\_

Attestor Name & Title: \_\_\_\_\_

Attestor Email: \_\_\_\_\_ Phone: \_\_\_\_\_

### Degree Information

Institution Name: \_\_\_\_\_

Institution Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Program of Study: \_\_\_\_\_

Degree: \_\_\_\_\_

### Degree Details

Date Degree Conferred: \_\_\_\_\_

Was the program American Psychological Association (APA) accredited when this student's degree was conferred? \_\_\_\_\_

Was the program Canadian Psychological Association (CPA) accredited when this student's degree was conferred? \_\_\_\_\_

Was the program ASPPB/NR Designated when this student's degree was conferred? \_\_\_\_\_

### Program Questionnaire

1. Was the graduate degree in psychology received from an institution of higher education that was regionally accredited by bodies approved by the Commission on Recognition of Postsecondary Accreditation or its successor or a member of the Association of Universities and Colleges of Canada to grant doctoral degrees at the time the applicant received his/her degree? \_\_\_\_\_ If "Yes", state the regionally accrediting body. \_\_\_\_\_



### COVID-19 Modifications-Graduate Education Form

2. Was the program publicly identified and clearly labeled as a psychology program, specifying in pertinent institutional catalogs its intent to educate and train individuals to engage in the activities which constitute the practice of psychology? \_\_\_\_\_ If "Yes," please state the title of the program.

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3. Prior to the COVID-19 pandemic, did the program require each student to complete at least one year in full-time residence on campus at the institution from which the degree was granted? (Residence means physical presence, in person, at the educational institution in a manner that facilitates the full participation and integration of the individual in the educational and training experience and includes faculty student interaction). \_\_\_\_\_

If "No," please detail what models of instruction were used in lieu of in-person residency.

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4. Was there an identifiable full-time psychology faculty in residence at the institution, and employed by providing instruction at the home campus of the institution? \_\_\_\_\_ If "Yes," state the number of full-time psychology faculty in residence at the institution. \_\_\_\_\_

5. Was there a psychologist responsible for the graduate program either as the administrative head, or as the advisor, major professor, or committee for chair the above applicant? \_\_\_\_\_ If "Yes," provide the psychologist's name and role. \_\_\_\_\_

6. Did the program maintain clear authority and primary responsibility for the core and specialty areas whether or not the program crossed administrative lines? \_\_\_\_\_

7. Did the program have an identifiable body of students in residence at the institution who were matriculated in the program for a degree? \_\_\_\_\_

8. Did the doctoral program include supervised practicum, internship, field experience or laboratory training appropriate to the area of psychology practice that was supervised by a psychologist? \_\_\_\_\_

9. What, if any, impact did the COVID-19 pandemic have on the number of hours, length, cadence, or method of instruction for any course(s)? (Please describe the courses impacted, manner of impact, and efforts made to ensure instruction was consistent with accreditation guidelines)

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### COVID-19 Modifications-Graduate Education Form

10. What, if any, impact did the COVID-19 pandemic have on the number of hours required for practica experiences? (Please describe the impact and efforts made to assess competency development for this student in light of the modifications.)

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11. What, if any, impact did the COVID-19 pandemic have on the method of instruction provided for psychological assessments and/or modification on the number or types of assessments required to certify the student as ready for internship? (Please describe the impact and efforts made to assess competency development for this student in light of the modifications.)

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12. What, if any, impact did the COVID-19 pandemic have on the method of instruction provided for supervision of psychological services? (Please describe the impact and efforts made to assess competency development for this student in light of the modifications.)

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13. What, if any, impact did the COVID-19 have on the method of instruction provided or experiences provided for diversity and multiculturalism? (Please describe the impact and efforts made to assess competency development for this student in light of the modifications.)

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14. What, if any, impact did the COVID-19 pandemic have on the program's requirements for a dissertation or final project? (Please describe the impact and efforts made to assess completion of the dissertation or final project in light of the modifications.)

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15. What, if any, impact did the COVID-19 pandemic have on how readiness for internship was assessed in order to complete the student's internship application? (Please describe the modifications made.)

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**COVID-19 Modifications-Graduate Education Form**

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Attestor Signature: \_\_\_\_\_

Date: \_\_\_\_\_



## COVID-19 Modifications- Post-Doctoral Experience Form

*This form will serve as a standardized way for trainees and their supervisors, directors of training, and others who might be attesting to the information, to supply information to licensing boards/colleges about any accommodations or adjustments that were made during the COVID-19 pandemic. Please note that supplying the information in this format **does not guarantee** licensure in any particular jurisdiction, nor does this guarantee that an applicant has met a particular jurisdiction's requirements for licensure.*

**Applicant Name & Title:** \_\_\_\_\_

Attestor Name & Title: \_\_\_\_\_

Attestor Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Attestor License Number & Jurisdiction: \_\_\_\_\_

### Training Agency

Name of Training Agency: \_\_\_\_\_

Address of Training Agency: \_\_\_\_\_

Agency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

### Post-Doc Details

Experience Dates: \_\_\_\_\_ to \_\_\_\_\_

Duties and Responsibilities:

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What modifications were made due to the COVID-19 pandemic for the supervisee to accomplish these duties and responsibilities? (For example, did the experience go from face-to-face psychotherapy to virtual psychotherapy, go from individual face-to-face supervision to virtual supervision, utilize simulated patients, and/or utilize simulated testing or have supervisee review raw testing data in lieu of face-to-face assessment?)

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## COVID-19 Modifications- Post-Doctoral Experience Form

### Experience Hours

1. Total number of weeks of experience (excluding all leave): \_\_\_\_\_ Did the number of weeks during the 2019-2020 training year differ from a standard training year? \_\_\_\_\_

Please detail any modifications made to the weeks of experience due to the pandemic.

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2. Average number of hours per week of experience: \_\_\_\_\_ Did the number of hours per week during the 2019-2020 training year differ from a standard training year? \_\_\_\_\_

Please detail any modifications made to the number of hours per week of experience due to the pandemic.

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3. Total number of hours of experience: \_\_\_\_\_ Did the total number of hours during the 2019-2020 training year differ from a standard training year? \_\_\_\_\_

Please detail any modifications made to the total number of hours of experience due to the pandemic.

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4. Total hours of individual supervision from all licensed psychologists: \_\_\_\_\_ Did the total hours of individual supervision during the 2019-2020 training year differ from a standard training year? \_\_\_\_\_

Please detail any modifications made to the total hours of individual supervision due to the pandemic.

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5. Total hours of group supervision from all licensed psychologists: \_\_\_\_\_ Did the total hours of group supervision during the 2019-2020 training year differ from a standard training year? \_\_\_\_\_

Please detail any modifications made to the total hours of group supervision due to the pandemic.

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6. Number of hours per week of individual and group supervision from all other licensed health care professionals: \_\_\_\_\_ Did these hours during the 2019-2020 training year differ from a standard training year? \_\_\_\_\_





### COVID-19 Modifications- Post-Doctoral Experience Form

Please detail any modifications made to the number of hours per week of individual and group supervision from all other licensed health care professionals due to the pandemic.

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7. Number of hours/week of Direct Psychological Services/Face-to-Face Patient/Client Contact: \_\_\_\_\_

Please detail any modifications made to the number of hours per week of Direct Psychological Services/Face-to-Face Patient/Client Contact due to the pandemic. Please include any modifications made to how the supervisee acquired the hours of Direct Psychological Services/Face-to-Face Patient/Client Contact (e.g., use of virtual platforms to obtain direct client hours, and/or use of simulated patients or simulated assessments to meet direct clinical hours).

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8. Number of hours per week of Indirect Psychological Services: \_\_\_\_\_

Please detail any modification made to the number of hours per week of Indirect Psychological Services due to the pandemic. Please include any modifications to how the supervisee acquired the hours of Indirect Psychological Services (e.g., scoring and interpreting raw data rather than direct test administration, and/or use of simulated patients).

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9. Total number of hours of General Psychological Services/Support Activities completed during this experience: \_\_\_\_\_

Please detail any modifications made to the total number of hours of General Psychological Services/Support Activities due to the pandemic. Please include any modifications to how the supervisee acquired the hours of General Psychological Services/Support Activities (e.g., increased professional development training, virtual learning opportunities to replace didactics).

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10. Percentage of total supervision provided by licensed psychologists: \_\_\_\_\_

Please detail any modifications made to the percentage of total supervision provided by licensed psychologists due to the pandemic. Please include any modifications to how supervision was provided to the supervisee (e.g., virtual supervision).

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**COVID-19 Modifications- Post-Doctoral Experience Form**

11. Percentage of total supervision provided by all other licensed healthcare professionals: \_\_\_\_\_

Please detail any modifications made to the percentage of total supervision provided by all other licensed healthcare professionals due to the pandemic. Please include any modifications to how supervision was provided to the supervisee (e.g., virtual supervision)

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12. Were any other modifications made to the program due to the pandemic that were not captured above?

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13. In what ways did adjustment to COVID-19 afford the supervisee new learning opportunities?

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14. If modifications were made to the experience based on the pandemic, did the experience provide sufficient opportunities for this individual to demonstrate all required competencies and for the training program to fully assess those competencies? In other words, do you have sufficient data on which to base an opinion about this individual's competency in all required domains? \_\_\_\_\_

If "no," please detail what areas you were able to assess.

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Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Attestor Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Dear Members,

Recently, ASPPB has been approached by a number of individuals with concerns related to the Examination of Professional Practice in Psychology (EPPP). Specifically, these concerns have been associated with safe access to EPPP test centers during COVID-19, remote access to the EPPP, and concerns regarding the validity of the EPPP. ASPPB takes each of these concerns seriously.

In an effort to keep you informed and to assist you should these same concerns come before you, please take a minute to review the information below which has been developed to provide clarity on the activities underway at ASPPB regarding both our concern for testing candidates during a public health crisis and our commitment to providing an equitable and valid examination to assist you our members in your work to safeguard the public and the public trust.

Thank you and please take care,  
*Mariann Burnett-Atwell, PsyD*  
Chief Executive Officer, ASPPB

### **Concerns with Taking the EPPP During the Presence of a Public Health Crisis**

First and most broadly, all decisions made by ASPPB in this arena are guided by a twofold mandate: to balance the health and safety of individuals sitting for the EPPP with the health and safety of those in the public who ultimately depend on psychologists meeting our profession's criteria for competency.

ASPPB has worked with its testing center vendor (Pearson) to expand the range of available testing times for EPPP candidates. This has included classifying our candidates as "essential providers" so they could take the exam when candidates for other exams may not have been allowed. In addition, Pearson agreed to increase hours and days of operations, sometimes maintaining center availability from 6 AM-11PM. We have also added third-party centers that have met our vital security standards and are capable of delivering the Exam on a Pearson platform. In addition, we have eliminated the 90-day window for registration to allow candidates to schedule far in advance, as well as eliminated the reschedule and cancellation fees (except within 24 hours' notice). While a few areas have limited availability, most areas have been able to provide time slots within reasonable time frames. We continue to monitor test center availability but if an individual is experiencing difficulties with scheduling, please contact ASPPB at (678) 216-1175 and our staff should be able to assist.

Due to COVID-19, ASPPB recognizes that many exam candidates may wish to avoid test centers. Given the evolving nature and guidance on the pandemic, much discussion has already gone into how ASPPB can address this concern and those discussions will continue. Pearson centers, for example, have implemented a number of measures to reduce risk that are based on CDC guidelines, including adding additional sanitization and proper distancing. If a candidate finds that a test center is not following proper protocols, we encourage them to contact ASPPB; in fact, should a candidate find something problematic at a test center that warrants not taking the Exam, we would ask that they not begin the Exam, file an incident report, and we will work with them on setting another administration date at a different center.

### **Remote Access to the EPPP**

ASPPB has explored this possibility and conferred extensively with technology experts and other licensing examination groups; however, technological equity concerns and security considerations remain highly persuasive deterrents in moving the test online as both factors are paramount to our public protection mandate.

Such examples include: Technology experts have discouraged providing an examination the length of the EPPP online due to the required bandwidth and connectivity. In 2020, the Canadian medical boards attempted this model, but a large portion of their candidates experienced technical issues; as a result, remote access to their

exam was halted. Additionally, online proctoring has produced security issues that have resulted in the loss of entire examination forms. All exam programs, including the EPPP, have had incidents of attempted item theft. These items can then be delivered to listservs or select groups, thus allowing access to exact exam content. Obviously, the illegal release of items impacts the validity of the Exam. While many candidates may not be aware of the security considerations that go into administering a high stakes exam such as the EPPP — and most candidates would never consider doing something this unethical — we have unfortunately had EPPP candidates engage in attempted item theft and distribution. Security and technological considerations are therefore instrumental in generating a valid assessment of candidate knowledge or skill, which is also why, at this time, ASPPB has not moved to offer online delivery of the EPPP. That said, ASPPB will continue to monitor developments to determine if an online format could be securely delivered for our candidates and preserve the integrity of the process for the best interests of the public.

### **Concerns Related to the Validity of the EPPP**

The ASPPB Examination Program is committed to providing valid, reliable, scientifically based and fair assessments of candidates seeking licensure. ASPPB firmly believes that the EPPP ultimately supports the mandate of licensing bodies to assess the foundational knowledge and skills of potential applicants and, by those assessments, to protect the public and ensure the integrity and trustworthiness of the profession to that same constituency.

As part of that commitment, we continue our focus on developing the rigor, objectivity, and validity of the exam itself. Guiding that focus is our adherence to standards set by the American Educational Research Association, the American Psychological Association, and the National Council on Measurement in Education. But ASPPB, in harnessing the highly regarded and in-depth test expertise of our profession, as well as employing test development methods intended to reduce potential bias, also goes beyond these standards. One can find a detailed explanation of the development process in our FAQs on the ASPPB website ([www.asppb.net](http://www.asppb.net)).

It is important to highlight elements of our process here: First, hundreds of subject matter experts who are practicing psychologists volunteer their time to collaborate on the ongoing development of the EPPP. These individuals intentionally represent a diversity of racial, ethnic, geographic, gender, and practice characteristics. The training for writing items for the EPPP involves, among other things, consideration of cultural and linguistic issues. Each draft item is reviewed by members of the Item Development Committee, which is comprised of a group of content experts who together cover each domain area. Each potential exam item is reviewed for accuracy, clarity of language, potential bias, and relevance for entry-level practice. If the item meets all relevance and quality standards, it is approved for the Examination Committee to review for possible pretesting on an exam.

The Examination Committee itself is further comprised of psychologists who represent various demographics, specialty areas, and expertise in each of the domain areas assessed on the Examination. The Examination Committee reviews each new item and must reach consensus on the item's relevance and quality before it is pretested on a form of the Examination. Taken together, these reviews help ensure accuracy, and the Examination Committee review provides another layer of oversight regarding fairness and relevance.

All items are then statistically evaluated through pretesting before they are used as operational (scored) items on an exam. When an item is being pretested, that item appears on the Examination, but does not count toward the candidate's exam score. An item is approved for use as a scored item *only* if its statistical performance is acceptable based on Item Response Theory criteria and it is shown to be a consistent, valid, and fair measure of the test taker's knowledge (or applied skills) in a particular domain. After pretesting, items that meet established statistical criteria are once again reviewed by the Examination Committee before being placed on an exam as an operational item.

ASPPB is always seeking refinements and improvements to this process, which is why, consistent with ongoing efforts to provide a fair assessment of candidates' knowledge and skills, ASPPB is incorporating an additional layer of review for items on the EPPP that, by statistical analysis, appear to be answered differentially across certain groups. Differential Item Functioning (DIF) analysis allows for these identified items to then be reviewed by a panel

of experts in cultural competence to determine if there is content in that item that is biased toward any particular group. If that is found to be the case, an item will be removed from the bank of items available for use on the exam, sent back for modification or rewriting, and then pretested again.

Through this multi-phase, iterative, and meticulous assessment development process, ASPPB holds as a priority a commitment to create an exam that is a standardized, objective, reliable, and valid measure of the knowledge and applied skills needed for the entry-level psychologist.



# ASPPB

Association of State and  
Provincial Psychology Boards

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Supporting member jurisdictions in fulfilling their responsibility of public protection.

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## **Examination Stakeholder Technical Advisory Group**

In June 2020, the ASPPB Board of Directors (BOD) met to discuss a process to promote collaboration and communication across stakeholder groups with regard to the Examination for Professional Practice in Psychology (EPPP). As an organization, we see the training community as valuable colleagues and believe they should play a key advisory role in examination-related matters. Accordingly, an advisory group is being formed with the goal of increasing ongoing communication and transparency related to examination development and implementation. As such, ASPPB has approved the formation of the Examination Stakeholder Technical Advisory Group (ESTAG). The following is proposed:

- This advisory group will be given a 2-year initial charter and will provide semiannual reports of activities to the ASPPB Board of Directors. At the end of the 2 years, the reports, process, outcomes, and needs will be assessed and adjusted as needed. After the initial review, the ESTAG will provide an annual report and charges/needs will be reviewed annually.
- This group will make recommendations to be considered and approved by the ASPPB BOD. Specifically, they will be tasked with:
  - Providing information on issues/questions raised by the training community and collaborating on methods to address such issues/questions.
  - Serving as an additional voice and resource to inform more substantive policy questions from or before EPPP committees.
  - Serving as informal liaisons to and from their respective communities regarding the ASPPB Examination Program.
  - Serving as a “think tank” that provides potential research ideas for examination related matters.
- Membership will include 11 members plus an ex-officio member. Members will be identified in an open nomination process and selected by the ASPPB Committee on Exam Coordination (CEC). Membership will be inclusive of individuals with an array of identities. As such, membership nominations will be solicited explicitly from the APA Committee on Ethnic Minority Affairs, the APA Committee on Sexual Orientation and Gender Diversity, and the Committee on Disability Issues in Psychology as well as the broader psychological community. ESTAG members will include:
  - 3 ASPPB representatives,
  - 2 representatives from a licensing board with one member representing the US and one member representing Canada,
  - 4 representatives from the training community, including accredited Health Service Psychology graduate programs from the United States and Canada in Clinical, Counseling, School, Clinical Neuropsychology or General Applied Psychology programs that train students for licensure. Nominations will be solicited from recognized training councils to represent the community.
  - 1 representative from the applied training community (e.g. internship, postdoctoral)

- 1 representative with expertise in licensure and certification assessment with a profession other than psychology.
  - 1 ASPPB Board Member (Ex-officio)
- As with all ASPPB committees and workgroups, potential members must be approved by the ASPPB BOD.
- Preference will be given to representatives that have expertise in measurement and/or assessment and to individuals who are licensed to practice psychology.
- As with all ASPPB work groups, members of ESTAG shall serve in a consultative role, not in a decision-making body. Any recommendations provided by this group shall be presented to the ASPPB Board of Directors.
- Because this group may occasionally have access to examination content, individuals who are not licensed must agree not to take the examination for a period of seven years after serving on the group.
- Individuals shall sign a Confidentiality Agreement to ensure the nondisclosure of any materials or information received as a result of their participation as a member of this work group.



# ASPPB

Association of State and  
Provincial Psychology Boards

## **ASPPB Social Media Task Force (SMTF)**

Guidelines for the Use of Social Media by  
Psychologists in Practice and by Psychology Regulatory Bodies  
October 9, 2020



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## ASPPB Social Media Guidelines

These social media *Guidelines* were developed for use by psychology regulatory bodies in their efforts to ensure that their publics are being well-served and to provide guidance to the profession when using social media, and to inform them about regulatory expectations for that use. It is important to stress that the mandate of psychology regulation is protection of the public, and these guidelines reflect that purpose and reality. When using social media, members of the profession are called upon to consider their ethical and professional responsibilities and the context in which social media is being used, and then to use their professional judgment accordingly.

It is essential to consider the appropriateness of any modality used in the delivery of services or in professional communication relative to the client to be served. As with any type of modality of service delivery or communication, assuming that social media would be appropriate for use with all clients would be an error in judgment. Consideration of individual issues such as culture, language, access to technology, client comfort and competence with technology, service needs, as well as the professional's competence in using the modality, are all important.

While beyond the scope of the Task Force charges, an important corollary to the issue of appropriateness of the modality is that of equitable access to psychological services. It is important to recognize and acknowledge that access to tele-services and/or to social media may not be possible for all, especially those who are members of low income, minority, or marginalized groups. It is incumbent upon psychologists to consider this reality within the context of providing services via technology, and to ensure that access to competent psychological services is not unintentionally limited for some. It is essential in providing guidance to the profession that an awareness of disparity in terms of access to care is highlighted, that it remains a topic of conversation, and that the profession and the psychology regulatory world work to mitigate this reality.

### **Confidentiality:**

- Psychologists who use social networking sites need to be familiar with, and utilize all available privacy settings to reduce risks to confidentiality.
- Psychologists must be respectful of client privacy. Therefore, it is important that psychologists exercise caution and consider the appropriateness of searching social media sites for client information without the client's permission and their informed consent.
- In general, psychologists are required to maintain the confidentiality of client protected information. There may be justifiable exceptions to the rule of confidentiality.
- Psychologists develop social media use policies that address such issues as informed consent, privacy, and how and if social media will be used in their work.

