TEXAS STATE BOARD OF EXAMINERS OF PSYCHOLOGISTS



John Bielamowicz, Chair

MEMBERS OF THE BOARD

Ronald S. Palomares, Ph.D., Vice-chair Herman B. Adler, M.A. Ryan T. Bridges Jamie Becker, Ph.D. Jeanette Deas Calhoun, Ph.D. Susan Fletcher, Ph.D. Sangeeta Singg, Ph.D. Andoni Zagouris, M.A.

Diane Moore Board Administrator

Texas State Board of Examiners of Psychologists Meeting Agenda May 13, 2021, 10:00 a.m. Video Conference via Zoom

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 May 13, 2021 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://us02web.zoom.us/j/86545040107 into their web browser or by calling (346) 248-7799 and entering the webinar ID 865 4504 0107. 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 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 open.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 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.

In the event Governor Greg Abbott's March 13, 2020 disaster declaration is not renewed or expires prior to May 13, 2021, 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

*Topic requiring either agency action or discussion.

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 13th 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, 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.

Meeting Agenda for May 13, 2021, 10:00 am

- 1. Call to Order Roll Call (*Bielamowicz, Chair*)
- 2. Public Comments Public comment is limited to three (3) minutes per individual, unless otherwise directed by the Board Chair.
- 3. Approval of Minutes*
- 4. Chair's Report (Bielamowicz)
 - A. Discussion on Future Board Meetings
- 5. Board Administrator Report (*Moore*)
 - A. Council Report FY 2021-Q2 Measures Report
 - B. Section 2002 of HR7105 Expansion of Pilot Program in VA System
 - C. Crack Down on Emotional Support Animals (State of Ohio)
 - D. PSYPACT Update
 - E. ASPPB Update
 - i. Mobility Program Missing Documentation Affidavit
 - ii. Modifications of Accreditation Processes
 - iii. Response to article published in American Psychologist regarding EPPP (Part 2 Skills)
 - iv. Mid-Year Meeting Recap (Palomares)
- 6. Enforcement Division
 - A. Enforcement Staff:
 - i. Review of Dismissals by Executive Director and Staff (Fernandez)
 - ii. Status Reports FY 2021–2ND Quarter (*Moore*)
 - iii. Changes to Projected Time Schedules (Fernandez)
 - iv. Discussion on ISC Panels* (Bridges)
 - *Topic requiring either agency action or discussion.

- iii. Changes to Projected Time Schedules (Fernandez)
- iv. Discussion on ISC Panels* (Bridges)
- v. Dismissals for Board ratification* (Fernandez / Bridges)

B. Agency Counsel:

- i. Review of Agreed Orders Approved by Executive Director (Bridges)
- ii. Agreed Orders for Board Ratification* (Bridges)
- iii. Review of Contested Cases from the State Office of Administrative Hearings (SOAH)* (Bridges)

7. Committee Reports

- A. Applications Committee (Adler / Palomares)
 - i. Appeal of Application Denial* (Per 22 TAC 882.3(b))
 - ii. Application(s) for Licensure*
- B. Compliance Committee (Fletcher / Singg)
 - i. Review of Compliance with Agreed Orders
- C. Jurisprudence Examination Committee (Fletcher)
- D. Rules Committee (Becker, Calhoun, and Palomares)
 - i. New Rules or Proposed Rule Changes Being Considered for Recommendation to the Executive Council*
 - a. 463.11, Supervised Experience Required for Licensure as a Psychologist
 - b. 465.13, Personal Problems, Conflicts and Dual Relationships
 - ii. Rules Published in the Texas Register and Awaiting Adoption Recommendations*
- 8. Review Public Comments TSBEP Social Media Use and Electronic Communications Guidelines*
- 9. Recommendations for agenda items for the next Board meeting
- 10. Adjournment

^{*}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: May 13, 2021 10:00 AM Central Time (US and Canada)

Topic: Texas State Board of Examiners of Psychologists May 13, 2021 Board Meeting