**Informed Consent:**

- Psychologists must ensure the competence of potential clients to provide informed consent.
- When engaging those unable to provide consent, psychologists must seek informed consent from those legally entitled to provide consent.
- Elements of informed consent include explanations of:
  - the possible benefits and risks in using social media to communicate.
  - emergency procedures that will be followed when or if the psychologist is not available.
  - a back-up plan if communication over social media is compromised or fails.
  - the risk of loss of security and confidentiality with the use of social media.
  - other modes of communication or service delivery that were discussed and that the client agrees to use social media.

(See **Appendix C** – Example of Informed Consent Disclaimer)

**Risk Management:**

- Psychologists are advised to have a social media policy (See **Appendix D** – Sample of Social Media Policy) that explains whether, to what degree, and how they will use social media in their provision of services. This policy is clarified in consent forms and in discussions with clients.
- Psychologists clarify on their social media sites the jurisdiction(s) where they are licensed to practice, so that it is clear that the intent is not to practice outside of the license scope.
- Psychologists avoid conflicts of interest regarding personal, financial, social, organizational, or political opinions when they use social media in a professional capacity.
- Psychologists manage access to their professional social media and are responsible for those who may access the accounts.
- Psychologists use trusted and secure networks to access professional social media accounts.
- Psychologists use encryption when sending protected and private information over social media when feasible.
- Psychologists understand the privacy settings on every application that is used by them in their practice.
- Psychologists are mindful that any social media post or communication may be forwarded to other recipients.

**Multiple Relationships:**

- Psychologists are responsible for connections they initiate through social media and for knowing whether or not these connections constitute multiple relationships. If the connection might constitute a multiple relationship, the psychologist considers whether the relationship could be potentially harmful.
- Psychologists attempt to minimize the risk of problematic multiple relationships by keeping their personal and professional social media presences separate.

**Competence:**

- Psychologists familiarize themselves with ethical and legal requirements regarding the use of social media.
- Psychologists maintain current knowledge and skills pertaining to the social media technologies they are using.
- Psychologists evaluate the appropriateness of using specific social media with each client.
- Psychologists ensure that anyone working for them within their practice, and who use social media as part of their work, have adequate training in the appropriate use of social media.
- Psychologists ensure that they have a full understanding of the risks the use of technology presents to the security and confidentiality of client personal health information.

**Professional Conduct:**

- When using social media within a professional context, psychologists consider the words used and the impact their communications might have on the public's confidence in the profession.
- Psychologists are responsive and timely in their responses when using social media in their professional work.
- Psychologists are respectful in *what* they communicate and in *how* they communicate when using social media in their professional work.
- Psychologists are respectful of professional boundaries, culture, and preferences when using social media.
- Psychologists accurately represent themselves in all social media communications.
- Psychologists seek to correct any misinformation regarding their social media presence.
- Psychologists accurately represent and document the work performed via social media, and maintain records of their professional social media communications, including maintaining all emails and texts with clients for durations consistent with their jurisdiction's requirements.

**Security of Information:**

- Psychologists delegate responsibilities for social media activities only to individuals who can be expected to perform them competently on the basis of their education, training, or experience.
- Psychologists maintain confidentiality in creating, storing, accessing, transferring, and disposing of records under their control relating to their professional social media use.
- Psychologists use security measures to protect information kept on social media that is vulnerable to loss, damage, or to inappropriate access.
- Psychologists maintain up-to-date knowledge of all individuals, devices, and accounts used in their professional social media practice.

**Personal Use of Social Media:**

- Psychologists ensure they have a working knowledge of privacy settings available on any social media platforms used.
- Psychologists are cautious about making posts to public comment sites, especially those related to their worksite / employer.
- Psychologists strive, to the extent possible, to maintain their personal online presence distinct from their professional online presence.
- Psychologists maintain clear boundaries between their professional and personal social media accounts.
- Psychologists are aware of any existing social media policies within their organization or practice group (e.g., rules about promoting the organization or practice group via social media).

(See **Appendix E** – Social Media Vignettes)

**Regulatory Body Use of Social Media:**

- Psychology regulatory boards/colleges develop and implement clear policies regarding social media and its use in regulatory work.
- Regulatory bodies ensure that all employees are familiar with the social media policies and expectations with regard to access and use of social media platforms.
- Regulatory bodies ensure that all employees are trained in the various social media platforms that are used by the board or college.
- Regulatory bodies ensure that all employees have a working knowledge of the privacy settings on the social media platforms used.
- Regulatory bodies manage access to any of their social media accounts.
- Regulatory bodies use trusted and secure networks to access agency social media accounts.

- Regulatory bodies understand the privacy settings on any social media applications used in performing regulatory functions.
- Regulatory bodies use security measures to protect information kept on social media platforms that is vulnerable to loss, damage, or to inappropriate access.

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## APPENDIX A – Glossary of Terms

**Competent** – being qualified to practice in terms of possessing the necessary skills, knowledge and attitudes of the profession, and consistently applying these to practice. When using social media in practice, psychologists also must ensure competency in the delivery of services using this modality.

**Confidentiality**– ensuring the security of client personal information, including personal health information, and to only share such information with informed consent. Within a social media context, it is necessary to ensure that information is properly secured through encryption, privacy settings, and the use of secure storage sites.

**Email** – electronic or digital mail sent via the Internet.

**Facebook** – a popular social networking website that allows registered users to create profiles, to upload photos and videos, and to send and to receive messages from other users.

**Friending** - the act of connecting one account to another’s account in an online social or professional network (especially on Facebook).

**Following** – the act of connecting to an account or topic within a social media platform, such as Twitter, Instagram, and sometimes Facebook.

**Informed Consent** - a process in which a psychologist educates a client about the risks, benefits, and alternatives of a given procedure or intervention, and seeks their explicit agreement before proceeding. Within the context of service delivery via technology, the risks and benefits of using the technology, and alternatives for service delivery would be important in obtaining informed consent.

**Instagram** – an online photo-sharing application and social network platform.

**Internet Presence** – the existence of personal, professional, or organizational information that is web-based and searchable.

LinkedIn – a professional and business oriented social networking site.

**Listserv** – a form of email communication used by registered subscribers to send messages through a designated server to other registered subscribers.

**Livestream** – live video broadcasting or streaming via the Internet using videoconferencing software.

**Online Consultation** - asking for or providing an opinion on one or more specific topics to someone via the internet.

**Online Therapy** – any type of therapeutic intervention delivered via the Internet.

**Personal Use of Social Media** - Use of social media by an individual for the purpose of connection with other individuals such as family, friends, work colleagues, or people with mutual interests.

**Privacy** - clients have a right to control access to their personal information, and to be free from intrusion or interference. Within a social media context this means that psychologists recognize that it is important to respect that right and, to consider carefully the appropriateness of searching social media for information about clients.

**Professional Use of Social Media** – the use of social media in a professional role.

**Snapchat** - a social media site that allows subscribers to send to other subscribers, messages, videos, and pictures that later disappear (if they are not saved).

**Social Media** - social media is an umbrella term that includes the various activities that integrate technology and social interaction such as texting, email, instant messaging, websites, microblogging (e.g., Twitter), and all forms of social networking.

**Social Media Presence** - existence of a personal, professional, and/ or organizational account on any social media platform(s).

**Social Networking** – communication with others with common interests via web-based or electronic social media.

**Technological Competence** – an understanding of social networking and social media, and the technology that supports these. Competence also applies to communicating via technology including using appropriate language and etiquette.

**Testimonials** - written or verbal statements attesting to the qualifications or value of someone or a service.

**Text Messaging** - the exchange of brief written messages between electronic devices.

**TikTok** – a social media platform for creating, sharing and discovering short music videos.

**Twitter** - a social networking microblogging service that allows registered members to post brief text messages called “tweets”.

**Video Conferencing** - meeting or conferencing among people in multiple locations using video and audio telecommunications.

**Web Conferencing** – see videoconferencing.

**Website** – a collection of related networks of web resources, such as webpage multimedia content, which are typically identified with a common domain name and published on at least one webserver (e.g., Wikipedia).

**WhatsApp** - a messaging service that lets subscribers cite, text, chat, and share media, including voice messages and videos.

**YouTube** - a popular video sharing website where registered users can upload and share videos with anyone able to access the site.

## **APPENDIX B – Codes Relevant to Social Media Use**

### **Confidentiality**

- ASPPB Code – F.2, F.6, F.7, F.11
- APA Code - 4.01 – 4.07
- CPA Code - 1.03 – 1.05

### **Informed Consent**

- ASPPB Code – F.2, F.3, F.6
- APA Code - 3.10
- CPA Code - 1.16 – 1.21, 1.27, 1.30 – 1.40 and III.13 – III.15

### **Risk Management**

- ASPPB Code – Sections A, B, C, D, E and F
- APA Code - Principle A, 3.06, 4.01 and 5.01
- CPA Code -II.37 and II.44 – II.45

### **Multiple Relationships**

- ASPPB Code – B.1, B.2
- APA Code – 3.05
- CPA Code – 1.26, II.28 – II.31 and III.28 – III.31

### **Competence**

- ASPPB Code – Section A (especially A.4)
- APA Code – 2.01, 2.04, and 5.04
- CPA Code – II.1 – II.14, II.16, II.18, II.21 – II.23, II.56, III.35, IV.15, IV.18 and IV. 24 – IV.28

### **Professional Conduct**

- ASPPB Code – Sections A, C, D, E and F
- APA Code – 2.01, 2.04, and 5.04
- CPA Code – III.1 – III.8, IV.4, IV.8 and IV.10 – IV.11

### **Security of Information**

- ASPPB Code – Section F
- APA Code – 4.01, 2.05 and 6.02
- CPA Code – II.6, II.21, II.56 and III.37

## APPENDIX C – Example of Informed Consent Disclaimer

Confidentiality Notice: this message is intended only for the use of the individual or entity to which it is addressed and may contain information whose confidentiality is protected by Federal Law. Federal Regulations (42 CFR, Part 2) prohibit you from making any further disclosure of it without the expressed written consent of the person to whom it pertains, or of the guardian or custodial parent of the minor to whom it pertains. This prohibition applies to any reference to

this email, either verbal or written, or to any excerpting, photocopying, or direct quotes from this email. If you are not the intended recipient, please delete this email immediately.

In requesting a response from me via email, you are hereby giving your consent for a response by email, understanding that email may not be encrypted and even if encrypted, email poses security risks that threaten confidentiality (i.e., other people reading your messages, hacking and email pirating, lost or stolen devices). If you would prefer a response in another format (telephone, voice mail, FAX, or postal service), please indicate your preference in your email message to me or contact me by any of these other methods. (Oregon Board of Psychology, 2018)\*\*

\*\* It is important to stress that informed consent is a process that should be engaged in with the client and is not a form. Use of a form of any type should be seen as only part of the informed consent process and not the process itself.

## APPENDIX D – Sample of Social Media Policy

In order to maintain clarity regarding our use of electronic modes of communication during your treatment, I have prepared the following policy. This is because the use of various types of electronic communications is common in our society, and many individuals believe this is the preferred method of communication with others, whether their relationships are social or professional. Many of these common modes of communication, however, put your privacy at risk and can be inconsistent with the law and with the standards of my profession. Consequently, this policy has been prepared to assure the security and confidentiality of your treatment and to assure that it is consistent with ethics and the law.

If you have any questions about this policy, please feel free to discuss this with me.

### **Email [and Text Message] Communications**

I use email communication [and text messaging] only with your permission and only for administrative purposes unless we have made another agreement. That means that email exchanges [and text messages] with my office should be limited to things like setting and changing appointments, billing matters and other related issues. Please do not email [or text] me about clinical matters because this is not a secure way to contact me. If you need to discuss a clinical matter with me, please feel free to call me so we can discuss it on the phone or wait so we can discuss it during your therapy session. The telephone or face-to-face context simply is much more secure as a mode of communication.

Email [and text messaging] should not be used to communicate with me in an emergency situation. I make every effort to respond to emails, [ texts] and phone calls within 24 hours, except on weekends and holidays. In case of an emergency, please call my phone line at [insert #]. If I am not immediately available by phone, please call 911, contact local crisis services [insert name of organization and phone #] or go to the nearest emergency room.

[For psychologists who do not wish to receive any text messages, delete bracketed text above referring to text messages and insert the following paragraph]

### ***Text Messaging***

Because text messaging is a very unsecure and impersonal mode of communication, I do not text message to nor do I respond to text messages from anyone in treatment with me. So, please do not text message me unless we have made other arrangements.

### ***Social Media***

I do not communicate with, or contact, any of my patients through social media platforms like Twitter and Facebook. In addition, if I discover that I have accidentally established an

online relationship with you, I will cancel that relationship. This is because these types of casual social contacts can create significant privacy risks for you.

I participate on various social networks, but not in my professional capacity. If you have an online presence, there is a possibility that you may encounter me by accident. If that occurs, please discuss it with me during our time together. I believe that any communications with patients online have a high potential to compromise the professional relationship. In addition, please do not try to contact me in this way. I will not respond and will terminate any online contact no matter how accidental.

### **Websites**

I have a website that you are free to access. I use it for professional reasons to provide information to others about me and my practice. You are welcome to access and review the information that I have on my website and, if you have questions about it, we should discuss this during your therapy sessions.

### **Web Searches**

I will not use web searches to gather information about you without your permission. I believe that this violates your privacy rights; however, I understand that you might choose to gather information about me in this way. In this day and age, there is an incredible amount of information available about individuals on the internet, much of which may actually be known to that person and some of which may be inaccurate or unknown. If you encounter any information about me through web searches, or in any other fashion for that matter, please discuss this with me during our time together so that we can deal with it and its potential impact on your treatment.

Recently it has become common for patients to review their health care provider on various websites. However, mental health professionals cannot respond to such comments because of confidentiality restrictions. It is also generally preferable for patients to discuss their concerns directly with their health care provider. If you have concerns or questions about any aspect of our work together or about any previously posted online reviews of my practice, please let me know so that we can discuss them. I recommend that you do not rate my work with you on any website for several reasons. If you rate my work on a website while you are in treatment with me, it has the potential to affect our therapeutic relationship. If you choose to post an online review about me or another health care provider either while you are in treatment or afterwards, please keep in mind that you may be revealing confidential information about your treatment.

Thank you for keeping this policy in mind and for letting me know of any concerns.  
(Oregon Board of Psychology, 2018)



## APPENDIX E – Social Media Vignettes

### Vignette #1

A psychologist in a moment of anger and poor judgement texts his ex-wife, telling her that she is “more bipolar” than anyone on his caseload past and present, and this includes all the inpatients at the state hospital where he did his internship. She makes a complaint to the regulatory body, and provides the text as evidence in the complaint.

*Analysis:* Texting creates a record of one’s statements and in sending a text even if it is intended to be private/personal, one needs to be prepared that it may become public. Diagnosing his ex-wife is inappropriate as she is not his client, nor should she be his client, given their past marital relationship. It is also an ethical issue since, presumably, he has not formally assessed his wife, and direct assessment is required in establishing a diagnosis. Psychologists need to remember that all communication potentially could become public and therefore open to scrutiny.

### Vignette #2

The brother-in-law of a psychologist tags him on a Facebook post. The pictures were taken at the psychologist’s bachelor party and consisted of photos of the psychologist posing suggestively in various states of intoxication.

*Analysis:* Psychologists need to be cognizant of the fact that, ultimately, they may be held responsible for any representation that reflects badly upon the profession, even one that they did not post themselves or did not intend to be public. While likely this particular situation would not constitute an ethical infraction, it could potentially harm the psychologist’s reputation among colleagues and clients who may see such posts.

### Vignette #3

A psychologist complains on a professional listserv about an insurance company’s reimbursement rates, that she feels are low, and about the company’s response time.

*Analysis:* Public criticism of another agency or provider while not necessarily unethical is unprofessional and may reflect badly on the profession. Further, if clients somehow get access to the post, they this may negatively impact the therapeutic relationship. It is important to give consideration to whether posting to a listserv is the most appropriate way to address one’s concerns.

#### **Vignette #4**

On a public Linked In group, a psychologist asks for help in the treatment of a client with a borderline personality disorder diagnosis, and states in the post “I just had my session with her.” He provides de-identified information about the session. The client immediately responds to the post, self-identifying that she is that client and thanking the psychologist for taking care of her.

*Analysis:* We have no way of knowing whether our own clients or clients of other psychologists are in our Linked In groups. The Linked In group was public, and the psychologist should have known this. Additionally, the psychologist used identifying information (“i.e., “and I just had my session with her.”), which may violate confidentiality. In this case, a competence issue created the venue for several ethical violations to occur.

#### **Vignette #5**

A psychologist working in a small remote community complains on her private Facebook page that she is sick and tired of working with victims of domestic violence as in her opinion they just “whine” and then return to their relationships to experience the violence all over again. One of the psychologist’s “friends” shared the post with a friend who happens to work for a local shelter and was previously the psychologist’s client. A complaint was lodged with the regulatory body.

*Analysis:* The psychologist should not have assumed that her comments would be kept private. This reflects badly on the profession, is unprofessional and inappropriate, and is potentially harmful to the ex-client.

#### **Vignette #6**

A Psychologist gave her distressed client her personal cell phone number and told the client that he could contact her after hours or between appointments in an emergency if he needs to. The client texts the psychologist on a Friday evening at 11 p.m. indicating that he really needs to talk. The psychologist does not respond as she has had a hard week and feels that she has a right to some down time. The client texts back to her that she feels abandoned by the psychologist.

*Analysis:* The psychologist has set up the unreasonable expectation that she will be available all of the time - issue of boundaries. An unintended consequence of social media is that it supports the blurring of boundaries between personal and professional lives. The psychologist also is using her private phone for client contact which could potentially become a breach of the client’s confidentiality and privacy.

### **Vignette #7**

A psychologist is running late to arrive at his office for a session, so he texts his next client to let her know that he'll be late for their "meeting". The client's daughter is playing a game on her mother's phone and sees the message.

*Analysis:* Informed Consent issue: Does the Psychologist have informed consent from the client to send messages via texting? Risk Management issue: Has the Psychologist discussed with the client how to keep her confidential messages safe from other's eyes? Security of Information issue: Has the Psychologist ensured that the text message will not be accessed from his phone by unauthorized persons (his family, partner, etc.)?



# PSYPACT COMMISSION

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## NEWSLETTER

**October 2020**

*Volume 1, Issue 1*

**Reducing regulatory  
barriers.  
Increasing access to  
mental healthcare.**

### *October 2020 Update*

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On July 1, 2020 applications to practice under PSYPACT officially opened. Psychologists can apply to practice telepsychology by obtaining an ASPPB E. Passport and an Authority to Practice Interjurisdictional Telepsychology (APIT) and/or they can apply to practice temporarily by obtaining an ASPPB IPC and a Temporary Authorization to Practice (TAP). Additional information about the application process and how to start an application can be found on the PSYPACT website at [www.psypact.org](http://www.psypact.org).

### **A Message from the Chair, Don Meck**



Welcome, PSYPACT's primary purpose is increasing access to psychological care among the member states. This newsletter has been developed for our participating member states as one source of communication to keep them updated about the growth, process and current requirements of PSYPACT. Thank you for participating in PSYPACT and please share the newsletter with your licensing board.

Donald S. Meck, Ph.D., J.D., ABPP  
*Chair, PSYPACT Commission*

### **PSYPACT Commissioners**

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Don Meck, Chair	Gary Lenkeit
<i>Georgia</i>	<i>Nevada</i>
Bob Bohanske, Vice Chair	Deborah Warner
<i>Arizona</i>	<i>New Hampshire</i>
Kris Chiles, Member at Large	Teanne Rose
<i>Nebraska</i>	<i>Oklahoma</i>
Mariann Burnett-Atwell, Ex-Officio	Christina Stuckey
Member	<i>Pennsylvania</i>
ASPPB	Patrick Hyde
Lorey Bratten	<i>Texas</i>
<i>Colorado</i>	Deborah Blackburn
Shauna Slaughter	<i>Utah</i>
<i>Delaware</i>	To Be Named
Cecilia Abundis	<i>Virginia (*Effective 1/1/2021)</i>
<i>Illinois</i>	To Be Named
Pam Groose	<i>North Carolina (*Effective 3/1/2021)</i>
<i>Missouri</i>	

### **Upcoming Meetings**

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**Commission Meeting November 19-20, 2020**  
**Executive Board Meeting November 20, 2020**

*Elections will be held at the November 2020 Meeting. If you are interested in running for the Executive Board, be sure to send your materials to Janet Orwig ([jorwig@asppb.org](mailto:jorwig@asppb.org)) by October 16th.*

### **Important Announcement**

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#### **E. PASSPORT FEES TEMPORARILY WAIVED**

The Human Resources and Services Administration (HRSA) of the US Department of Health and Human Services (HHS) has awarded ASPPB federal funding to help provide support for the 2020 Coronavirus Aid, Relief and Economic Security Act (CARES). As part of the 2020 funding, and in hopes of increasing access to mental health care services via telepsychology, ASPPB has announced that the E.Passport application fee (\$400) will be waived through December 31, 2020. Please contact us at [info@psypact.org](mailto:info@psypact.org) with any questions you have.

# PSYPACT by the Numbers

TELEPSYCHOLOGY  
787 659

ASPPB  
E.Passports  
Issued

PSYPACT  
APITs  
Issued

TEMPORARY PRACTICE  
161 55

ASPPB  
IPCs Issued

PSYPACT  
TAPs Issued

## STATE LEVEL BREAKDOWN

State	APITs	TAPs
AZ	41	2
CO	56	4
DE	7	0
GA	84	9
IL	124	10
MO	50	2
NE	8	0
NV	22	3
NH	10	1
OK	8	1
PA	94	4
TX	117	12
UT	38	7

Numbers current as of 09/24/2020

# Executive Director's Report

Janet Orwig

Welcome to the new PSYPACT Commission Quarterly E-newsletter! We hope that you like the design and the ways we will be sharing news with you. Each quarter, we will send the latest issue that will provide the most up-to-date information regarding PSYPACT. This quarter, you will find a list of the current Commissioners, important announcements, and legislative activities. I would also like to highlight the section PSYPACT by the Numbers which contains information regarding certifications and authorizations issued.

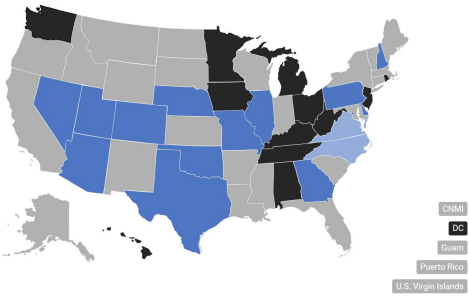
We are here to support you in your role as a PSYPACT Commissioner and hope this newsletter provides assistance. We welcome your feedback and suggestions as we strive to continue to improve this newsletter.

Thank you for all you do for PSYPACT. We appreciate your time and expertise.

Janet P. Orwig, MBA, CAE  
PSYPACT Executive Director

## Legislative Activity

### 2021 Legislative Session Approaches



Currently, 15 states participate in PSYPACT including Arizona, Colorado, Delaware, Georgia, Illinois, Missouri, Nebraska, Nevada, New Hampshire, Oklahoma, Pennsylvania, Texas, Utah, Virginia (Effective January 1, 2021) and North Carolina (Effective March 3, 2021). Currently, District of Columbia, Michigan, Minnesota, New Jersey, Ohio and Rhode Island have active current legislation. As the start of the 2021 legislative session approaches, we anticipate being busy with several states planning to introduce legislation. To date, Kentucky has already prefiled legislation as KY BR 245.



## Did you know?

PSYPACT is available to host webinars and provide presentations for psychologists in your state to learn more about PSYPACT and how it works. If you are interested, contact us at [info@psypact.org](mailto:info@psypact.org). Additional training materials can also be found on the PSYPACT website at [www.psypact.org](http://www.psypact.org).

## Communications Update

Interest in PSYPACT continues to grow! We hear daily from psychologists interested in learning more about the compact and how they can participate and use an email listserv to provide periodic updates about important application updates and information as new states introduce and enact PSYPACT legislation. To date, we have over 2,500 participants in the PSYPACT listserv. To sign up, email us at [info@psypact.org](mailto:info@psypact.org) or visit <https://psypact.org/page/Listserv>.

## Staff Contact Information

Janet Orwig  
PSYPACT Executive Director  
[jorwig@asppb.org](mailto:jorwig@asppb.org)

Lisa Russo  
PSYPACT Manager  
[lrusso@asppb.org](mailto:lrusso@asppb.org)

Jessica Cheaves  
PSYPACT Specialist  
[jcheaves@asppb.org](mailto:jcheaves@asppb.org)

**4th QUARTER PERFORMANCE MEASURES  
FISCAL YEAR 2020**

Submitted to the  
Governor's Office of Budget and Planning  
and the Legislative Budget Board

by

**Board of Examiners of Psychologists**

**October 1, 2020**

  
Executive Director

  
Date

**Efficiency/Output Measures with Cover Page and Update Explanation**  
86th Regular Session, Performance Reporting  
Automated Budget and Evaluation System of Texas (ABEST)

10/1/2020 2:16:51PM

Agency code: 520

Agency name: Board of Examiners of Psychologists

Type/Strategy/Measure	2020 Target	2020 Actual	2020 YTD	Percent of Annual Target	Target Range
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**Output Measures**

1-1-1 LICENSING

1 # NEW LICENSES ISSUED

Quarter 1	600.00	212.00	212.00	35.33 % *	120.00 - 180.00
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Explanation of Variance: FACTORS CAUSING THE VARIANCE

The performance for this measure for the first quarter of FY 2020 exceeds its target. This is typical each year, as the agency receives the majority of its applications for Licensed Specialist in School Psychology during the 4th quarter and many are approved during the 1st quarter of the following fiscal year. Additionally the 86th Legislature lowered this target for the 2020-2021 biennium.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE

The agency cannot predict how many applications it will receive, but will continue to process all qualified applicants in a timely manner. The agency expects to continue to meet or exceed this target during this year, especially since the target was lowered by the 86th Legislature.

\* Varies by 5% or more from target.

**Efficiency/Output Measures with Cover Page and Update Explanation**  
86th Regular Session, Performance Reporting  
Automated Budget and Evaluation System of Texas (ABEST)

10/1/2020 2:16:51PM

Agency code: 520                      Agency name: **Board of Examiners of Psychologists**

Type/Strategy/Measure	2020 Target	2020 Actual	2020 YTD	Percent of Annual Target	Target Range
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**Output Measures**

**1 # NEW LICENSES ISSUED**

<b>Quarter 2</b>	600.00	163.00	375.00	62.50 % *	270.00 - 330.00
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Explanation of Variance: FACTORS CAUSING THE VARIANCE

The performance for this measure for the second quarter of FY 2020 is within the range we expect, however this measure year to date still exceeds its target. due to the number of licenses issued during the first quarter. This is typical each year, as the agency receives the majority of its applications for Licensed Specialist in School Psychology during the 4th quarter and many are approved during the 1st quarter of the following fiscal year. Additionally the 86th Legislature lowered this target for the 2020-2021 biennium.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE

The agency cannot predict how many applications it will receive, but will continue to process all qualified applicants in a timely manner. The agency expects to continue to meet or exceed this target during this year, especially since the target was lowered by the 86th Legislature.

<b>Quarter 3</b>	600.00	134.00	509.00	84.83 % *	420.00 - 480.00
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Explanation of Variance: FACTORS CAUSING THE VARIANCE

The performance for this measure for the third quarter of FY 2020 is within the range we expect, however this measure year to date still exceeds its target. due to the number of licenses issued during the first quarter. This is typical each year, as the agency receives the majority of its applications for Licensed Specialist in School Psychology during the 4th quarter and many are approved during the 1st quarter of the following fiscal year. Additionally the 86th Legislature lowered this target for the 2020-2021 biennium.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE

The agency cannot predict how many applications it will receive, but will continue to process all qualified applicants in a timely manner. The agency expects to continue to meet or exceed this target during this year, especially since the target was lowered by the 86th Legislature.

\* Varies by 5% or more from target.



**Efficiency/Output Measures with Cover Page and Update Explanation**  
86th Regular Session, Performance Reporting  
Automated Budget and Evaluation System of Texas (ABEST)

10/1/2020 2:16:51PM

Agency code: 520

Agency name: Board of Examiners of Psychologists

Type/Strategy/Measure	2020 Target	2020 Actual	2020 YTD	Percent of Annual Target	Target Range
<b>Output Measures</b>					
1 # NEW LICENSES ISSUED					
Quarter 4	600.00	205.00	714.00	119.00 % *	570.00 - 630.00
<u>Explanation of Variance:</u> FACTORS CAUSING THE VARIANCE  The performance for this measure for FY 2020 exceeds the target by 19%. The agency cannot predict how many applicants will qualify for licensure, and processes all applications received in a timely manner. Additionally the 86th Legislature lowered this target for the 2020-2021 biennium.  HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE  The agency cannot predict how many applications it will receive, and will process all qualified applicants in a timely manner.					
2 # LICENSE RENEWALS					
Quarter 1	8,800.00	2,274.00	2,274.00	25.84 %	1,760.00 - 2,640.00
Quarter 2	8,800.00	2,303.00	4,577.00	52.01 %	3,960.00 - 4,840.00
Quarter 3	8,800.00	2,313.00	6,890.00	78.30 %	6,160.00 - 7,040.00

\* Varies by 5% or more from target.

**Efficiency/Output Measures with Cover Page and Update Explanation**  
86th Regular Session, Performance Reporting  
Automated Budget and Evaluation System of Texas (ABEST)

10/1/2020 2:16:51PM

Agency code: **520**

Agency name: **Board of Examiners of Psychologists**

Type/Strategy/Measure	2020 Target	2020 Actual	2020 YTD	Percent of Annual Target	Target Range
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**Output Measures**

**2 # LICENSE RENEWALS**

<b>Quarter 4</b>	8,800.00	2,393.00	9,283.00	105.49 % *	8,360.00 - 9,240.00
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Explanation of Variance: FACTORS CAUSING THE VARIANCE:

The performance for this measure for FY 2020 is 5% over the target. As the agency's licensee population increases, the agency will renew more and more licenses each year.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

The agency processes all renewal applications in a timely manner. The 86th Legislature increased this target from 8,400 to 8,800 for the 2020-2021.

**2-1-1 ENFORCEMENT**

**1 COMPLAINTS RESOLVED**

<b>Quarter 1</b>	130.00	36.00	36.00	27.69 %	26.00 - 39.00
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\* Varies by 5% or more from target.

**Efficiency/Output Measures with Cover Page and Update Explanation**  
86th Regular Session, Performance Reporting  
Automated Budget and Evaluation System of Texas (ABEST)

10/1/2020 2:16:51PM

Agency code: 520

Agency name: Board of Examiners of Psychologists

Type/Strategy/Measure	2020 Target	2020 Actual	2020 YTD	Percent of Annual Target	Target Range
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**Output Measures**

**1 COMPLAINTS RESOLVED**

<b>Quarter 2</b>	130.00	38.00	74.00	56.92 % *	58.50 - 71.50
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Explanation of Variance: FACTORS CAUSING THE VARIANCE:

The performance for this measure for the second quarter of FY 2020 exceeds its target by 7%. The agency enforcement staff been diligently working through its backlog of 2018 complaints. Additionally, the agency has recently hired a new staff attorney to assist with the investigation and resolution of complaints.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

The agency enforcement staff have begun investigating the more substantial complaints created during FY 2018. These substantial complaints typically take longer to investigate and resolve, however, with the addition of the new staff attorney the agency expects to continue to meet or exceed this measure for the remainder of the fiscal year.

<b>Quarter 3</b>	130.00	56.00	130.00	100.00 % *	91.00 - 104.00
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Explanation of Variance: FACTORS CAUSING THE VARIANCE:

The performance for this measure for the second quarter of FY 2020 exceeds its target. The agency enforcement staff been diligently working through its backlog of 2018 complaints. Additionally, during this quarter the agency had an additional licensing staff working on complaints during telecommuting days. Also, the agency has recently hired a new staff attorney to assist with the investigation and resolution of complaints.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

The agency enforcement staff have begun investigating the more substantial complaints created during FY 2018. These substantial complaints typically take longer to investigate and resolve, however, with the addition of the new staff attorney the agency expects to continue to meet or exceed this measure for the remainder of the fiscal year.

\* Varies by 5% or more from target.

**Efficiency/Output Measures with Cover Page and Update Explanation**  
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10/1/2020 2:16:51PM

Agency code: 520

Agency name: Board of Examiners of Psychologists

Type/Strategy/Measure	2020 Target	2020 Actual	2020 YTD	Percent of Annual Target	Target Range
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**Output Measures**

1 COMPLAINTS RESOLVED

Quarter 4	130.00	45.00	175.00	134.62 % *	123.50 - 136.50
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Explanation of Variance: FACTORS CAUSING THE VARIANCE:

The performance for this measure for FY 2020 exceeds its target. The agency enforcement staff has been diligently working through its backlog of 2018 complaints. Also, the agency has recently hired a new staff attorney to assist with the investigation and resolution of complaints.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

The agency enforcement staff have begun investigating the more substantial complaints created during FY 2018. These substantial complaints typically take longer to investigate and resolve, however, with the addition of the new staff attorney the agency has exceeded this measure.

**Efficiency Measures**

2-1-1 ENFORCEMENT

1 AVG TIME/COMPLAINT RESOLUTION

\* Varies by 5% or more from target.

**Efficiency/Output Measures with Cover Page and Update Explanation**  
86th Regular Session, Performance Reporting  
Automated Budget and Evaluation System of Texas (ABEST)

10/1/2020 2:16:51PM

Agency code: 520

Agency name: Board of Examiners of Psychologists

Type/Strategy/Measure	2020 Target	2020 Actual	2020 YTD	Percent of Annual Target	Target Range
<b>Efficiency Measures</b>					
1 AVG TIME/COMPLAINT RESOLUTION					
Quarter 1	275.00	389.00	389.00	141.45 % *	261.25 - 288.75

Explanation of Variance: FACTORS CAUSING THE VARIANCE:

The performance for this measure for the first quarter of FY 2020 exceeds the target. During this quarter the agency resolved 16 complaints from FY 2018, of which 13 were over 500 days old. The agency no longer opens high volume, non-substantive complaints (e.g., CE complaints), so the entirety of the agency's complaint caseload consists of substantive complaints which typically take much longer to investigate. Additionally, the agency has been unable to hire a new staff attorney to assist with the investigation and resolution of complaints. The agency had anticipated hiring a new staff attorney who could help the agency meet this target, but the agency is struggling with recruiting an attorney in a highly competitive job market for employers.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

The agency enforcement staff have begun investigating the more substantial complaints created during FY 2018. These substantial complaints typically take longer to investigate and resolve, thus the reason for the average of 389 days to resolve a complaint during this quarter. The agency anticipates that it will continue to exceed this measure until it can hire a new staff attorney. The agency has reduced the minimum qualifications for its staff attorney position and expanded the locations where the job opening is posted, in hopes this will assist with recruiting a qualified staff attorney who can then help the agency meet this target.

\* Varies by 5% or more from target.

Efficiency/Output Measures with Cover Page and Update Explanation  
86th Regular Session, Performance Reporting  
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10/1/2020 2:16:51PM

Agency code: 520

Agency name: Board of Examiners of Psychologists

Type/Strategy/Measure	2020 Target	2020 Actual	2020 YTD	Percent of Annual Target	Target Range
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**Efficiency Measures**

**1 AVG TIME/COMPLAINT RESOLUTION**

<b>Quarter 2</b>	275.00	356.00	372.00	135.27 % *	261.25 - 288.75
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Explanation of Variance: FACTORS CAUSING THE VARIANCE:

The performance for this measure for the second quarter of FY 2020 exceeds the target. During this quarter the agency resolved 13 complaints from FY 2018, all of which were over 500 days old. The agency no longer opens high volume, non-substantive complaints (e.g., CE complaints), so the entirety of the agency's complaint caseload consists of substantive complaints which typically take much longer to investigate. The agency has recently hired a new staff attorney to assist with the investigation and resolution of complaints. However, there is a training curve to learn the laws, rules and processes of the enforcement division.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

The agency enforcement staff have begun investigating the more substantial complaints created during FY 2018. These substantial complaints typically take longer to investigate and resolve, thus the reason for the average of 356 days to resolve a complaint during this quarter. However, this is less than the average complaint resolution time of 389 days that it took during the first quarter. The agency anticipates that it will continue to exceed this measure until its new staff attorney is fully trained.

\* Varies by 5% or more from target.

**Efficiency/Output Measures with Cover Page and Update Explanation**  
86th Regular Session, Performance Reporting  
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10/1/2020 2:16:51PM

Agency code: 520

Agency name: Board of Examiners of Psychologists

Type/Strategy/Measure	2020 Target	2020 Actual	2020 YTD	Percent of Annual Target	Target Range
<b>Efficiency Measures</b>					
1 AVG TIME/COMPLAINT RESOLUTION					
Quarter 3	275.00	331.00	354.00	128.73 % *	261.25 - 288.75

Explanation of Variance: FACTORS CAUSING THE VARIANCE:

The performance for this measure for the third quarter of FY 2020 exceeds the target. During this quarter the agency resolved 14 complaints from FY 2018, 12 of which were over 500 days old. The agency no longer opens high volume, non-substantive complaints (e.g., CE complaints), so the entirety of the agency's complaint caseload consists of substantive complaints which typically take much longer to investigate. The agency has recently hired a new staff attorney to assist with the investigation and resolution of complaints. However, there is a training curve to learn the laws, rules and processes of the enforcement division.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

The agency enforcement staff have begun investigating the more substantial complaints created during FY 2018. These substantial complaints typically take longer to investigate and resolve, thus the reason for the average of 331 days to resolve a complaint during this quarter. However, this is less than the average complaint resolution time of 389 days and 356 days that it took during the first and second quarters, respectively. The agency anticipates that it will continue to exceed this measure during this fiscal year.

\* Varies by 5% or more from target.

**Efficiency/Output Measures with Cover Page and Update Explanation**  
86th Regular Session, Performance Reporting  
Automated Budget and Evaluation System of Texas (ABEST)

10/1/2020 2:16:51PM

Agency code: **520**                      Agency name: **Board of Examiners of Psychologists**

Type/Strategy/Measure	2020 Target	2020 Actual	2020 YTD	Percent of Annual Target	Target Range
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**Efficiency Measures**

**1 AVG TIME/COMPLAINT RESOLUTION**

<b>Quarter 4</b>	275.00	294.00	338.00	122.91 % *	261.25 - 288.75
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Explanation of Variance: FACTORS CAUSING THE VARIANCE:

The performance for this measure for the fourth quarter exceeds the target by only 19 days, or 7%. However, for FY 2020 the agency exceeds the target. The agency has resolved all its 2018 complaints, and during this quarter the agency resolved 22 complaints from FY 2019, 6 of which were over 500 days old. The agency no longer opens high volume, non-substantive complaints (e.g., CE complaints), so the entirety of the agency's complaint caseload consists of substantive complaints which typically take much longer to investigate.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

The agency enforcement staff began investigating the more substantial complaints created during FY 2018. These substantial complaints typically take longer to investigate and resolve, thus the reason for the average of 339 days to resolve a complaint during this fiscal year. However, during the fourth quarter this dropped from 331 days in the third quarter.

\* Varies by 5% or more from target.



**ANNUAL PERFORMANCE MEASURES**  
**FISCAL YEAR 2020**

Submitted to the  
Governor's Office of Budget and Planning  
and the Legislative Budget Board

by

**Board of Examiners of Psychologists**

**October 1, 2020**

  
Executive Director

  
Date

**Outcomes with Cover Page and Update Explanation**  
86th Regular Session, Performance Reporting  
Automated Budget and Evaluation System of Texas (ABEST)

DATE: 10/1/2020  
TIME: 2:16:07PM  
PAGE: 2 OF 3

Agency code: 520

Agency name: Board of Examiners of Psychologists

Type/Objective/Measure	2020 Target	2020 YTD	Percent of Annual Target	Target Range
<u>1-1 ENSURE STANDARDS MET</u>				
1 % LICENSEES/NO VIOLATIONS	99.00 %	99.26 %	100.26 %	
<u>Prior YTD:</u>				
2 % OF LICENSEES WHO RENEW ONLINE	92.00 %	99.00 %	107.61 % *	
<u>Explanation of Variance:</u> FACTORS CAUSING THE VARIANCE:				
The performance for this measure for FY 2020 is 99%, which exceeds its goal of 92%. This is because beginning in FY20, the agency has mandated all renewals to be done online.				
HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:				
The 86th Legislature increased this target to 92% for the 2020-2021 biennium, but with moving to online only renewals, the agency has exceeded this target for FY 2020.				
<u>Prior YTD:</u>				
<u>2-1 ENSURE COMPLIANCE</u>				

\* Varies by 5% or more from target.

Outcomes with Cover Page and Update Explanation  
86th Regular Session, Performance Reporting  
Automated Budget and Evaluation System of Texas (ABEST)

DATE: 10/1/2020  
TIME: 2:16:07PM  
PAGE: 3 OF 3

Agency code: 520

Agency name: Board of Examiners of Psychologists

Type/Objective/Measure	2020 Target	2020 YTD	Percent of Annual Target	Target Range
------------------------	----------------	-------------	-----------------------------	--------------

3 % COMPLAINTS RESOLVED/6 MONTHS

40.00 %

33.00 %

82.50 % \*

Explanation of Variance: FACTORS CAUSING THE VARIANCE:

The performance for this measure for FY 2019 is 33%, which does not meet its target of 40%. However, during this quarter and performance average was 36%. The agency has resolved all its 2018 complaints and has been working diligently on resolving 2019 complaints. These are all substantive complaints which take longer to resolve.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

The 85th Legislature increased this measure to 50% for the 2018-2019 biennium, which made it difficult for the agency to meet its target during this biennium. Additionally, now that the agency is primarily resolving substantial complaints, these take longer to resolve. Even though the 86th Legislature has now decreased this target from 50% to 40% for the FY 2020-2021 biennium, the agency was still unable to achieve this target in FY 2020, although it has decreased average time for complaint resolution during this quarter.