Please click the link below to join the webinar:

https://us02web.zoom.us/j/86545040107

Or One tap mobile:

US: +13462487799,,86545040107# or +16699009128,,86545040107#

Or Telephone:

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

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

Webinar ID: 865 4504 0107

International numbers available: https://us02web.zoom.us/u/kdlQRI3xfK

TEXAS STATE BOARD OF EXAMINERS OF PSYCHOLOGISTS



MEMBERS OF THE BOARD

John Bielamowicz, Chair

Ronald S. Palomares, Ph.D., Vice-chair Herman B. Adler, M.A. Ryan T. Bridges Jamie Becker, Ph.D. Jeanette Deas Calhoun, Ph.D. Susan Fletcher, Ph.D. Sangeeta Singg, Ph.D. Andoni Zagouris, M.A.

Darrel D. Spinks Executive Director

Diane Moore Board Administrator

Texas State Board of Examiners of Psychologists

MINUTES

February 11, 2021

The Texas State Board of Examiners of Psychologists met via Zoom video conference on February 11, 2021. The following Board members were in attendance: John Bielamowicz, Chair; Ronald Palomares, Ph.D., Vice-Chair; Ryan Bridges; Jamie Becker, Ph.D.; Susan Fletcher, Ph.D.; Jeanette Deas Calhoun, Ph.D.; Sangeeta Singg, Ph.D.; Herman Adler, M.A. and Andoni Zagouris, M.A. Also, in attendance was Darrel Spinks, Executive Director, and Diane Moore, Board Administrator.

- 1. The meeting was called to order at 10:06 a.m. by Mr. Bielamowicz
- 2. The Board moved into Item II, Public Comments:
 - A. Sandra Martin spoke regarding looking forward to getting to know the Council and the Board.
 - B. Carol Grothues spoke regarding the value of receiving input from stakeholders and welcomed new board members
- 3. The Board moved into Item III, Meeting Minutes.

A MOTION WAS MADE BY DR. PALOMARES AND SECONDED BY DR. FLETCHER TO APPROVE THE MINUTES OF THE NOVEMBER 19, 2020 BOARD MEETING AS SUBMITTED, MR. BRIDGES WAS ABSENT FOR THE VOTE, THE MOTION CARRIED.

- 4. The Board moved into Item IV, Vice-Chair's Report Mr. Bielamowicz
 - A. Mr. Bielamowicz thanked the board members and public for being here today. Mr. Bielamowicz recognized past chair Dr. Branaman for all his years of service of over a decade of leadership on this Board. In addition, Mr. Bielamowicz thanked Ms. Downes and Dr. Mock for their service on the Board.

- B. Mr. Bielamowicz welcomed new board members Dr. Becker, Dr. Calhoun, and Dr. Singg.
- 5. The Board moved into Item V, the Board Administrator's Report Ms. Moore.
 - A. TSBEP Measures Report 1st Quarter Ms. Moore presented the first quarter measure report.
 - B. Executive Order Increasing Economic and Geographic Mobility Ms. Moore informed the Board that the Executive Order Increasing Economic and Geographic Mobility will reduce the burden of occupational regulations in order to promote the free practice of commerce, lower consumer costs, and increase economic and geographic mobility, which includes military spouse.
 - C. Society for the Advancement of Psychotherapy Ms. Moore shared the letter from the Society for the Advancement of Psychotherapy regarding the EPPP with the Board.
 - D. PSYPACT Update Ms. Moore reported that seven states have introduced legislation for inter-jurisdictional practice. Currently there are fifteen states participating in the PSYPACT.
- 6. The Board moved into Item VI, Enforcement Matters and Report from General Counsel.
 - A. Mr. Fernandez presented the cases dismissed by the Board Staff:
 - i. 2019-00039-4017;
 - ii 2019-00099-3057;
 - iii. 2019-00102-6595;
 - B. Ms. Moore presented the enforcement Status Report for the first quarter.
 - C. Mr. Fernandez discussed the Projected Time Schedule none.
 - D. Dismissal recommendations for Board ratification none.
 - E. Discussion of selection and makeup of ISC Panels The Board discussed the makeup of the ISC Panel historically included a public member, and two professional members. Mr. Hyde stated that the ISC Panel makeup is no longer required, due to statutory changes. Under BHEC rule, staff can do the ISC. Mr. Hyde further explained the new process for the ISC Panel will no longer be quarterly, but will be called upon via ad-hoc, on an as needed basis. This new method will allow the staff to address cases more quickly. The maximum number of board members that can serve on an ISC Panel is three board members, however one professional Board Member is helpful to have at the ISC. The Board's consensus is to move to the on-call ad-hoc ISC meetings. In addition, it is the Board's consensus to keep three board members on the panel. Dr. Palomares noted that the