Prior YTD:

\* Varies by 5% or more from target.

Explanatory Measures with Cover Page and Update Explanation  
86th Regular Session, Performance Reporting  
Automated Budget and Evaluation System of Texas (ABEST)

10/1/2020 2:17:29PM

Agency code: 520

Agency name: Board of Examiners of Psychologists

Type/Strategy/Measure	2020 Target	2020 YTD	Percent of Annual Target
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Explanatory/Input Measures

2-1-1 ENFORCEMENT

1 # JURISDICTIONAL COMPLAINTS

120.00	138.00	115.00 % *
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Explanation of Variance: FACTORS CAUSING THE VARIANCE:

The performance for this measure for FY 2020 is 138, which exceeds its target of 120 by 15%. The agency cannot control how many complaints will be received during the year from the public.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

The 86th Legislature decreased this target during the 2020-2021 biennium from 260 to 120. The agency has able to exceed this target in FY 2020.

\* Varies by 5% or more from target.

<b>Psychologist Bd. Member</b>	<b>Beginning of Term</b>	<b>Term Expiring</b>	<b>Public Bd. Member</b>	<b>Beginning of Term</b>	<b>Term Expiring</b>
Susan Fletcher, Ph.D.	9/1/2019	2/1/2021	John Bielowicz	9/1/2019	2/1/2022

*§463.30.Examinations Required for Licensure.*

(a) Jurisprudence Examination. All applicants for licensure are required to pass the Jurisprudence Examination prior to the Council granting a license.

(b) School Psychology Examination. Applicants for licensure as a specialist in school psychology must take the School Psychology Examination administered by the Educational Testing Service before applying for licensure as a specialist in school psychology.

(c) Examination for Professional Practice in Psychology (EPPP). All applicants for licensure as a psychological associate or psychologist are required to pass the EPPP, Part I and Part II, prior to the Council granting a license. An applicant who has taken the EPPP, Part I or Part II, either in the past or in another jurisdiction will not be required to retake that part of the exam provided the applicant's score satisfies the Council's current minimum acceptable score for licensure.

*§463.31.Minimum Passing Scores for Examinations.*

(a) Cutoff Scores for the Examination for Professional Practice in Psychology. The minimum acceptable score for the Examination for Professional Practice in Psychology, Part I, is 500 for computer based examinations and seventy percent (70%) for paper based versions of the test. The minimum acceptable score for the Examination for Professional Practice in Psychology, Part II, is 500.

(b) Cutoff Scores for the School Psychology Examination. The minimum acceptable score for the School Psychology Examination is the same as the current cut-off score for the Nationally Certified School Psychologist credential.

(c) Cutoff Scores for the Jurisprudence Examination. The minimum acceptable score for the Jurisprudence Examination for all applicants is ninety percent (90%).

**Thomas Graf, Ph.D.**  
Clinical Psychologist

At Developmental Medicine  
Driscoll Children's Hospital

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October 27, 2020

Texas State Board of Examiners of Psychologists  
333 Guadalupe St., Ste. 3-900  
Austin, Texas 78701

RE: TSBEP EPPP Part 2 Rule Changes

Dear Madams, Dear Sirs  
of the Texas State Board of Examiners of Psychologists

My name is Thomas Graf and I am a doctoral level psychologist at Driscoll Children's Hospital in Corpus Christi. I have been a Licensed Psychologist in Texas for the last 20 years. I provide psychological services and I train master's level psychologists as a practicum supervisor. I am a stakeholder in the legislation that is being considered, adding the part 2 EPPP to the licensure requirements for master's and doctoral level psychologist in Texas. I welcome changes in licensure that increase access to psychology services in our state and increase quality of psychology services in our state. I do not support making part 2 of the EPPP a licensure requirement, at this time. From my review of the available information at least 2 essential questions are yet unanswered and need to be answered before including this exam would make sense: Is there proof of a problem that needs fixing? If so, does the proposed solution fix the problem?

Is there a problem with the clinical competence of licensed psychologists in Texas? Adding the part 2 EPPP and another hurdle to licensure would make sense if an unusual or unacceptable number of licensed psychologists were deficient in clinical skills. Is that a recent problem? Has it increased over time? We used to have oral exams for the doctoral level psychologists until 2017. For psychologists licensed since then, is there a higher rate of board complaints compared to those licensed with an oral exam? Have there been high numbers of complaints against master's level psychologists practicing independently? How does our rate of complaints or ethic violations against psychologists compare to other states for each level of psychologist licensure? Answers to those question could substantiate that

there is a problem. However, no such information is available or used to justify why would need another hurdle to licensure that would lower access to services. With the recent changes of the psychology board for psychologists in Texas and the inclusion under other mental health profession boards, I assumed the new board would not exclude professionals from practice just based on recommendations by the Association of State and Provincial Psychology Boards (ASPPB). So, unless there is proof of a problem my conclusion is: "Don't fix it unless you know it is broken." But let us assume there is proof of a problem and the proof is just not known to us. What is the best way to fix the problem of psychologist practicing with lacking clinical skills and causing harm to their patients in Texas? We do not know if other solutions would be better than adding part 2 of the EPPP. But let us just look at this solution.

What proof is there that adding the part 2 of the EPPP screens out psychologists that lack the clinical knowledge to practice safely? Competence and training standards have so far been handled by training programs and universities in conjunction with standards from the ASPPB . Of course there may be individual psychologists who lack the minimal entry skills. However, from my review of the literature there is no published data showing that part 2 of the EPPP can identify psychologists who lack the minimal clinical skills. The test may well measure clinical knowledge but it is supposedly designed to identify those who lack minimal knowledge and associated with ethical or legal complaints. It is possible to conduct research that can answer that question. However, I did not come across any research that shows the part 2 of the EPPP can do that. Once there is proof, the excluding of providers may be justified. However, until then it will be another hurdle that limits access to psychologists who otherwise would have had as few or as many complaints against their license as those who were not required to pass the part 2 EPPP.

In conclusion, I urge you as members of the Texas State Board of Examiners of Psychologists to vote against making part 2 of the EPPP a licensure requirement. It is premature and please consider: Don't fix it if you don't know for sure it is broke. And if it is broke, use a fix that you know will help fix the problem not one that you only think will help.

Thank you for considering my opinion.

Thomas Graf, PhD



**Melanie Roth Lemanski, Ph.D., LSSP**

Assistant Professor of School Psychology  
University of Houston Victoria at Katy  
22400 Grand Circle Blvd.  
Katy, Texas 77449  
[lemanskim@uhv.edu](mailto:lemanskim@uhv.edu)

10/28/2020

To Whom It May Concern Regarding the TSBEP EPPP Part 2 Rule Change:

My name is Dr. Melanie Lemanski. I hold a Ph.D. in Developmental Psychology from Penn State University and I was recertified as a Specialist in School Psychologist at the University of Houston at Clear Lake. I have been in practice as a Licensed Specialist in School Psychologist for almost 15 years and I have recently moved into academia and I am now training future school psychologists at the specialist level at the University of Houston Victoria at Katy. I am writing today from both a personal and profession perspective.

My personal experience with trying to complete the licensure process for the Licensed Psychologist in Texas has been that the EPPP Part 1 has essentially become the single point of data on which licensure decisions are being made by the Board. Despite 14 years of graduate training, nearly 15 years of professional practice within a school setting, because my highest score on the EPPP Part 1 was a 495 after multiple attempts and endless hours and financial resources devoted to studying for and taking the EPPP Part 1, the minute I set foot outside of a school setting, I am unable to utilize my skills and knowledge to serve the public of Texas. My concern is that the Board is not using a comprehensive set of data to assess candidates and is instead using a single point of data, the EPPP Part 1, because it is easy and cost effective for the Board. When I train my students on assessment and evaluation, one of the things that I emphasize is that evaluation decisions should not be made on single points of data. While the EPPP Part 2 may bring a second point of data, it is my firm belief that it is problematic source of additional data. Instead, I think that the body of an applicant's knowledge, skills, and training should be considered in decision making. One, and now potentially two, criterion scores alone should not be used to make the decision on licensure. We are psychologists trained in assessment, and yet we are not using the principles of assessment to make decisions about who we allow into our field. I know that I have the skills and the competency to effectively deliver psychological services outside of a school setting, but there is no alternative way for me, or others in a similar situation, to prove that competency to the Board. Because the Board only looks at my EPPP Part 1 scores in making their decision, my livelihood and earning potential for my family has been diminished. It really bothers me from a personal level that the Board

**Melanie Roth Lemanski, Ph.D., LSSP**

Assistant Professor of School Psychology  
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continues to focus on the EPPP Part 1, and now potentially the EPPP Part 2, as the sole measures of competency as a Licensed Psychologist in Texas.

My professional experience tells me that the Board's reliance on the EPPP Part 1, and now potentially the EPPP Part 2, as a sole markers for competency as a Licensed Psychologist, means we are doing a huge disservice to the students currently in training programs like mine and others. My program, and many other training programs, are trying desperately to fill the gaps in the field by adding culturally, ethnically, socio-economically, and linguistically diverse candidates to the field. My concerns lay in the EPPP Parts 1 and 2 being barriers to adding diverse candidates to practice as Licensed Psychologists in a time when we continue to experience dire needs for psychologist in general and specifically diverse psychologists. My concerns lay in adding yet another barrier that will keep potential future Licensed Psychologists of different cultures, ethnicities, and/or of linguistic backgrounds from entering practice. My concerns lay in adding yet another barrier that will keep potential future Licensed Psychologist from lower socio-economic statuses from entering practice due to these tests and the preparation for these tests being so cost prohibitive. My concerns lay in adding yet another barrier for poor test takers from becoming future Licensed Psychologists. I hear repeatedly from my students that the addition of these barriers to entrance into the field discourage many from even trying to becoming an Licensed Psychologist. These are students in the populations we are supposed to be actively recruiting into the field and instead we are keeping them from even trying to become Licensed Psychologists.

Thus, I do not support adding the EPPP Part 2 to the licensure process and I believe that the EPPP Part 1 as a single point of decision making needs to be reviewed by the Board. I thank you for your time in the Town Hall meeting today and in this letter to voice my concerns and to share my comments.

Sincerely,

A handwritten signature in cursive script that reads "Melanie Roth Lemanski, Ph.D., LSSP".

Dr. Melanie Lemanski, Ph.D., LSSP

**From:** [Dr. Paula T. Harris](#)  
**To:** [rules](#)  
**Subject:** TSBEPP EPPP Part 2 Rule Change  
**Date:** Thursday, October 29, 2020 4:38:46 PM

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I am Dr. Paula Harris, an LSSP and aspiring LP. I oppose adding passage of the EPPP 2 as a requirement for receiving the LP credential for several reasons, including but not limited to the following:

1. Adding the EPPP 2 reinforces existing barriers to obtaining the LP credential: For example, not passing the EPPP is currently the sole reason too many, well trained, individuals are barred from practicing as psychologists at the doctoral level. Also, the exam costs (e.g., initial test, test prep materials, repeat testing, if applicable), cultural bias, testing anxiety, etc. are inherent, unaddressed problems with the EPPP; therefore, it is reasonable to expect similar barriers with EPPP 2. Finally, adding another hurdle i.e., the EPPP 2, for those seeking licensure as psychologists is counterintuitive as a measure for protecting the public given the significant shortage of psychologists, in general and those who are non-white, in particular. I am sure we agree that gatekeeping should not be prioritized over efforts to provide access to quality mental health services to those who need it.

2. Psychology training programs, specifically pre- and post- doctoral internship experiences in addition to continuing education requirements are practical and substantive ways to evaluate the preparedness and competence of those individuals

seeking to serve the public as psychologists. In contrast, tests such as the EPPP and likely, the EPPP2 assess the examinee's test taking skills but not necessarily the person's fitness to practice. Thus, research data on the EPPP 2

is needed to determine the validity of the test before serious consideration is given to adopting it as a requirement for licensure.

Thank you for allowing me to be heard on this issue.

--



**Paula Harris, Ph.D., LSSP**  
Licensed Specialist In School Psychology

Special Education Department  
Special Education/Annex Building  
15010 Aldine Westfield Rd. | Houston, TX 77073  
281.985.7555 Room #108  
[AldineISD.org](http://AldineISD.org)





**From:** [Jamie Garcia](#)  
**To:** [rules](#)  
**Subject:** TSBEP EPPP Part 2 Rule Changes  
**Date:** Sunday, November 8, 2020 5:55:31 PM

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Jamie Garcia, M.S., LPA  
312 Atalaya  
Cibolo, TX 78018

November 8th, 2020

Attn: Texas Behavioral Health Executive Council

RE: TSBEP EPPP Part 2 Rule Changes

I am writing this letter to the Texas Behavioral Health Executive Council in response to the request for public comments regarding potential amendments to existing rules 463.30 and 463.31, which would require all applicants for licensure as a psychological associate or psychologist to take and pass the EPPP Part I and Part II prior to the council granting a license. As a member of the public, a licensed psychological associate (LPA) in Texas, and doctoral candidate completing a PsyD in Counseling Psychology, I am ADAMANTLY OPPOSED to the proposed changes to rules 463.30 and 463.31 for the following reasons:

- 1) While the EPPP2 was reportedly developed to provide jurisdictions an assessment tool to measure an applicant's competency skills, APA accredited doctoral programs and internship sites already have numerous measures in place to evaluate a doctoral student/intern's skills and competency in multiple areas throughout the extensive training process.
- 2) The ultimate goal of APA accreditation is to graduate psychologists who are uniquely qualified to protect the wellbeing of the public by providing quality psychological service, per the American Psychological Association. Therefore, applicants who have completed an APA accredited doctoral program and internship successfully have completed requirements necessary to be deemed uniquely qualified to protect the wellbeing of the public in the provision of quality psychological services.
- 3) The additional cost associated with the EPPP II will create an unnecessary financial burden for applicants, which will then be passed along to thousands of individuals and families in Texas who are seeking and/or actively engaged in quality psychological services.
- 4). The additional time required for administration of both the EPPP I and EPPP II prior to the the council granting licensure will result in a significant delay of uniquely qualified licensed psychological associates and psychologists available to protect the wellbeing of the public by providing quality psychological services.
- 5). Ultimately, many highly qualified potential applicants may choose to provide psychological services in other states due to the addition of unnecessary cost and time associated with the EPPP II, which may have significant negative implications for the psychological, physical, social and economic well-being of the Texas public.

Thank you for the time and consideration regarding his matter.

Very respectfully,  
Jamie Garcia, M.S., LPA, Doctoral Candidate  
Counseling Psychology, OLLU  
[garco23@hotmail.com](mailto:garco23@hotmail.com)  
(501)628-4519

**From:** [Jennifer Cherry](#)  
**To:** [rules](#)  
**Subject:** TSBEP EPPP Part 2 Rule Changes  
**Date:** Wednesday, October 28, 2020 8:25:03 PM

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Hello,

I'd like to encourage that the EPPP part 2 is NOT adopted.

Best,

Jennifer Cherry MC LPCC  
Doctoral Student  
Fielding Graduate University

*GLBTQ Safe Space*  
*preferred pronouns: She/Her/Hers*

**From:** [JT Lacy](#)  
**To:** [rules](#)  
**Subject:** TSBEP EPPP Part 2 Rule Changes  
**Date:** Thursday, October 29, 2020 2:07:03 PM

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Board/Council Members:

I strongly advocate against adopting the EPPP Part 2. There are already considerable barriers to becoming a Licensed Psychologist in Texas and it simply does not make practical sense to implement, yet, another barrier when Texas is already experiencing such a critical shortage of mental health professionals. Many cite a duty to “protect the public” as rationale for adopting the EPPP Part 2. It is certainly important to protect the public from those that would do harm, though the current requirements for licensure as a psychologist are sufficient to reasonably do so. Additionally, implementation of the EPPP Part 2 requirement would ultimately cause indirect harm to the public by further reducing access to mental health care for many Texans. It is key to find a balance between protecting the public from practitioners that would do harm and ensuring that Texans have more access to mental health care. I urge you to maintain current requirements for licensure, without a requirement for the EPPP Part 2, and thereby, help ensure that more Texans have access to the mental health care that they so desperately need. Thank you for considering my thoughts on the matter and for your service.

Sincerely,

Dr. J.T. Lacy, LP, LSSP, NCSP



**From:** [PETE MARTINEZ](#)  
**To:** [rules](#)  
**Subject:** TSBEP EPPP Part 2 Rule Changes  
**Date:** Saturday, November 7, 2020 9:16:56 PM

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Dear Members,

As one who previously worked as a Licensed Psychological Associate, I find no need for EPPP Part 2. There are myriad and ample opportunities for competence to be gained through participation in the graduate level degree program. Furthermore, a major purpose of the supervision period is to provide opportunities for competence to be gained through skills development with ongoing feedback from the supervising psychologist. As these real life opportunities have long been built into the process, there is no need for an additional examination to assess competence.

Respectfully submitted,  
Sally Martinez

Sent from my iPhone

**From:** [Julie Riley](#)  
**To:** [rules](#)  
**Subject:** TSBEP EPPP Part 2 Rule Changes  
**Date:** Wednesday, October 28, 2020 12:19:09 PM

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To Whom it may concern,  
I'm writing to voice my concern re: the potential adoption for EPPP Part 2 for psychology licensee seekers.

As a future psychologist, I am concerned that by adopting the EPPP2, the board will be adding an unnecessary hurdle toward licensure that significantly increases the burden of responsibility (financial and otherwise) for early career professionals rather than on the systems responsible for educating/training/evaluating trainees throughout the process.

Psychology students' training is extensive and offers multiple opportunities for evaluation on academic and professional competency both within our academic institutions and across multiple clinical/professional settings. Through multiple practicum experiences which typically consists of a minimum of 3 placements, a full year doctoral internship, and post-doctoral supervised employment, psychology graduates have experienced substantial levels of supervision and experiential training/evaluation.

If there is concern regarding early career psychologists professional competencies, then assessment/intervention needs to be addressed at the many points of training and evaluation of those competencies already in place, rather than increasing the burden on those who have already extended and sacrificed themselves for the sake of the education, the profession, and the opportunity to help others.

The EPPP 2 requires additional financial resources, which are already limited. It also feels like an invalidation of the training and evaluation processes that came before it. What is an undue burden for early career psychologists, simply feels like economic gain on behalf of testing companies and the state.

Please consider not adopting the EPPP 2 and letting the current requirements stand.

Regards,  
Julie Riley  
(hopeful clinical psychologist current doctoral student/ABD)

**From:** [Norman Attilee](#)  
**To:** [rules](#)  
**Cc:** [Norman Attilee](#)  
**Subject:** New rule for the EPPP  
**Date:** Saturday, October 3, 2020 7:19:55 AM

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It is already difficult to get license. so why would you all do this. I would recommend the paper EPP and the jurisprudence exams to get licensed. This is a time where mental health services are needed and you all making it difficult to get licensed. My question to the board, "If you all are getting licensed now, would you all like it".



Virus-free. [www.avast.com](http://www.avast.com)

**From:** [Storch, Eric Alan](#)  
**To:** [rules](#)  
**Subject:** Subject: TSBEP EPPP Part 2 Rule Changes  
**Date:** Sunday, October 4, 2020 8:20:50 AM

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Dear TSBEP/BHEC,

I have significant reservations about Texas adopting the EPPP Part 2 as a requirement for licensure for Psychologists. EPPP-2 has been controversial since announced in 2017. In three years, there are no additional data to suggest it adds value, validity or consumer protection to the current licensure process.

I urge all members of TSBEP/BHEC to read the criticisms of the EPPP-2:

<https://thepsychologytimes.com/2019/12/09/asppb-quietly-advances-the-eppp-2-plan-with-jan-1-launch/>

<https://nationalpsychologist.com/2020/02/asppb-rolls-out-eppp-2-names-early-adopters/106954.html>

Although the EPPP has been the standard national requirement for sometime, we have no data to support the validity or reliability of EPPP-2 in measuring clinical skills. While clinical skills are clearly vital to our practice, these skills are assessed consistently and continually throughout practica, externships, and the year-long full-time internship that is part of the requirements of our doctoral training. An additional written examination is neither necessary nor helpful in legitimately evaluating the clinical skills of a licensee. (Knowing the correct answer on a test is not equivalent to putting that knowledge to practice when in real time with a patient.)

I know of no other equivalent in any other mental health profession or even for physicians that would make such an additional examination necessary to demonstrate competency. (The clinical skill assessment required of physicians is done via in-person simulated patient evaluation, not a written exam.) The process of becoming a licensed psychologist is already extremely onerous and costly—after fees, licensees are paying almost \$700 for the EPPP; this fee would double with EPPP-2. **EPPP-2 will add additional undue cost, time, and burden for a licensee that translates to no proven added value to the public.**

At this time, only three states and three Canadian provinces and Guam are signed up as early adopters of the EPPP-2. It is premature to pass a law requiring the examination without additional information and clearly demonstrated benefits. If the EPPP Part 2 is, at some point demonstrated to add significant value to the quality of care provided by psychologists, I would certainly reconsider the necessity of adding it as a requirement to licensure.

Sincerely,

Eric Storch, Ph.D.  
McIngvale Presidential Endowed Chair & Professor  
Vice Chair & Head of Psychology

Menninger Department of Psychiatry and Behavioral Sciences  
Baylor College of Medicine  
1977 Butler Blvd, Suite 4-400  
Houston, TX 77030  
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<https://www.bcm.edu/ocdprogram>

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**From:** [Emily](#)  
**To:** [rules](#)  
**Subject:** Town hall feedback  
**Date:** Sunday, October 4, 2020 1:21:32 PM

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Unfortunately, I will not be able to attend the town hall meeting regarding the new changes and amendments to the Texas administrative code as it applies to the psychology services. I do not agree that candidate should be required to take the EPPP part two. As it stands now, in order to get licensed, it requires a significant amount of money. It is a great burden upon people. This would further cause candidates to go deeper into debt which in this day and age we cannot afford. Please consider the overall well-being of others.

Please pardon brevity & typos  
Sent from my iPhone

**From:** [Whitney Urane](#)  
**To:** [rules](#)  
**Subject:** TSBEP EPPP Part 2 Rule Changes  
**Date:** Friday, October 2, 2020 3:15:29 PM

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Dear Texas State Board of Examiners of Psychologist,

I have been a Licensed Psychological Associate since 2012. Additionally, I am currently a pre-doctoral intern completing an APA accredited internship and plan to apply to practice as a Licensed Psychologist upon completion of my training. I have the following concerns regarding TSBEP's potential adoption of the EPPP Step 2:

1. TSBEP and the Council must ensure that any changes and additional barriers to licensure are supported by data suggesting necessity for protecting the public. There does not appear to be data existing demonstrating that psychologists are not already held to a high standard of competence. Nationwide, ASPPB reported only 12 licenses were revoked in 2015 and 2016 due to competency concerns. These numbers are exceedingly low and do not suggest that public safety is in question. Another exam is not currently justified by the data.
2. From a financial standpoint, the addition of EPPP Step 2 would result in an undue burden for early career professionals.
3. Psychology has long held itself as the profession with the most expertise surrounding test design and construction. We are uniquely qualified to create and implement assessments. We are trained that tests should not be used prior to establishing validity and reliability. Changing statutes and rules preemptively before we know the test is necessary and valid is not prudent.
4. While competence is important and necessary for the safe practice of psychology, there are several gatekeepers throughout the course of education and training that would be better able to assess trainee competence. Prior to licensure, a trainee will have interactions with professors, practicum supervisors, and (at the doctoral level) internship supervisors. Each of these individuals has an obligation to ensure competence of their trainees. This real-world experience and competence cannot adequately be replicated by a standardized test.

Thank you for your consideration,

Whitney Urane, MS, LPA

**From:** [Lisa Daniel](#)  
**To:** [rules](#); [Lisa Daniel](#)  
**Subject:** TSBEP EPPP Part 2 Rule Changes  
**Date:** Monday, October 5, 2020 11:05:01 AM

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10-5-20

Dear TSBEP,

RE: TSBEP EPPP Part 2 Rule Changes

This letter is written to **oppose** the TSBEP EPPP Part 2 Rule Changes that have been drafted and that will be discussed in the Town Hall Webinar on 10-28-20 concerning possible amendment to existing rules 463.30 and 463.31. This letter is being sent in lieu of participating in the Town Hall Webinar.

This change under consideration would require all applicants for licensure as a psychological associate or psychologist to take and pass the Examination for Professional Practice in Psychology (EPPP) Part I and Part II, prior to the Council granting a license. The EPPP Part I, that is currently used by all jurisdictions, and measures an applicant's foundational knowledge of psychology, is already a very significant monetary expense of \$600 for those who are taking the EPPP exam. This is in addition to all of the training that the individual has done and had to pay for not to mention the application fee and other TSBEP fees. TSBEP was recommended to do away with the past Oral Examination, through the Sunset Review process, due in part because it was unnecessary and decreased the amount of applicants for licensure. There currently is a huge shortage of providers to address all of the increasing mental health needs in Texas and the adding of this additional examination would add again to that problem. Additionally, the EPPP Part II was developed to provide jurisdictions an assessment tool to measure an applicant's competency skills. Measure of competency skills by future practitioners in psychology are completed by programs of training through practicum and internships in addition to other examinations at those institutions. The addition of the EPPP Part II being required not only places an additional undue financial hardship on those seeking licensure but it also is redundant and not necessary given that institutions granting psychology degrees, for which the applicant will be pursuing licensure, have already determined through practicum, internships, and supervision by licensed psychologists or other appropriate supervisors that these individuals are trained and competent in skills required to practice in the respective areas of psychology licensure.

In closing, this letter is written to strongly oppose the addition of the EPPP Part II requirement being added to any and all licensure requirements. It places an additional undue financial hardship on those seeking licensure. It is unnecessary and redundant to requirements that are already met by those training and receiving adequate supervision and experience and documentation of competency skills being met by said supervisors and programs. Lastly, this addition will decrease versus increase the number of potential licensees going in the opposite direction of what Texas needs to help support the increasing demands and shortage of licensed individuals practicing psychology in the state and assisting those with mental illness.

Respectfully submitted,



Lisa Daniel, PhD, LSSP  
3831 Blackjack Rd.  
Jefferson, TX 75657  
[Lisa\\_m\\_daniel@hotmail.com](mailto:Lisa_m_daniel@hotmail.com)  
903-268-9958

**From:** [Dr. Sandra Davis](#)  
**To:** [rules](#)  
**Subject:** TSBEP EPPP Part 2 Rule Changes  
**Date:** Friday, October 2, 2020 7:11:29 PM

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Good evening,

As a Texas Licensed Psychologist since 2013, I would like to offer my comments on the proposed EPPP2. It is my opinion that the current version of EPPP is an incredibly poor measure of what makes a competent and ethical psychologist. Rather than implementing an additional version I believe it would be better to revise the current EPPP to better measure intervention and ethical solutions to real-world scenarios, similar to the oral examination. I hope you will take this under advisement.

Thank you,  
Dr. Sandy Davis, CCTP  
Licensed Psychologist  
Anchor Psychology Group, Co-Founder  
469-406-6899

**From:** [clearskiesaustin@gmail.com](mailto:clearskiesaustin@gmail.com)  
**To:** [rules](#)  
**Subject:** TSBEP EPPP Part 2 Rule Changes  
**Date:** Saturday, October 3, 2020 7:45:00 PM

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Dear TSBEP,

I am an LPA, and I would like to weigh in on the proposed rule to add the EPPP2 for licensure. There is a shortage of mental health professionals in Texas, particularly during COVID. Adding the EPPP2, particularly during this year, creates a significant barrier for the following reasons:

1. It will take applicants twice as long to become licensed because now they have to schedule another test, save another \$650, and wait on another round of paperwork, thus delaying the availability of psychologists and LPAs.
2. The testing centers are basically closed right now. I wanted to take the LSSP test, and my test was canceled three times. My colleague's test was delayed a few months and still canceled. She gave up on taking that test and moved to another state. EPPP2 will have the same issue. When I finally found a testing center, it was unsafe. The mask policy was not enforced by the proctor, and the other examinees were within about 3 feet of each other. People should not have to risk their lives for an unnecessary test.
3. To become a license psychologist or LPA, all of us have had significant supervised experience. Many people who are incompetent can pass a test, and many highly competent people are not good test takers. The tests also tend to be biased, which further limits the number of people entering the profession. I saw in the notes from previous board meetings that others have provided compelling research articles showing the flaws with this test and its impact on equity in mental health services.
4. The test seems to be just a money maker for the developer and/or a gatekeeping tool to prevent people from becoming licensed.
5. Adding a test creates more administrative work for the already over-booked staff at TSBEP. It takes weeks for applications that are complete to be processed. This will bog down the system even more.

I tend to test well, and I passed the EPPP with an above-average score before COVID. I passed the jurisprudence test the first time. I passed my LSSP test with 2 hours of studying and taking it as fast as I could to get out of the horrible testing center during COVID. Even though I test well, it just seems to be a waste of time to add another test, and it feels like a barrier to have to find another \$650 for the test plus wait for more paperwork. Is there a lot of evidence that this test predicts skill in providing psychological services? What is the evidence that this test appropriately weeds out people who will harm the public? Let other states be the guinea pigs and wait for the research on the test to show it adds value without discriminating.

I urge you to only have the EPPP and not add the EPPP2. The EPPP contains ethical dilemmas and some practice items, which should be sufficient in conjunction with practicum/internship supervision to weed out as many people as a test will weed out. It does not seem to add value, except to the pocketbooks of the testing companies.

Sincerely,

Alexandra Elliot  
Austin, TX

**From:** [Lauren Garza](#)  
**To:** [rules](#)  
**Subject:** TSBEP EPPP Part 2 Rule Changes  
**Date:** Sunday, October 4, 2020 2:13:12 PM

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Dear TSBEP,

I am an applicant for licensure as a psychologist. I have been proving my competency to licensed psychologists for years. I have passed the jurisprudence exam and am waiting for approval to take the EPPP. Adding the EPPP2 is a significant and unnecessary barrier to psychologists and LPAs during a pandemic when there is already a shortage in Texas. Adding the EPPP2 will add significant time, cost, and burden to applicants further increasing barriers to access for Texans. Again, considering current pandemic risks, adding an additional barrier of going to a testing center that puts the safety of applicants and their families at risk is unnecessarily cruel. The EPPP has already been shown to be negatively biased towards test-takers of color. Adding another exam increases these barriers and negative impact on psychologists, but specifically on psychologists of color, which in turn increases the negative impact on equity in mental health services. This is especially offensive at a time when racial injustice is being highlighted in America. As well, considering TSBEP, as well as the TBHEC, are backlogged with extensive wait times for license processing, adding more administrative responsibilities would only worsen these wait times, further increasing barriers to access.

Passing the EPPP and my post-doc supervision along with years of practicum and internship supervision should be more than enough to assess the quality of my competency. I highly recommend NOT adding the EPPP2 without undeniable research indicating its necessity for Texans. I encourage anyone who feels the same to make written public comment to [rules@bhec.texas.gov](mailto:rules@bhec.texas.gov).

Sincerely,  
Lauren Garza, Ph.D.

**From:** [Morgan Grahovec, Ph.D.](#)  
**To:** [rules](#)  
**Subject:** TSBEPP EPPP Part 2 Rule Changes  
**Date:** Monday, October 5, 2020 12:09:47 PM

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Dear TSBEPP/BHEC,

I am writing to express my reservations about the state of Texas adopting the EPPP Part 2 as a requirement for licensure for Psychologists. EPPP-2 has been controversial since it was first announced in 2017. In three years, we have no additional data to suggest it adds value, validity or consumer protection to the current licensure process.

I urge all members of TSBEPP/BHEC to read the criticisms of the EPPP-2 and consider the irony of a profession dedicated to scientific rigor in assessment requiring a test for licensure that does not live up to these standards:

<https://thepsychologytimes.com/2019/12/09/asppb-quietly-advances-the-ePPP-2-plan-with-jan-1-launch/>

<https://nationalpsychologist.com/2020/02/asppb-rolls-out-ePPP-2-names-early-adopters/106954.html>

Although the EPPP has been the standard national requirement for sometime, we have no data to support the validity or reliability of EPPP-2 in measuring clinical skills. While clinical skills are clearly vital to our practice, these skills are assessed consistently and continually throughout practica, externships, and the year-long full-time internship that is part of the requirements of our doctoral training. I do not feel an additional written examination is necessary or helpful in legitimately evaluating the clinical skills of a licensee. (Knowing the correct answer on a test is not, after all, the same as putting that knowledge to practice when in real time with a patient.)

I know of no other equivalent in any other mental health profession or even for physicians that would make such an additional examination necessary to demonstrate competency. (The clinical skill assessment required of physicians is done via in-person simulated patient evaluation, not a written exam.) The process of becoming a licensed psychologist is already extremely onerous and costly—after fees, licensees are paying almost \$700 for the EPPP; this fee would double with EPPP-2. EPPP-2 will add additional undue cost, time, and burden for a licensee that translates to no proven added value to the public. I feel it is particularly unwise, unfair, and inconsiderate to add an additional financial burden given the current economic and social climate.

At this time, only three states and three Canadian provinces and Guam are signed up as early adopters of the EPPP-2. I think it is premature to pass a law requiring the examination without additional information and clearly demonstrated benefits. If the EPPP Part 2 is, at some point demonstrated to add significant value to the quality of care provided by psychologists, I would certainly reconsider the necessity of adding it as a requirement to licensure.

Dr. Morgan Grahovec, HSP  
Licensed Psychologist  
Blossoming Brains  
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**From:** [Kristen](#)  
**To:** [rules](#)  
**Subject:** TSBEPP EPPP Part 2 Rule Changes  
**Date:** Saturday, October 3, 2020 9:13:11 PM

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To the Texas Behavioral Health Executive Council,

My name is Kristen Golba, Ph.D., and I am a Texas licensed psychologist. I humbly submit my opinion in **opposition** to the proposed rule change that would require all applicants for licensure as a psychological associate or psychologist to take and pass the Examination for Professional Practice in Psychology (EPPP) Part I and Part II.

The addition of the EPPP Part II has been in process for several years. This was to start in January 2019, which was then delayed until January 2020. However, the EPPP Part II has yet to be implemented. While COVID is likely used as an explanation for this delay, this does not explain why Part II was not disseminated in January 2020, as planned. At the time of writing this email, there is still no Candidate Handbook available on ASPPB's website ([here](#)).

I am suspect of ASPPB's explanation for the need for EPPP Part II. Their material states the need for an additional competency evaluation, in line with other professions, to ensure the safety of the field. In essence, ASPPB argues that the current procedures are not adequate to ensure a minimum level of competency. The current procedures include attendance at an accredited doctorate psychology program, completion of an accredited pre-doctoral internship, and post-doctoral supervision. This includes multiple years of clinical experience and supervision. If such procedures are deemed inadequate to assess competence and basic skills, it is not clear how a computer-based test is able to assess competence.

While I appreciate attempts to standardize knowledge and skills, there is no information about the validity of the EPPP Part II. ASPPB's website discusses the validation process (job task analysis, item writing, item review, etc.); however, it does not provide data or details regarding the actual validity of the exam.

To ask licensees to take a test that has yet to be validated does not have licensees' interest in mind. Rather, it is simply following the pack, so to speak, in implementing an exam because ASPPB says one should be implemented. The financial interest of ASPPB in promoting this new regulation should not be ignored.

Before supporting the proposed rule change, I suggest that the test should first be available for review by already licensed psychologists, who are thus exempt from taking the exam; data from ASPPB about the validity of the exam to assess the "universal standard of skills" [language from ASPPB's website]; as well as a review of both the exam and its validity by an independent organization.

Without independent review, you are supporting additional licensure requirements based on word of the organization that created, and financially benefits from, its implementation. The conflict of interest inherent in this process cannot be ignored.

Until independent validation occurs, I oppose the addition of the EPPP Part II.

Thank you for your attention to this matter.

Sincerely,

Kristen Golba, Ph.D.

**Diane Moore**

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**From:** Jake Lebar <jacoblebar@gmail.com>  
**Sent:** Tuesday, October 27, 2020 4:03 PM  
**To:** rules  
**Subject:** TSBEP EPPP Part 2 Rule Changes

To what extent should assessments be established as valid when creating such a rule? The announcement for this town hall on the BHEC website states, "The EPPP Part II was developed to provide jurisdictions an assessment tool to measure an applicant's competency skills." To what extent has Part II been validated for this purpose? Could citation and/or literature be provided?



**From:** [Jake Lebar](#)  
**To:** [rules](#)  
**Subject:** TSBEP EPPP Part 2 Rule Changes  
**Date:** Tuesday, October 27, 2020 4:18:19 PM

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How will the proposed requirement of EPPP Part II impact state reciprocity if an individual has already passed the original EPPP before the development of Part II?

**From:** [Molly Martinez](#)  
**To:** [rules](#)  
**Subject:** TSBEP EPPP Part 2 Rule Changes  
**Date:** Saturday, October 3, 2020 9:08:56 PM

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Dear TSBEP/BHEC,

I am writing to express my reservations about the state of Texas adopting the EPPP Part 2 as a requirement for licensure for Psychologists. EPPP-2 has been controversial since it was first announced in 2017. In three years, we have no additional data to suggest it adds value, validity or consumer protection to the current licensure process.

I urge all members of TSBEP/BHEC to read the criticisms of the EPPP-2 and consider the irony of a profession dedicated to scientific rigor in assessment requiring a test for licensure that does not live up to these standards:

<https://thepsychologytimes.com/2019/12/09/asppb-quietly-advances-the-ePPP-2-plan-with-jan-1-launch/>

<https://nationalpsychologist.com/2020/02/asppb-rolls-out-ePPP-2-names-early-adopters/106954.html>

Although the EPPP has been the standard national requirement for sometime, we have no data to support the validity or reliability of EPPP-2 in measuring clinical skills. While clinical skills are clearly vital to our practice, these skills are assessed consistently and continually throughout practica, externships, and the year-long full-time internship that is part of the requirements of our doctoral training. I do not feel an additional written examination is necessary or helpful in legitimately evaluating the clinical skills of a licensee. (Knowing the correct answer on a test is not, after all, the same as putting that knowledge to practice when in real time with a patient.)

I know of no other equivalent in any other mental health profession or even for physicians that would make such an additional examination necessary to demonstrate competency. (The clinical skill assessment required of physicians is done via in-person simulated patient evaluation, not a written exam.) The process of becoming a licensed psychologist is already extremely onerous and costly—after fees, licensees are paying almost \$700 for the EPPP; this fee would double with EPPP-2. EPPP-2 will add additional undue cost, time, and burden for a licensee that translates to no proven added value to the public. I feel it is particularly unwise, unfair, and inconsiderate to add an additional financial burden given the current economic and social climate.

At this time, only three states and three Canadian provinces And Guam are signed up as early adopters of the EPPP-2. I think it is premature to pass a law requiring the examination without additional information and clear we demonstrated benefits. Finally, the new TSBEP/BHEC rule makes no mention of whether or not currently licensed psychologist will be grandfathered in, or if they will be required to go back and take each body part two in order to be in good standing with their licenses.

If the EPPP Part 2 is, at some point demonstrated to add significant value to the quality of care provided by psychologists, I would certainly reconsider the necessity of adding it as a requirement to licensure. As it stands, I am strongly opposed to adding an additional and

potentially meaningless additional hurdle to become a licensed psychologist in the state of Texas.

Sincerely,

**Molly Martinez, PhD**

Licensed Psychologist (TX 37466, HI Psy-1760)

**Specialists in OCD & Anxiety Recovery (SOAR)**

2100 Alamo Rd, Suite T

Richardson, TX 75080

(214) 810-4667

[www.soartgether.net](http://www.soartgether.net)

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**From:** [Daniel Munoz-Santamaria](#)  
**To:** [rules](#)  
**Subject:** TSBEPP EPPP Part 2  
**Date:** Friday, October 2, 2020 5:10:04 PM

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I personally agree with requiring the EPPP part 2 (competency based examination), which will ensure that psychologists practicing independently in Texas have the necessary skills to do so. Doing so will also help ensure we protect our fellow Texan citizens from malpractice and potential harm. Having removed the oral examination and only requiring a basic level, knowledge-based test (that is, EPPP part 1) represents a disservice to our fellow Texans.

**Practicing as a mental health provider requires skills that should be demonstrated in practice (through ePPP part 2) and evaluated in a standardized, uniform way for all those aspiring to practice independently (master level and doctoral level).**

Daniel Muñoz-Santamaría, PhD  
Licensed Psychologist

--

Daniel Muñoz-Santamaria, Ph.D.

Interim Director of Clinical Operations, Division of Psychology  
Department of Psychiatry, Acclaim Physician Group, INC.

Licensed Psychologist

John Peter Smith Hospital  
Department of Psychiatry, Acclaim Physician Group, INC.

Assistant Professor  
University of North Texas, Health Science Center  
Department of Internal Medicine

**From:** [drdougbrady@aol.com](mailto:drdougbrady@aol.com)  
**To:** [rules](#)  
**Subject:** TSBB EPPP  
**Date:** Saturday, October 3, 2020 10:50:57 AM

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I am against this rule change.  
Douglas O. Brady, Ph.D.  
TX # 21363

Rule: 463.3. Use of Other Mental Health License During Supervised Experience.