Board should keep a LSSP on call when needed on the ISC Panel. The Board will keep a rotating list of Board members for the ISC Panel. The ISC Panel list for September will be Dr. Fletcher, Mr. Zagouris, and Dr. Calhoun. The December 2021 panel list will be Dr. Becker, Mr. Adler, and Mr. Bielamowicz.

- F. Dismissals for Board Ratification none
- G. Agreed Orders for the Board's approval none
- 7. The Board moved into Item VII, Committee Reports none
 - A. Applications Committee
 - i. Applications Denial Appeal (two files)
 - a. The Board reviewed the denial appeal request for Velma Jean Stanley.

A MOTION WAS MADE BY DR. PALOMARES AND SECONDED BY MR. ZAGOURIS TO TABLE THE APPLICATION. THE VOTE WAS UNANIMOUS. THE MOTION CARRIED.

The Board recessed for a break at 12:15 p.m.

The Board reconvened from a break at 12:26 p.m.

b. The Board reviewed the denial appeal request for Leslie James Kelley. Mr. Bridges confirmed that applicant completed an APPIC Internship and the applicant's academic program was APA Accredited.

A MOTION WAS MADE BY DR. PALOMARES AND SECONDED BY MR. ZAGOURIS TO ALLOW DR. KELLY TO CONTINUE HIS CURRENT SUPERVISION FOR HIS POST DOCTORAL HOURS AND WHEN HE REACHES THE 1750 HOURS, HE SUBMITS THE DOCUMENTATION TO THE BOARD UNDER THIS LICENSE AND HAVE IT REVIEWED AT THAT TIME AND HAVE HIS APPLICATION ACTED ON. THE VOTE WAS UNANIMOUS. THE MOTION CARRIED.

- B. Compliance Committee none
 - i. Review Compliance with Agreed Orders none
- C. Jurisprudence Committee none
- D. The Board reviewed the Proposed Rules:
 - i. Update on Rules submitted to the Council none
 - ii. The Board reviewed the Proposed Rule Changes:

a. §463.9, Licensed Specialist in School Psychology- Repeal Trainee Status language.

A MOTION WAS MADE BY DR. FLETCHER AND SECONDED BY MR. ADLER TO ACCEPT THE PROPOSED CHANGES AS STATED. THE VOTE CARRIED.

b. §465.2, Supervision.

A MOTION WAS MADE BY MR. BRIDGES AND SECONDED BY MR ADLER TO ACCEPT THE PROPOSED CHANGES AS STATED. THE VOTE CARRIED.

c. §465.38, Psychologist Services for Schools.

A MOTION WAS MADE BY DR. FLETCHER AND SECONDED BY MR. BRIDGES TO ACCEPT THE PROPOSED CHANGES WITH THE FIRST OPTION FOR PART B AS DISCUSSED. THE VOTE CARRIED.

- 8. The Board moved to item VIII, Old Business none
- 9. The Board moved into Item IX, New Business.
 - A. Election of Vice-Chair

A MOTION WAS MADE BY DR. FLETCHER AND SCONDED BY MR. BRIDGES TO RE-ELECT DR RONALD PALOMARES AS THE VICE-CHAIR. THE VOTE WAS UNANIMOUS. MOTION CARRIED.