Action: Proposed Amendment

Comment: Rule changes reflect the changes recommend by public comment.

§463.3. Use of Other Mental Health License During Supervised Experience.

(a) An individual who holds a mental health license, other than one issued under Chapter 501, may not obtain the required practicum, internship, or supervised experience required for a license under Chapter 501 while practicing under that license.

(b) An individual subject to subsection (a) of this section must comply with the Psychologists' Licensing Act and all applicable Council rules regarding the use of appropriate titles.

Rule: 463.8. Licensed Psychological Associate.

Action: Proposed Amendment

Comment: Rule changes reflect the changes recommend by public comment.

§463.8. Licensed Psychological Associate.

(a) Licensure Requirements. An applicant for licensure as a psychological associate must:

(1) hold a graduate degree in psychology from a regionally accredited institution of higher education;

(2) provide documentation of at least six (6) semester credit hours of practicum, internship or other structured experience within the applicant's graduate degree program under the supervision of a licensed psychologist;

(3) pass all examinations required by the Council and meet each of the criteria listed in §501.2525(a)(2)-(9) of the Occupations Code; and

(4) demonstrate graduate level coursework in each of the following areas:

(A) Psychological Foundations:

(i) the biological bases of behavior;

(ii) the acquired or learned bases of behavior, including learning, thinking, memory, motivation and emotion;

(iii) the social, cultural, and systemic bases of behavior;

(iv) the individual or unique bases of behavior, including personality theory, human development, and abnormal behavior;

(B) Research and Statistics:

(i) the methodology used to investigate questions and acquire knowledge in the practice of psychology;

(ii) coursework in research design and methodology, statistics, critical thinking, and scientific inquiry;

(C) Applied Psychology:

(i) the history, theory, and application of psychological principles;

- (ii) the application of psychological theories to individuals, families, and groups;
- (D) Assessment:
  - (i) intellectual, personality, cognitive, physical, and emotional abilities, skills, interests, and aptitudes;
  - (ii) socio-economic, including behavioral, adaptive, and cultural assessment;
- (E) Interventions:
  - (i) the application of therapeutic techniques;
  - (ii) behavior management;
  - (iii) consultation; and
- (F) Scientific and Professional, Legal, and Ethical Issues.
  - (b) Degree Requirements.
    - (1) For purposes of this rule:
      - (A) a graduate degree in psychology means the name of the candidate's major or program of studies contains the term "psychology;"
      - (B) a specialist degree shall be treated as a graduate degree; and
      - (C) one semester credit hour equals one and one-half quarter credit hours.
    - (2) A degree utilized to meet the requirements of this rule must consist of at least sixty (60) semester credit hours, with no more than twelve (12) semester credit hours of practicum, internship, or structured experience being counted toward the total degree hour requirement.
    - (3) Applicants must demonstrate proof of the graduate level coursework required in subsection (a)(4) of this section by identifying which courses or training listed on their transcripts satisfy the required areas of study. Applicants may be required to provide the Council with an official course catalogue or description from their university or training program to verify whether a course meets the requirements of this rule.
  - (c) Supervision Requirements.
    - (1) A licensed psychological associate must practice under the supervision of a licensed psychologist and may not practice independently.



(2) Notwithstanding paragraph (1) of this subsection and subject to the limitations set out in paragraph (3) of this subsection, a licensed psychological associate may practice independently if:

(A) the licensee can demonstrate at least 3,000 hours of post-graduate degree experience in the delivery of psychological services under the supervision of one or more licensed psychologists;

(B) the supervised experience was obtained in not less than 24 consecutive months, but not more than 48 consecutive months, and in not more than three placements; and

(C) the licensee submits an application for independent practice evidencing proof of the required supervised experience.

(3) A licensed psychological associate meeting the requirements of paragraph (2) of this subsection shall be approved for independent practice, but remains subject to all Council rules, including Council §465.9 (relating to Competency).

(4) Applicants shall not utilize any supervised experience obtained from a psychologist with a restricted license or to whom they are related within the second degree of affinity or consanguinity to satisfy the requirements of this rule.

(5) Applicants licensed as specialists in school psychology may utilize experience acquired under that license if the experience was supervised by a licensed psychologist.

(d) Notwithstanding subsection (c)(3) of this section, an application for independent practice may be denied if a gap of more than two years exists between the completion of the supervised experience required for independent practice and the date of application for independent practice. The rules governing the waiver of gaps related to supervised experience found in Council rule §463.11 shall govern any request for a waiver under this rule.

(e) The correct title for a person licensed under this rule shall be "licensed psychological associate" or "psychological associate."

(f) A licensed psychological associate authorized to practice independently under this rule must inform all patients and clients as part of the informed consent process, whether the licensee holds a master's, specialist or doctoral degree, and provide the patient with a current copy of any informational pamphlet or brochure published by the Council describing the differences between the levels of training and education received in master's, specialist, and doctoral degree programs. In lieu of providing each patient or client with a copy of the required pamphlet or brochure, licensees may publish in a conspicuous manner, the pamphlet or brochure on their website or provide a link to the pamphlet or brochure on the Council's website.

(g) Continuation of Prior Law.

(1) Notwithstanding subsection (b)(1)(A) of this section, a person who begins a graduate program leading to a degree required by subsection (a)(1) of this section before August 31, 2019, shall be considered to have met the requirements of that subsection if the individual's degree is primarily psychological in nature. This subsection expires on August 31, 2021.

(2) Notwithstanding subsection (b)(2) of this section, a person who begins a graduate program leading to a degree required by subsection (a)(1) of this section before August 31, 2019, shall be considered to have met the requirements of that subsection if the individual has completed 42 semester credit hours with at least 27 of those hours in psychology. Applicants with degrees consisting of less than 42 semester credit hours may utilize a maximum of 12 semester credit hours from another graduate degree program in psychology to achieve the total of 42 semester credit hours. This subsection expires on August 31, 2021.

Rule: 463.10. Licensed Psychologists.

Action: Proposed Amendments

Comment: Rule changes reflect the changes recommend by public comment.

§463.10. Licensed Psychologists.

(a) Licensure Requirements. An applicant for licensure as a psychologist must:

- (1) hold a doctoral degree in psychology from a college or university accredited by a regional accrediting organization;
- (2) pass all examinations required by the agency;
- (3) submit documentation of supervised experience from a licensed psychologist which satisfies the requirements of Council rule 463.11; and
- (4) meet all other requirements of §501.2525 of the Occupations Code.

(b) Degree Requirements.

(1) For those applicants with a doctoral degree conferred on or after January 1, 1979, the transcript must state that the applicant has a doctoral degree that designates a major in psychology.

(2) For those applicants with a doctoral degree conferred prior to January 1, 1979, the transcript must reflect a doctoral degree that designates a major in psychology or the substantial equivalent of a doctoral degree in psychology in both subject matter and extent of training. A doctoral degree will be considered the substantial equivalent to a doctoral degree in psychology if the training program meets the following criteria:

(A) Post-baccalaureate program in a regionally accredited institution of higher learning. The program must have a minimum of 90 semester hours, not more than 12 of which are credit for doctoral dissertation and not more than six of which are credit for master's thesis.

(B) The program, wherever it may be administratively housed, must be clearly identified and labeled. Such a program must specify in pertinent institutional catalogs and brochures its intent to educate and train professional psychologists.

(C) The program must stand as a recognizable, coherent organizational entity within the institution. A program may be within a larger administrative unit, e.g., department, area, or school.

(D) There must be a clear authority and primary responsibility for the core and specialty areas whether or not the program cuts across administrative lines. The program must have identifiable faculty and administrative heads who are psychologists responsible for the graduate program. Psychology faculty are individuals who are licensed or certified psychologists, or specialists of the American Board of Professional Psychology (ABPP), or hold a doctoral degree in psychology from a regionally accredited institution.

(E) The program must be an integrated, organized sequence of studies, e.g., there must be identifiable curriculum tracks wherein course sequences are outlined for students.

(F) The program must have an identifiable body of students who matriculated in the program.

(G) The program must include supervised practicum, internship, field or laboratory training appropriate to the practice of psychology. The supervised field work or internship must have been a minimum of 1,500 supervised hours, obtained in not less than a 12 month period nor more than a 24 month period. Further, this requirement cannot have been obtained in more than two placements or agencies.

(H) The curriculum shall encompass a minimum of two academic years of full-time graduate studies for those persons have enrolled in the doctoral degree program after completing the requirements for a master's degree. The curriculum shall encompass a minimum of four academic years of full-time graduate studies for those persons who have entered a doctoral program following the completion of a baccalaureate degree and prior to the awarding of a master's degree. It is recognized that educational institutions vary in their definitions of full-time graduate studies. It is also recognized that institutions vary in their definitions of residency requirements for the doctoral degree.

(I) The following curricular requirements must be met and demonstrated through appropriate course work:

(i) Scientific and professional ethics related to the field of psychology.

(ii) Research design and methodology, statistics.

(iii) The applicant must demonstrate competence in each of the following substantive areas. The competence standard will be met by satisfactory completion at the B level of a minimum of six graduate semester hours in each of the four content areas. It is recognized that some doctoral programs have developed special competency examinations in lieu of requiring students to complete course work in all core areas. Graduates of such programs who have not completed the necessary semester hours in these core areas must submit to the Council evidence of competency in each of the four core areas.

(I) Biological basis of behavior: physiological psychology, comparative psychology, neuropsychology, sensation and perception, psycho-pharmacology.

(II) Cognitive-affective basis of behavior: learning, thinking, motivation, emotion.

(III) Social basis of behavior:

social psychology, group processes, organizational and system theory.

(IV) Individual differences: personality theory, human development, abnormal psychology.

(J) All educational programs which train persons who wish to be identified as psychologists will include course requirements in specialty areas. The applicant must demonstrate a minimum of 24 hours in his/her designated specialty area.

(3) Any person intending to apply for licensure under the substantial equivalence clause must file with the Council an affidavit showing:

(A) Courses meeting each of the requirements noted in paragraph (2) of this subsection verified by official transcripts;

(B) Information regarding each of the instructors in the courses submitted as substantially equivalent;

(C) Appropriate, published information from the university awarding the degree, demonstrating that the requirements noted in paragraph (2) of this subsection have been met.

(c) An applicant who holds an active Certificate of Professional Qualification in Psychology (CPQ) is considered to have met all requirements for licensure under this rule except for passage of the Jurisprudence Examination. Applicants relying upon this subsection must request that documentation of their certification be sent directly to the Council from the Association of State and Provincial Psychology Boards (ASPPB), be submitted to the Council in the sealed envelope in which it was received by the applicant from ASPPB, or be submitted to the Council as directed by agency staff.

(d) An applicant who holds an active specialist certification with the American Board of Professional Psychology (ABPP) is considered to have met all requirements for licensure under this rule except for passage of the EPPP and Jurisprudence Examination. Applicants relying upon this subsection must request that documentation of their specialist certification be sent directly to the Council from ABPP, be submitted to the Council in the sealed envelope in which it was received by the applicant from ABPP, or be submitted to the Council as directed by agency staff.

(e) The requirement for documentation of supervised experience under this rule is waived for an applicant who is actively licensed as a doctoral-level psychologist in good standing and has been practicing psychology in another jurisdiction for at least five years or can affirm that the applicant has received at least 3,000 hours of supervised experience from a licensed psychologist in the jurisdiction where the supervision took place. At least half of those hours (a minimum of

1,500 hours) must have been completed within a formal internship, and the remaining one-half (a minimum of 1,500 hours) must have been completed after the doctoral degree was conferred. Applicants relying upon this subsection must request that verification of their out-of-state licensure be sent directly to the Council from the other jurisdiction, be submitted to the Council in the sealed envelope in which it was received by the applicant from the other jurisdiction, or be submitted to the Council as directed by agency staff.

(f) Provisional License.

(1) An applicant who has not yet passed the required examinations or is seeking to acquire the supervised experience required under Council rule 463.11 may practice under the supervision of a licensed psychologist as a provisionally licensed psychologist for not more than two years if the applicant meets all other licensing requirements.

(2) A provisional license will be issued to an applicant upon proof of provisional license eligibility. However, a provisional license will not be issued to an applicant who was issued a provisional license in connection with a prior application.

(3) A provisionally licensed psychologist is subject to all applicable laws governing the practice of psychology.

(4) A provisionally licensed psychologist may be made the subject of an eligibility or disciplinary proceeding. The two-year period for provisional licensure shall not be tolled by any suspension of the provisional license.

(5) A provisional license will expire after two years if the person does not qualify for licensure as a psychologist.

Rule: 463.20. Special Provisions Applying to Military Service Members, Veterans, and Spouses.

Action: Proposed Amendment

Comment: Rule changes reflect the changes recommend by public comment.

§463.20. Special Provisions Applying to Military Service Members, Veterans, and Spouses.

(a) Substantial Equivalency Determination. In accordance with §55.004 of the Occupations Code, the licensing requirements for a license to practice psychology in another jurisdiction will be considered substantially equivalent to Texas' requirements if the other jurisdiction's requirements meet or exceed the following criteria:

(1) Licensed Specialist in School Psychology.

(A) The completion of a training program in school psychology that has been approved or accredited by the American Psychological Association or the National Association of School Psychologists, or completion of a master's degree in psychology with specific course work similar to the coursework required in the Council's rules; and

(B) Passage of the School Psychology Examination.

(2) Licensed Psychological Associate.

(A) A graduate degree that is primarily psychological in nature and consisting of at least 42 semester credit hours in total with at least 27 semester credit hours in psychology courses;

(B) Passage of the EPPP at the Texas cut-off score; and

(C) A minimum of 6 semester credit hours of practicum, internship, or experience in psychology, under the supervision of a licensed psychologist.

(3) Licensed Psychologist.

(A) A doctoral degree in psychology;

(B) Passage of the EPPP at the Texas cut-off score; and

(C) A minimum of two years or 3,000 hours of supervised experience under a licensed psychologist.

(b) In accordance with §55.007 of the Occupations Code, an applicant who is a military service member or military veteran, as defined by Chapter 55, Occupations Code, shall receive credit toward the following licensing requirements for verified military service, training, or education:

(1) Licensed Specialist in School Psychology. A military service member or military veteran who has delivered psychological services within the military for at least one year is considered to have met the following requirements for this type of license: a practicum and 600 internship hours.

(2) Licensed Psychological Associate. A military service member or military veteran who has delivered psychological services within the military for at least one year is considered to have met the following requirements for this type of license: 6 semester credit hours of supervised experience.

(3) Licensed Psychologist. A military service member or military veteran who has delivered psychological services within the military for at least one year, following conferral of a doctoral degree, is considered to have met the following requirements for this type of license: one year or 1,750 hours of supervised experience.

(c) A military service member or military veteran may not receive credit toward licensing requirements due to military service, training, or education if they hold a license issued by another jurisdiction that has been restricted, or they have a disqualifying criminal history.



Rule: 463.25. Health Service Psychologists Specialty Certification

Action: Proposed Amendment

Comment:

§463.25. Health Service Psychologist Specialty Certification.

- (a) Health Service Psychologist (HSP) is a specialty certification from the Council available to Texas licensed psychologists who are listed in the National Register of Health Service Psychologists.
- (b) The Council will issue the HSP specialty certification to actively licensed psychologists upon receipt of proof from the National Register that the licensee currently holds the HSP credential from the National Register.
- (c) The HSP specialty certification by the Council must be renewed in connection with the person's license. Renewal of the HSP specialty certification requires payment of the renewal fee established by the Council.

Rule: 463.35. Professional Development  
Action: Proposed Amendment  
Comment: Rule changes reflect the changes recommend by public comment

#### §463.35. Professional Development

(a) Persons licensed under Chapter 501 are obligated to continue their professional education by completing a minimum of 40 hours of professional development during each renewal period they hold a license. At least 6 of these hours shall be in ethics, the Council's rules, or professional responsibility, and another 6 or more hours shall be in cultural diversity. Acceptable cultural diversity hours include, but are not limited to professional development regarding age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, and socio economic status.

(b) Relevancy. All professional development hours shall be directly related to the practice of psychology. The Council shall make the determination as to whether the activity or publication claimed by the licensee is directly related to the practice of psychology. In order to establish relevancy to the practice of psychology, the Council may require a licensee to produce course descriptions, conference catalogs and syllabi, or other material as warranted by the circumstances. A person may not claim professional development credit for personal psychotherapy, workshops for personal growth, the provision of services to professional associations by a licensee, foreign language courses, or computer training classes.

(c) At least half of the professional development hours required by this rule shall be obtained from or endorsed by a provider listed in subsection (f)(1) of this section.

(d) The Council shall not pre-approve professional development credit.

(e) Approved Professional Development Activities. The Council shall accept professional development hours obtained by participating in one or more of the following activities, provided that the specific activity may not be used for credit in more than one renewal period:

(1) attendance or participation in a formal professional development activity for which professional development hours have been pre-assigned by a provider;

(2) teaching or attendance as an officially enrolled student in a graduate level course in psychology at a regionally accredited institution of higher education;

(3) presentation of a program or workshop; and

(4) authoring or editing publications.

(f) Approved Professional Development Providers. The Council shall accept professional development hours from the following providers:

(1) national, regional, state, or local psychological associations; public school districts; regional service centers for public school districts; state or federal agencies; or psychology programs, or counseling centers which host accredited psychology training programs, at regionally accredited institutions of higher education; and

(2) other formally organized groups providing professional development that is directly related to the practice of psychology. Examples of such providers include: public or private institutions, professional associations, and training institutes devoted to the study or practice of particular areas or fields of psychology; and professional associations relating to other mental health professions such as psychiatry, counseling, or social work.

(g) Credit for professional development shall be provided as follows:

(1) For attendance at formal professional development activities, the number of hours pre-assigned by the provider.

(2) For teaching or attendance of a graduate level psychology course, 4 hours per credit hour. A particular course may not be taught or attended by a licensee for professional development credit more than once.

(3) For presentations of workshops or programs, 3 hours for each hour actually presented, for a maximum of 6 hours per year.

(4) For publications, 8 hours for authoring or co-authoring a book; 6 hours for editing a book; 4 hours for authoring a published article or book chapter. A maximum credit of 8 hours for publication is permitted for any one year.

(h) Professional development hours shall have been obtained during the renewal period for which they are submitted and may not be utilized to fulfill the requirements for more than one renewal period. However, if the hours were obtained during the license renewal month and are not needed for compliance for that renewal period, they may be submitted the following renewal period to meet that period's professional development requirements.

(i) The Council shall accept as documentation of professional development:

(1) for hours received from attendance or participation in formal professional development activities, a certificate or other document containing the name of the sponsoring organization, the title of the activity, the number of pre-assigned professional development hours for the activity, and the name of the licensee claiming the hours;

(2) for hours received from attending college or university courses, official grade slips or transcripts issued by the institution of higher education;

(3) for hours received for teaching college or university courses, documentation demonstrating that the licensee taught the course;

(4) for presenters of professional development workshops or programs, copies of the official program announcement naming the licensee as a presenter and an outline or syllabus of the contents of the program or workshop;

- (5) for authors or editors of publications, a copy of the article or table of contents or title page bearing the name of licensee as the author or editor;
- (6) for online or self-study courses, a copy of the certificate of completion containing the name of the sponsoring organization, the title of the course, the number of pre-assigned professional development hours for the course, and stating the licensee passed the examination given with the course.
- (j) It is the responsibility of each licensee to maintain documentation of all professional development hours claimed under this rule and to provide this documentation upon request by the Council. Licensees shall maintain documentation of all professional development hours for 5 years following the renewal period in which those hours were utilized.

Rule: 465.1. Definitions.

Action: Proposed Amendment

Comment: Rule changes reflect the changes recommend by public comment.

#### §465.1. Definitions.

The following terms have the following meanings:

- (1) "Adoption evaluation" has the same meaning as assigned by §107.151 of the Family Code.
- (2) "Child custody evaluation" has the same meaning as assigned by §107.101 of the Family Code.
- (3) "Client" means a party other than a patient seeking or obtaining psychological services, as defined in §501.003 of the Occupations Code, for a third-party with the goal of assisting or caring for that third-party or answering a referral question through the use of forensic psychological services.
- (4) "Dual Relationship" means a situation where a licensee and another individual have both a professional relationship and a non-professional relationship. Dual relationships include, but are not limited to, personal friendships, business or financial interactions, mutual club or social group activities, family or marital ties, or sexual relationships.
- (5) "Forensic evaluation" is an evaluation conducted, not for the purpose of providing mental health treatment, but rather at the request of a court, a federal, state, or local governmental entity, an attorney, or an administrative body including federal and private disability benefits providers to assist in addressing a forensic referral question.
- (6) "Forensic psychological services" are services involving courts, legal claims, or the legal system. The provision of forensic psychological services includes any and all preliminary and exploratory services, testing, assessments, evaluations, interviews, examinations, depositions, oral or written reports, live or recorded testimony, or any psychological service provided by a licensee concerning a current or potential legal case at the request of a party or potential party, an attorney for a party, or a court, or any other individual or entity, regardless of whether the licensee ultimately provides a report or testimony that is utilized in a legal proceeding. However, forensic psychological services do not include evaluations, proceedings, or hearings under the Individuals with Disabilities Education Improvement Act (IDEIA).
- (7) "Informed Consent" means the written documented consent of the patient, client and other recipients of psychological services only after the patient, client or other recipient has been made aware of the purpose and nature of the services to be provided, including but not limited to: the specific goals of the services; the procedures to be utilized to deliver the services; possible side effects of the services, if applicable; alternate choices to the services, if applicable; the possible duration of the services; the confidentiality of and relevant limits thereto; all financial

policies, including the cost and methods of payment; and any provisions for cancellation of and payments for missed appointments; and right of access of the patient, client or other recipient to the records of the services.

(8) "Licensee" means a licensed psychologist, provisionally licensed psychologist, licensed psychological associate, licensed specialist in school psychology, applicants, and any other individual subject to the regulatory authority of the Council.

(9) "Patient" means a person who receives psychological services, as defined in §501.003 of the Occupations Code, regardless of whether the patient or a third-party pays for the services. The term "patient" shall include a client if the client is a person listed in §611.004(a)(4) or (5) of the Health and Safety Code who is acting on a patient's behalf. A person who is the subject of a forensic evaluation is not considered to be a patient under these rules.

(10) "Private school" has the same meaning as assigned by §5.001 of the Texas Education Code, but does not include a parent or legal guardian who chooses to homeschool a child.

(11) "Professional relationship" means a fiduciary relationship between a licensee and a patient or client involving communications and records deemed confidential under §611.002 of the Health and Safety Code. A professional relationship also exists where licensees are appointed by a court or other governmental body to answer a referral question through the use of forensic psychological services.

(12) "Professional standards" are determined by the Council through its rules.

(13) "Provision of psychological services" means any use by a licensee of education or training in psychology in the context of a professional relationship. Psychological services include, but are not limited to, therapy, diagnosis, testing, assessments, evaluation, treatment, counseling, supervision, consultation, providing forensic opinions, rendering a professional opinion, or performing research, or teaching to an individual, group, or organization.

(14) "Public school" means any state agency, regional education service center, diploma program, school district, or charter school established or authorized under Title 2 of the Texas Education Code and supported in whole or in part by state tax funds.

(15) "Recognized member of the clergy," as used in §501.004(a)(4) of the Occupations Code, means a member in good standing of and accountable to a denomination, church, sect or religious organization recognized under the Internal Revenue Code, §501(c)(3).

(16) "Records" are any information, regardless of the format in which it is maintained, that can be used to document the delivery, progress or results of any psychological services including, but not limited to, data identifying a recipient of services, dates of services, types of services, informed consents, fees and fee schedules, assessments, treatment plans, consultations, session notes, reports, release forms obtained from a client or patient or any other individual or entity, and records concerning a patient or client obtained by the licensee from other sources.

(17) "Report" includes any written or oral assessment, recommendation, psychological diagnostic or evaluative statement containing the professional judgment or opinion of a licensee.

(18) "Supervision" refers to direct, systematic professional oversight of individuals who provide psychological services under the authority of a supervising licensee, whereby the supervisor has the responsibility and ability to monitor and control the psychological services provided to ensure the patient's or client's best interests are met and that the public is protected. In the context of psychological training and education, "supervision" also refers to the formal provision of systematic education and training for purposes of licensure or competency that serves to assist individuals with gaining experience and developing the skills necessary for licensure or competent practice in a particular practice area. However, the term "supervision" does not apply to the supervision of purely administrative or employment matters.

(19) "Test data" refers to a patient's specific answers to test materials, whether spoken or written, generated in drawings, or recorded by computers or other lab devices.

(20) "Test materials" refers to test booklets, forms, manuals, instruments, protocols, software, as well as test questions, and stimuli protected by federal copyright law and used in psychological testing to generate test results and test reports.

465.2. Supervision.

Action: Proposed Amendment

Comment: Rule changes reflect the changes recommend by public comment.

§465.2. Supervision.

(a) Supervision in General. The following rules apply to all supervisory relationships.

(1) Licensee is responsible for the supervision of all individuals that the licensee employs or utilizes to provide psychological services of any kind.

(2) Licensees shall ensure that their supervisees have legal authority to provide psychological services.

(3) Licensees may delegate only those responsibilities that supervisees may legally and competently perform.

(4) All individuals who receive psychological services requiring informed consent from an individual under supervision must be informed in writing of the supervisory status of the individual and how the patient or client may contact the supervising licensee directly.

(5) All materials relating to the practice of psychology, upon which the supervisee's name or signature appears, must indicate the supervisory status of the supervisee. Supervisory status must be indicated by one of the following:

(A) Supervised by (name of supervising licensee);

(B) Under the supervision of (name of supervising licensee);

(C) The following persons are under the supervision of (name of supervising licensee); or

(D) Supervisee of (name of supervising licensee).

(6) Licensees shall provide an adequate level of supervision to all individuals under their supervision according to accepted professional standards given the experience, skill and training of the supervisee, the availability of other qualified licensees for consultation, and the type of psychological services being provided.

(7) Licensees shall utilize methods of supervision that enable the licensee to monitor all delegated services for legal, competent, and ethical performance. No more than fifty percent of the supervision may take place through remote or electronic means. Licensees may exceed fifty percent remote or electronic supervision if supervision is provided through synchronous audiovisual means. Methods of supervision may include synchronous remote or electronic means.

(8) Licensees must be competent to perform any psychological services being provided under their supervision.



(9) Licensees shall document their supervision activities in writing, including any remote or electronic supervision provided. Documentation shall include the dates, times, and length of supervision.

(10) Licensees may only supervise the number of supervisees for which they can provide adequate supervision.

(b) Supervision of Students, Interns, Residents, Fellows, and Trainees. The following rules apply to all supervisory relationships involving students, interns, residents, fellows, and trainees.

(1) Unlicensed individuals providing psychological services pursuant to §§501.004(a)(2), 501.2525(a)(2)(A), or 501.260(b)(3) of the Occupations Code must be under the supervision of a qualified supervising licensee at all times.

(2) Supervision must be provided by a qualified supervising licensee before it will be accepted for licensure purposes.

(3) A licensee practicing under a restricted status license is not qualified to, and shall not provide supervision for a person seeking to fulfill internship or practicum requirements or a person seeking licensure under the Psychologists' Licensing Act, regardless of the setting in which the supervision takes place, unless authorized to do so by the Council. A licensee shall inform all supervisees of any disciplinary order restricting the licensee's license and assist the supervisees with finding appropriate alternate supervision.

(4) A supervisor must document in writing a supervisee's performance during a practicum, internship, or period of supervised experience required for licensure. The supervisor must provide this documentation to the supervisee.

(5) A supervisor may allow a supervisee, as part of a required practicum, internship, or period of supervised experience required for licensure under Chapter 501, to supervise others in the delivery of psychological services.

(6) Licensees may not supervise an individual to whom they are related within the second degree of affinity or consanguinity.

(c) Supervision of Provisionally Licensed Psychologists and Licensed Psychological Associates. The following rules apply to all supervisory relationships involving Provisionally Licensed Psychologists and Licensed Psychological Associates.

(1) Provisionally Licensed Psychologists must be under the supervision of a Licensed Psychologist and may not engage in independent practice unless the provisional licensee is licensed in another state to independently practice psychology and is in good standing in that state.

(2) A Provisionally Licensed Psychologist may, as part of a period of supervised experience required for licensure as a psychologist, supervise others in the delivery of psychological services.

(3) A supervisor must provide at least one hour of individual supervision per week. A supervisor may reduce the amount of weekly supervision on a proportional basis for supervisees working less than full-time.

(d) Supervision of Licensed Specialists in School Psychology interns and trainees. The following rules apply to all supervisory relationships involving Licensed Specialists in School Psychology, as well as all interns and trainees working toward licensure as a specialist in school psychology.

(1) A supervisor must provide an LSSP trainee with at least one hour of supervision per week, with no more than half being group supervision. A supervisor may reduce the amount of weekly supervision on a proportional basis for trainees working less than full-time.

(2) Supervision within the public schools may only be provided by a Licensed Specialist in School Psychology who has a minimum of 3 years of experience providing psychological services within the public school system without supervision. To qualify, a licensee must be able to show proof of their license, credential, or authority to provide unsupervised school psychological services in the jurisdiction where those services were provided, along with documentation from the public school(s) evidencing delivery of those services.

(3) Supervisors must sign educational documents completed for students by the supervisee, including student evaluation reports, or similar professional reports to consumers, other professionals, or other audiences. It is not a violation of this rule if supervisors do not sign documents completed by a committee reflecting the deliberations of an educational meeting for an individual student which the supervisee attended and participated in as part of the legal proceedings required by federal and state education laws, unless the supervisor also attended and participated in such meeting.

(4) Supervisors shall document all supervision sessions. This documentation must include information about the duration of sessions, as well as the focus of discussion or training. The documentation must also include information regarding:

- (A) any contracts or service agreements between the public school district and university school psychology training program;
- (B) any contracts or service agreements between the public school district and the supervisee;
- (C) the supervisee's professional liability insurance coverage, if any;
- (D) any training logs required by the school psychology training program; and
- (E) the supervisee's trainee or licensure status.

(5) Supervisors must ensure that each individual completing any portion of the internship required for licensure as an LSSP, is provided with a written agreement that includes a clear statement of the expectations, duties, and responsibilities of each party, including the total hours to be performed by the intern, benefits and support to be provided by the supervisor, and the process by which the intern will be supervised and evaluated.

(6) Supervisors must ensure that supervisees have access to a process for addressing serious concerns regarding a supervisee's performance. The process must protect the rights of clients to receive quality services, assure adequate feedback and opportunities for improvement to the supervisee, and ensure due process protection in cases of possible termination of the supervisory relationship.

(e) The various parts of this rule should be construed, if possible, so that effect is given to each part. However, where a general provision conflicts with a more specific provision, the specific provision shall control.

465.6. Solicitation, Use of Titles, and Business Names.

Action: Proposed Amendment

Comment: Rule changes reflect the changes recommend by public comment.

**§465.6. Solicitation, Use of Titles, and Business Names.**

(a) Solicitation of Testimonials and/or Patients.

- (1) Licensees do not solicit testimonials from current clients or patients or from other persons who are vulnerable to undue influence.
- (2) Licensees do not engage, directly or through agents, in uninvited in-person solicitation of business from actual or potential patients or clients.

(b) Use of Titles.

- (1) An individual may not use the title of "Licensed Psychologist" unless the individual is licensed as such by this agency.
- (2) An individual may not use the title of "Psychologist" when engaged in the practice of psychology, unless the individual is licensed as such by this agency.
- (3) A licensed psychologist may not use a specialty title unless one or more of the following criteria have been met:
  - (A) the individual holds a doctorate in the area of specialization;
  - (B) the individual has undergone retraining under the American Psychological Association retraining guidelines in effect at the time of specialization;
  - (C) the individual has completed a two-year postdoctoral fellowship in the area of specialization;
  - (D) for individuals who matriculated from a doctoral program in psychology prior to 1978, documentation of academic coursework and relevant applied experience, as well as proof that the title has been used for at least five years; or
  - (E) documentation of certification, approval, or specialist status granted by a professional, refereed board, provided that the licensee indicates the name of the board which granted the title and that the individual's status with the specialty board is current and in good standing. Use of the term "Board Certified" or "Board Approved" or any similar words or phrases calculated to convey the same meaning shall constitute misleading or deceptive advertising, unless the licensee discloses the complete name of the specialty board that conferred the aforementioned specialty title, certification, approval or specialist status.

(c) Assumed Names and Legal Entities. Licensees engaged in the practice of psychology under an assumed name or through a legal entity must comply with the name and notification

requirements set out in the Assumed Business and Professional Name Act found in Chapter 71 of the Texas Business and Commerce Code and §5.060 of the Texas Business Organizations Code.

465.13. Personal Problems, Conflicts and Dual Relationship.

Action: Proposed Amendment

Comment: Rule changes reflect the changes recommend by public comment.

#### §465.13. Personal Problems, Conflicts and Dual Relationships

(a) In General.

(1) Licensees refrain from providing services when they know or should know that their personal problems or a lack of objectivity are likely to impair their competency or harm a patient, client, colleague, student, supervisee, research participant, or other person with whom they have a professional relationship.

(2) Licensees seek professional assistance for any personal problems, including alcohol or substance abuse likely to impair their competency.

(3) Licensees do not exploit persons over whom they have supervisory evaluative, or other authority such as students, supervisees, employees, research participants, and clients or patients.

(4) Licensees refrain from entering into or withdraw from any professional relationship that conflicts with their ability to comply with all Council rules applicable to other existing professional relationships.

(b) Dual Relationships.

(1) A licensee must refrain from entering into a dual relationship with a client, patient, supervisee, student, group, organization, or any other party if such a relationship is likely to impair the licensee's objectivity, prevent the licensee from providing competent psychological services, or exploit or otherwise cause harm to the other party.

(2) A licensee must refrain from entering into or withdraw from a professional relationship where personal, financial, or other relationships are likely to impair the licensee's objectivity or pose an unreasonable risk of harm to a patient or client.

(3) A licensee who is considering or involved in a professional or non-professional relationship that could result in a violation of this rule must take appropriate measures, such as obtaining professional consultation or assistance, to determine whether the licensee's relationships, both existing and contemplated, are likely to impair the licensee's objectivity or cause harm to the other party.

(4) Licensees do not provide psychological services to a person with whom they have had a sexual relationship.

(5) Licensees do not terminate psychological services with a person in order to have a sexual relationship with that person. Licensees do not terminate psychological services with a person in

order to have a sexual relationship with individuals who the licensee knows to be the parents, guardians, spouses, significant others, children, or siblings of the client.

465.18. Forensic Services.

Action: Proposed Amendment

Comment: Rule changes reflect the changes recommend by public comment.

§465.18. Forensic Services.

(a) In General.

(1) A licensee who provides services concerning a matter which the licensee knows or should know will be utilized in a legal proceeding, such as a divorce, child custody determination, fitness for duty evaluation for high risk personnel, disability claim, or risk assessment evaluations of employees, must comply with all applicable Council rules concerning forensic services regardless of whether the licensee is acting as a factual witness or an expert.

(2) Licensees who engage in forensic services must have demonstrated appropriate knowledge of and competence in all underlying areas of psychology about which they provide such services.

(3) All forensic opinions, reports, assessments, and recommendations rendered by a licensee must be based on information and techniques sufficient to provide appropriate substantiation for each finding.

(4) When appointed or designated in writing by a court to provide psychological services, a licensee shall obtain and keep a copy of the court order.

(5) When providing forensic psychological services to a minor who is the subject of a court order or the ward of guardianship, a licensee shall obtain and keep a copy of the relevant portions of any court order, divorce decree, or letters of guardianship authorizing the individual to provide substitute consent on behalf of the minor or ward.

(b) Limitation on Services.

(1) A licensee who is asked to provide an opinion concerning an area or matter about which the licensee does not have the appropriate knowledge and competency to render a professional opinion shall decline to render that opinion.

(2) A licensee who is asked to provide an opinion concerning a specific matter for which the licensee lacks sufficient information to render a professional opinion shall decline to render that opinion unless the required information is provided.

(3) A licensee shall not render a written or oral opinion about the psychological characteristics of an individual without conducting an examination of the individual unless the opinion contains a statement that the licensee did not conduct an examination of the individual.

(4) A written or oral opinion about the psychological characteristics of an individual rendered by a licensee who did not conduct an examination of that individual must contain



clarification of the extent to which this limits the reliability and validity of the opinion and the conclusions and recommendations of the licensee.

(5) When seeking or receiving court appointment or designation as an expert for a forensic evaluation a licensee specifically avoids accepting appointment or engagement for both evaluation and therapeutic intervention for the same case. A licensee provides services in one but not both capacities in the same case.

(c) Describing the Nature of Services. A licensee must document in writing that subject(s) of forensic evaluations or their parents or legal representative have been informed of the following:

- (1) The nature of the anticipated services (procedures);
- (2) The specific purpose and scope of the evaluation;
- (3) The identity of the party who requested the psychologist's services;
- (4) The identity of the party who will pay the psychologist's fees and if any portion of the fees is to be paid by the subject, the estimated amount of the fees;
- (5) The type of information sought and the uses for information gathered;
- (6) The people or entities to whom psychological records will be distributed;
- (7) The approximate length of time required to produce any reports or written results;
- (8) Applicable limits on confidentiality and access to psychological records;
- (9) Whether the psychologist has been or may be engaged to provide testimony based on the report or written results of forensic psychological services in a legal proceeding; and
- (10) The licensee's name as it appears in their professional file with the Council prior to initiating services.

(d) Certain Testimony Prohibited.

- (1) A licensee may not offer an expert opinion or recommendation relating to the conservatorship of or possession of or access to a child unless the licensee has conducted a child custody evaluation.
- (2) In a contested suit, a licensee may provide other relevant information and opinions, other than those prohibited by paragraph (1) of this subsection, relating to any party that the licensee has personally evaluated or treated.

(3) This subsection does not apply to a suit in which the Department of Family and Protective Services is a party.

(e) Child Custody Evaluations.

- (1) The role of the child custody evaluator is one of professional expert. A licensee serving as a child custody evaluator shall not function as an advocate, but must remain impartial and

objective. Licensees conducting child custody evaluations, including those licensees appointed by a court, are subject to the Council's jurisdiction and must follow all applicable Council rules.

(2) The term "supervision" as used in this subsection shall have the meaning assigned by §107.101 of the Family Code. However, the term shall not encompass the restrictions and requirements set forth in §465.2 of this title (relating to Supervision) nor shall a licensee providing supervision under this subsection have supervisory responsibility under that same rule.

(3) Minimum Qualifications of Child Custody Evaluator.

(A) A licensee must be qualified to conduct a child custody evaluation pursuant to §107.104 of the Family Code before the licensee may conduct an evaluation. Licensees qualified to conduct evaluations under §107.104(b)(2) must conduct evaluations under supervision in accordance with that section.

(B) Notwithstanding any other grounds for qualification, the Council has determined that a licensed psychologist is qualified to conduct child custody evaluations if the licensee:

(i) has obtained a minimum of 8 professional development hours directly related to the performance of child custody evaluations since becoming a licensed psychologist, and is board certified in forensic psychology by the American Board of Professional Psychology (ABPP); or

(ii) has obtained a minimum of 40 professional development hours directly related to the performance of child custody evaluations since becoming a licensed psychologist, and has conducted at least three child custody evaluations under the supervision of a qualified licensee.

(C) A licensee who does not meet the minimum qualification requirements set forth in §107.104 of the Family Code, may nevertheless conduct a child custody evaluation if:

(i) appointed to do so pursuant to §107.106 of the Family Code. A licensee appointed under §107.106 must comply with the provisions of Subchapter D of the Family Code and this rule; or

(ii) the individual is licensed as a psychologist, and has completed at least ten social studies or other child custody evaluations ordered by a court in suits affecting the parent-child relationship prior to September 1, 2015.

(D) If requested by a court, a licensee selected to conduct or who is conducting a child custody evaluation must demonstrate appropriate knowledge and competence in child custody evaluation services consistent with professional models, standards, and guidelines.

(E) In addition to the minimum qualifications set forth by this rule, an individual must complete at least eight hours of family violence dynamics training provided by a family violence service provider to be qualified to conduct child custody evaluations.

(4) Disclosure of Conflicts and Bias.

(A) Licensees shall comply with all disclosure requirements set forth in §107.107 of the Family Code.

(B) Following any disclosure required by §107.107(c), a licensee must resign as child custody evaluator, unless:

- (i) the court finds that no conflict of interest exists and that any previous knowledge of a party or child who is the subject of the suit is not relevant; or
- (ii) the parties and any attorney for a child who is the subject of the suit agree in writing to the licensee's continued appointment as the child custody evaluator.

(C) Except as authorized by §107.107(f), licensees may not accept appointment as a child custody evaluator if they have worked in a professional capacity with a party, a child who is the subject of the suit, or a member of the party's or child's family. The term "family" as used in this subpart has the meaning assigned by §71.003 of the Family Code.

(5) Elements of Child Custody Evaluation.

(A) Licensees shall comply with §§107.108, 107.109, and 107.1101 of the Family Code when conducting child custody evaluations.

(B) Licensees may conduct psychometric testing as part of a child custody evaluation in accordance with §107.110 of the Family Code.

(6) Communications and Recordkeeping of Child Custody Evaluator.

(A) Licensees shall comply with the requirements of §107.112 of the Family Code regarding:

- (i) the disclosure of communications between evaluation participants;
- (ii) the creation and retention of records relevant to the evaluation; and
- (iii) access to evaluation records.

(B) Licensees conducting child custody evaluations shall maintain the confidentiality of records obtained from the Department of Family and Protective Services pursuant to §107.111 of the Family Code, as well as any records obtained pursuant to §107.1111. Licensees may not disclose any information obtained from the records except as required or allowed by law. Failure to maintain confidentiality as required by law will result in disciplinary action against a licensee.

(7) Evaluation Report.

(A) A licensee who conducts a child custody evaluation shall prepare and file a report in accordance with §107.113 of the Family Code.

(B) A licensee shall provide a copy of any report filed with the Court in accordance with §107.114 of the Family Code.

(f) Adoption Evaluations.

(1) The role of the adoption evaluator is one of professional expert. A licensee serving as an adoption evaluator shall not function as an advocate, but must remain impartial and objective.

Licenseses conducting adoption evaluations, including those licenseses appointed by a court, are subject to the Council's jurisdiction and must follow all applicable Council rules.

(2) Minimum Qualifications of Adoption Evaluator.

(A) A licensee must be qualified to conduct an adoption evaluation pursuant to §107.154 of the Family Code before the licensee may conduct an evaluation.

(B) Licenseses qualified to conduct a child custody evaluations are also qualified to conduct adoption evaluations.

(C) A licensee who does not meet the minimum qualification requirements set forth in §107.154, may nevertheless conduct an adoption evaluation if:

(i) appointed to do so pursuant to §107.155 of the Family Code. A licensee appointed under §107.155 must comply with the provisions of Subchapter E of the Texas Family Code and this rule; or

(ii) the individual is licensed as a psychologist, and has completed at least ten social studies or other child custody evaluations ordered by a court in suits affecting the parent-child relationship prior to September 1, 2015.

(3) Disclosure of Conflicts and Bias.

(A) Licenseses shall comply with all disclosure requirements set forth in §107.156 of the Family Code.

(B) Following any disclosure required by §107.156(c), a licensee must resign as adoption evaluator, unless:

(i) the court finds that no conflict of interest exists and that any previous knowledge of a party or child who is the subject of the suit is not relevant; or

(ii) the parties and any attorney for a child who is the subject of the suit agree in writing to the licensee's continued appointment as the adoption evaluator.

(C) Except as authorized by §107.156(e) of the Family Code, licenseses may not accept appointment as an adoption evaluator if they have worked in a professional capacity with a party, a child who is the subject of the suit, or a member of the party's or child's family. The term "family" as used in this subpart has the meaning assigned by §71.003 of the Family Code.

(4) A licensee shall report to the Department of Family and Protective Services any adoptive placement that appears to have been made by someone other than a licensed child-placing agency or a child's parent or managing conservator.

(5) Licenseses shall comply with §§107.158, 107.159, and 107.160 of the Family Code when conducting adoption evaluations.

(6) Licenseses conducting adoption evaluations shall maintain the confidentiality of records obtained from the Department of Family and Protective Services pursuant to §107.163 of the

Family Code. Licensees may not disclose any information obtained from the records except as required or allowed by law. Failure to maintain confidentiality as required by §107.163 of the Family Code will result in disciplinary action against a licensee.

(g) Duty to Report Complaints. Licensees must report any complaint filed against them that alleges facts tending to show a violation of this rule in connection with a child custody or adoption evaluation. The report must be made to the court that ordered the evaluation within 30 days of receiving notice of the complaint from the Council. Only those complaints for which a licensee receives notice from the Council need to be reported.

(h) Parenting Facilitators.

(1) The title "parenting facilitator" is defined in §153.601 of the Family Code.

(2) The Council's jurisdiction over licensees who also accept engagements as parenting facilitators is limited to its enforcement of Council rules. The Family Code sets forth procedures for the qualifications, duties, appointment and removal, reporting, record retention, and compensation of parenting facilitators. The Family Code also provides procedures for disclosure of conflicts of interest by parenting facilitators.

(3) A parenting facilitator who is also a licensed psychologist in Texas is a provider of forensic psychological services and must comply with all applicable Council rules.

(4) Participants in parenting facilitation are not patients as defined in these rules and in Texas Health and Safety Code §611.001. Records created during parenting facilitation are not confidential.

(5) Parenting facilitators must comply with §§153.6061 and 153.6101 of the Family Code as to duties and qualifications, and with the "Guidelines for Parenting Coordination" published by the Association of Family and Conciliation Courts.

(6) The following psychologist-parenting facilitator practice standards are set forth consistent with §153.6101 of the Family Code:

(A) Parenting facilitators licensed by the Council shall comply with the standard of care applicable to the license to practice psychology in Texas.

(B) Psychologist-parenting facilitators meet all requirements of §153.6101 of the Family Code, including active licensure to practice as a psychologist in Texas; completion of 8 hours of family violence dynamics training provided by a family violence service provider; 40 classroom hours of training in dispute resolution techniques in a course conducted by an alternative dispute resolution system or other dispute resolution organization approved by the court; 24 classroom hours of training in the fields of family dynamics, child development, and family law; and 16 hours of training in the laws governing parenting coordination and parenting facilitation and the multiple styles and procedures used in different models of service.

465.20. Research.

Action: Proposed Amendment

Comment: Rule changes reflect the changes recommend by public comment.

§465.20. Research.

(a) Conducting Research.

(1) Licensees who conduct research involving human research participants must obtain informed consent which includes risks, discomfort, adverse effects, limitations on confidentiality including anticipated sharing or use of personally identifiable research data and of the possibility of unanticipated future uses, as well as any aspects about which the prospective participants inquire.

(2) Licensees shall conduct all research involving animals in a humane manner which minimizes the discomfort, infection, illness and pain of animal subjects. A procedure subjecting animals to pain, stress or privation is used only when an alternative procedure is unavailable and the goal is justified by its prospective scientific, education or applied value.

(b) Research results.

(1) Psychologists do not fabricate data or falsify results in their publications.

(2) Licensees who discover significant errors in their published data take all reasonable steps to correct such errors.

(3) Licensees do not present substantial portions or elements of another individual's research work or data as their own.

(4) Licensees take responsibility and credit, including authorship credit, only for work they have actually performed or to which they have contributed.

Rule: 465.38. Psychological Services for Schools.  
Action: Proposed Amendment  
Comment: Rule changes reflect the changes recommend by public comment.

§465.38. Psychological Services for Schools.

(a) This rule acknowledges the unique difference in the delivery of school psychological services in public and private schools from psychological services in the private sector. The Council recognizes the purview of the State Board of Education and the Texas Education Agency in safeguarding the rights of school children in Texas. The mandated multidisciplinary team decision making, hierarchy of supervision, regulatory provisions, and past traditions of school psychological service delivery both nationally and in Texas, among other factors, allow for rules of practice in public and private schools which reflect these occupational distinctions from the private practice of psychology.

(b) Scope of Practice.

(1) An LSSP is a person who is trained to address psychological and behavioral problems manifested in and associated with educational systems by utilizing psychological concepts and methods in programs or actions which attempt to improve the learning, adjustment and behavior of students. Such activities include, but are not limited to, addressing special education eligibility, conducting manifestation determinations, and assisting with the development and implementation of individual educational programs, conducting behavioral assessments, and designing and implementing behavioral interventions and supports.

(2) The assessment of emotional or behavioral disturbance, solely for educational purposes, using psychological techniques and procedures is considered the practice of school psychology.

(3) The delivery of school psychological services in the public schools of this state shall be consistent with nationally recognized standards for the practice of school psychology. Licensees providing school psychological services in a private school should comply with those same nationally recognized standards where possible, but at a minimum, must comply with all applicable Council rules, including those related to informed consent, notification of the right to file a complaint, competency, forensic services, and misuse of services.

(c) The specialist in school psychology license permits the licensee to provide school psychological services only in public and private schools. A person utilizing this license may not provide psychological services in any context or capacity outside of a public or private school.

(d) The correct title for an individual holding a specialist in school psychology license is Licensed Specialist in School Psychology or LSSP. An LSSP who has achieved certification as a Nationally Certified School Psychologist (NCSP) may use this credential along with the license title of LSSP.

(e) Providers of Psychological Services Within the Public Schools.

(1) School psychological services may be provided in Texas public schools only by individuals authorized by this Council to provide such services. Individuals who may provide such school psychological services include:

(A) LSSPs;

(B) Those individuals listed in §463.11; and

(C) Individuals seeking to fulfill the licensing requirements of §463.10 of this title (relating to Licensed Psychological Associate) or §463.12 of this title (relating to Licensed Psychologist).

(2) Licensees who do not hold the specialist in school psychology license may contract for specific types of psychological services, such as clinical psychology, counseling psychology, neuropsychology, and family therapy, but any such contracting may not involve the broad range of school psychological services listed in subsection (b)(1) of this section.

(3) An LSSP who contracts with a school to provide school psychological services must notify the school of any intent or plan to subcontract or assign those services to another provider prior to entering into the agreement. An LSSP subject to this provision shall be responsible for ensuring the school psychological services delivered comply with subsection (b)(3) section.

(f) Compliance with Applicable Education Laws. LSSPs shall comply with all applicable state and federal laws affecting the practice of school psychology, including, but not limited to:

(1) Texas Education Code;

(2) Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. §1232g;

(3) Individuals with Disabilities Education Improvement Act (IDEIA), 20 U.S.C. §1400 et seq.;

(4) Texas Public Information Act, Texas Government Code, Chapter 552;

(5) Section 504 of the Rehabilitation Act of 1973;

(6) Americans with Disabilities Act (ADA) 42 U.S.C. §12101; and

(7) HIPAA when practicing in a private school.

(g) Informed Consent in a Public School. Informed consent for a Licensed Specialist in School Psychology must be obtained in accordance with the Individuals with Disabilities Education Improvement Act (IDEIA) and the U.S. Department of Education's rules governing parental consent when delivering school psychological services in the public schools, and is considered to meet the requirements for informed consent under Board rules. No additional informed consent, specific to any Council rules, is necessary in this context. Licensees providing psychological services under subsection (e)(2) of this section, or in a private school however, must obtain informed consent as otherwise required by the Council rules.



§463.40.      *Licensing of Persons with Criminal Convictions.*

- (a)    The following felonies and misdemeanors directly relate to the duties and responsibilities of a licensee:
- (1)    offenses listed in Article 42A.054 of the Code of Criminal Procedure;
  - (2)    a sexually violent offense, as defined by Article 62.001 of the Code of Criminal Procedure;
  - (3)    any felony offense wherein the judgment reflects an affirmative finding regarding the use or exhibition of a deadly weapon;
  - (4)    any criminal violation of Chapter 501 (Psychologists' Licensing Act) of the Occupations Code;
  - (5)    any criminal violation of Chapter 35 (Insurance Fraud) or Chapter 35A (Medicaid Fraud) of the Penal Code;
  - (6)    any criminal violation involving a federal health care program, including 42 USC Section 1320a-7b (Criminal penalties for acts involving Federal health care programs);
  - (7)    any offense involving the failure to report abuse or neglect;
  - (8)    any state or federal offense not otherwise listed herein, committed by a licensee while engaged in the practice of psychology;
  - (9)    any criminal violation of Section 22.041 (abandoning or endangering a child) of the Penal Code;
  - (10)   any criminal violation of Section 21.15 (invasive visual recording) of the Penal Code;
  - (11)   any criminal violation of Section 43.26 (possession of child pornography) of the Penal Code;
  - (12)   any criminal violation of Section 22.04 (injury to a child, elderly individual, or disabled individual) of the Penal Code;
  - (13)   three or more drug or alcohol related convictions within the last 10 years, evidencing possible addiction that will have an effect on the licensee's ability to provide competent services; and
  - (14)   any attempt, solicitation, or conspiracy to commit an offense listed herein.

~~§463.40. Ineligibility Due to Criminal History:~~

~~Those crimes which TSBE considers directly related to the duties and responsibilities of a licensee are:~~

- ~~(1) offenses listed in Article 42A.054 of the Code of Criminal Procedure;~~
- ~~(2) any felony offense wherein the judgment reflects an affirmative finding regarding the use or exhibition of a deadly weapon;~~
- ~~(3) any criminal violation of the Psychologists' Licensing Act;~~
- ~~(4) any criminal violation of Chapter 35 (Insurance Fraud) or Chapter 35A (Medicaid Fraud) of the Penal Code;~~
- ~~(5) any criminal violation of Chapter 32, Subchapter B (Forgery) of the Penal Code;~~
- ~~(6) any criminal violation of §32.42 (Deceptive Business Practices), §32.43 (Commercial Bribery), §32.45 (Misapplication of Fiduciary Property), §32.46 (Securing Execution of Document by Deception), §32.50 (Deceptive Preparation and Marketing of Academic Product), §32.51 (Fraudulent Use or Possession of Identifying Information), §32.52 (Fraudulent, Substandard, or Fictitious Degree), or §32.53 (Exploitation of Child, Elderly or Disabled Individual) of the Penal Code;~~
- ~~(7) any criminal violation of Chapter 37 (Perjury and Other Falsification) of the Penal Code;~~
- ~~(8) any offense involving the failure to report abuse;~~
- ~~(9) any criminal violation of §38.12 (Barratry and Solicitation of Professional Employment) of the Penal Code;~~
- ~~(10) any criminal violation involving a federal health care program, including 42 USC §1320a-7b (Criminal penalties for acts involving Federal health care programs);~~
- ~~(11) any state or federal offense not otherwise listed herein, committed by a licensee while engaged in the practice of psychology; and~~
- ~~(12) any attempt, solicitation, or conspiracy to commit an offense listed herein.~~

<b>ENFORCEMENT STATUS REPORT November 2020 Board Meeting</b>	<b>4Q FY20 Jun 1, 2020 to Aug 31, 2020</b>	<b>3Q FY20 Mar 1, 2020 to May 31, 2020</b>	<b>2Q FY20 Dec 1, 2019 to Feb 29, 2020</b>	<b>1Q FY20 Sep 1, 2019 to Nov 30, 2019</b>
Number of Pending Complaints	<b>78</b>	98	121	132
Number of New Complaints Received	<b>39</b>	30	21	39
Pending Imminent harm cases	<b>0</b>	0	0	0
Pending cases alleging Sexual Violations	<b>4</b>	6	3	4
Pending Applicant cases	<b>0</b>	0	1	3
Cases Resolved this Quarter (42 dismissals, 3 sanctions)	<b>46</b>	56	37	30
Cases dismissed by Staff	<b>42</b>	45	32	26
Cases dismissed by the Board	<b>4</b>	3	1	3
Cases reviewed at ISC this Quarter	<b>6</b>	6	6	6

#### **TOTAL PENDING CASES**

	<b>4Q FY20 (as of 08/31/2020)</b>	<b>3Q FY20 (as of 05/31/2020)</b>	<b>2Q FY20 (as of 2/29/20)</b>	<b>1Q FY20 (as of 11/30/19)</b>
2018	<b>0</b>	0	8	21
2019	<b>19</b>	35	62	72
0 # going to SOAH 2020	<b>59</b>	63	51	39
Total	<b>77</b>	98	121	132

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**Texas State Board of Examiners of Psychologists**  
**Enforcement Actions**  
**FY 2020...FINAL TOTALS**  
**09/01/2019 – 08/31/2020**

**Cases Opened**

**141** Total Substantive Case Numbers Assigned

**Cases Closed**

**174** Total Substantive

24 Disciplinary Actions = 14%

xx Substantive Disciplines

- 5 Administrative Penalty
- 3 Reprimand total
- 0 Reprimand with Probation
- 7 Suspend/Probate
- 0 Suspend
- 1 Revoked
- 6 Eligibility Orders
- 1 Resigned
- 1 Restricted Practice

150 Dismissed = 86%

137 Substantive Dismissed

13 Cease and Desist Dismissed

24 Cases went to ISC

- 0 Forensic Child Custody
- 0 General Forensic
- 14 General Administrative
- 4 General Therapy
- 0 School Psychological Services
- 6 Sexual Misconduct

**TSBEP Complaint No. 2020-00031-3449**

<b>IN THE MATTER OF</b>	<b>§</b>	<b>BEFORE THE TEXAS STATE BOARD</b>
	<b>§</b>	
	<b>§</b>	<b>OF</b>
	<b>§</b>	
<b>DR. MICHAEL J. TELCH, PH.D.</b>	<b>§</b>	<b>EXAMINERS OF PSYCHOLOGISTS</b>

**AGREED ORDER**

Pursuant to its authority under §501.410 of the Psychologists' Licensing Act (the Act) and §2001.056 of the Government Code, the Texas State Board of Examiners of Psychologists (the Board) hereby approves, ratifies, and enters this Agreed Order for Eligibility with the following Findings of Fact, Conclusions of Law, and Order of the Board, which have been approved and accepted by **Dr. Michael J. Telch, Ph.D.** (Respondent).

**FINDINGS OF FACT**

1. Respondent is a psychologist in the State of Texas (#23316) and therefore subject to the jurisdiction of the Board under the Act.
2. Complainant was a patient.
3. Respondent associated with the Complainant outside of normal treatment which exceeded acceptable professional boundaries.
4. Respondent failed to only provide psychological services in the context of a defined professional relationship.
5. Respondent failed to create and maintain accurate, current, and pertinent records of all psychological services rendered.

**CONCLUSIONS OF LAW**

1. Respondent possesses a license with the Board and, therefore, is bound by the provisions of the Act (Tex. Occ. Code Ch. 501) and the Rules of the Board (22 Tex. Admin. Code pt. 21).
2. Respondent's acts constitute a violation of Board Rules 465.13 (b) (1), and (b) (3), 465.8, and 465.22 (a).
3. This Agreed Order is a Settlement Agreement under the Texas Rules of Evidence and is not admissible for the purposes of civil litigation. By entering into this Agreed Order, Respondent does not admit the foregoing Findings of Fact or Conclusions of Law, but agrees to resolve this matter to avoid the expense and uncertainty of further proceedings.

**IT IS HEREBY ORDERED, ADJUDGED, AND DECREED THAT:**

1. Respondent is assessed and, within thirty (30) days of the effective date of this order, shall pay an administrative penalty in the total amount of \$1,200.00; of which \$1000.00 represents administrative costs and \$200.00 represents administrative penalty.
2. Respondent's license is hereby REPRIMANDED.
3. Respondent, within ninety (90) days of the effective date of this order, shall acquire preapproval of and complete and submit proof of completion of six (6) hours of professional development with three (3) hours relating to boundaries and three (3) hours relating to record keeping.
4. Respondent shall not contact Complainant.

**WARNING**

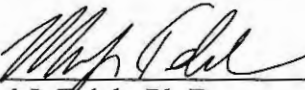
**RESPONDENT'S FAILURE TO COMPLY WITH ONE OR MORE TERMS OF THIS ORDER MAY CONSTITUTE A VIOLATION OF RULE 461.15, REQUIRING FURTHER DISCIPLINARY ACTION.**

**WAIVERS**

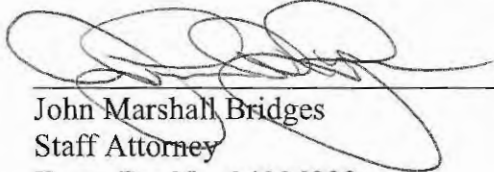
Respondent has freely and voluntarily waived his or her right to a formal hearing before an Administrative Law Judge at the State Office of Administrative Hearings (SOAH), and judicial review pursuant to Tex. Gov't Code Ann., Ch. 2001, in exchange for the conditions set out in this Agreed Order.

THE RESPONDENT, BY SIGNING THIS ORDER, AGREES TO ITS TERMS, ACKNOWLEDGES UNDERSTANDING OF AND AGREEMENT WITH THE FORMAL NOTICES, FINDINGS OF FACT, AND CONCLUSIONS OF LAW SET FORTH HEREIN AND COVENANTS TO SATISFACTORILY COMPLY WITH THE MANDATES OF THIS ORDER IN A TIMELY MANNER. RESPONDENT FURTHER ACKNOWLEDGES AND AGREES THAT HE OR SHE HAS AGREED TO THIS ORDER UPON THE ADVICE AND CONSENT OF COUNSEL, OR THAT HE OR SHE HAS HAD THE OPPORTUNITY TO HAVE THIS ORDER REVIEWED BY COUNSEL OF HIS OR HER CHOICE.

FOR THE RESPONDENT:

  
Michael J. Telch, Ph.D.  
2329 Westlake Dr. Unit 4  
Austin, TX 78746


FOR THE STAFF OF THE BOARD:

  
John Marshall Bridges  
Staff Attorney  
Texas Bar No. 24006898  
Texas State Board of Examiners of  
Psychologists  
333 Guadalupe, Ste. 2-450  
Austin, Texas 78701

DATE SIGNED: 09/15/2020

DATE SIGNED: 16 Sept 2020

APPROVED, RATIFIED, AND ENTERED THIS 26<sup>th</sup> DAY OF September, 2020.

  
~~Tim F. Branaman, Ph.D.~~ Darrel Spinks  
~~Chair, Texas State Board of Examiners of~~  
~~Psychologists~~  
Executive Director  
Texas Behavioral Health Executive Council