- B. The Board discussed the frequency of establishing the schedule for reviewing committee assignments. The Board will keep the schedule for committee assignments every two years.
- C. Committee Assignments
 - i. Applications Committee Mr. Adler and Dr. Palomares
 - ii. Compliance Committee Dr. Fletcher and Dr. Singg
 - iii. Jurisprudence Committee Dr. Fletcher
 - iv. Rules Committee Dr. Palomares, Dr. Becker, and Dr. Calhoun
 - v. Personnel Committee This committee is no longer needed since personnel matters are handled under the Council.
- D. Discussion on whether to transition from written meeting minutes to audio or video recordings of open meetings. The Board elected to utilized audio recordings and video for meeting minutes in lieu of written minutes.

- E. Discussion on future board meetings. The Board will continue to conduct meetings via Zoom due to safety concerns with the Pandemic. The Board discussed using a combination of Zoom and In-person meetings in the future.
- F. Discussion on the draft TSBEP Social Media Use and Electronic Communication Guidelines. The Board requested that the draft guideline be posted on the Board website for public comments.
- G. Dr. Palomares discussed the upcoming ASPPB Mid-Year and Annual Fall meetings. The Board will need to designate a board member to attend the upcoming meetings.

A MOTION WAS MADE BY DR. SINGG AND SECONDED BY DR. FLETCHER TO HAVE DR. PALOMARES ATTEND THE ASPPB MEETINGS ON BEHALF OF THE BOARD. THE VOTE WAS UNANIMOUS. THE MOTION CARRIED.

- 10. Agenda Item –Discussion of draft rules regarding waiver of application requirements or equivalency competency in extreme circumstances.
- 11. The meeting was adjourned at 1:41 p.m. by Mr. Bielamowicz.

2nd QUARTER PERFORMANCE MEASURES FISCAL YEAR 2021

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

by

TEXAS BEHAVIORAL HEALTH EXECUTIVE COUNCIL

March 30, 2021

Executive Director

3/30/2/ Date

86th Regular Session, Performance Reporting

Automated Budget and Evaluation System of Texas (ABEST)

Agency code: 510

Agency name: Behavioral Health Executive Council

Type/ <u>Strategy</u> /Measure	2021 Target	2021 Actual	2021 YTD	Percent of Annual Target	Target Range

Output Measures

1-1-1 LICENSING

1 # NEW LICENSEES ISSUED

Quarter 1

600.00

1,789.00

1,789.00

298.17 % *

120.00 - 180.00

Explanation of Variance: FACTORS CAUSING THE VARIANCE

The performance for this measure for the first quarter of FY 2021 exceeds its target. The Texas Behavioral Health Executive Council was created by the 86th Legislature effective 9/1/2019. However, regulatory authority over the four programs (psychologists, social workers, counselors, and marriage and family therapists) did not transfer to the Council until 9/1/2020. The performance measures for FY 2021 are those that were established for the psychology program only. Therefore, these targets are not representative of what the actual measures will be with the three additional programs.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE

In its 2022-2023 LAR, the Council has projected targets that are representative of all four regulatory programs. For this specific measure, the Council has projected that it will issue 7,000 new licenses. Using this target, during this quarter the Council would have met this measure by issuing 1,789 new licenses, or 26% of the target.

^{*} Varies by 5% or more from target.

86th Regular Session, Performance Reporting

Automated Budget and Evaluation System of Texas (ABEST)

Agency code: 510

Quarter 2

Agency name: Behavioral Health Executive Council

	2021	2021	2021	Percent of	
Type/Strategy/Measure	Target	Actual	YTD	Annual Target	Target Range
Output Measures					
1 # NEW LICENSEES ISSUED					
Quarter 2	600.00	1.997.00	3,786.00	631.00 % *	270.00 - 330

Explanation of Variance: FACTORS CAUSING THE VARIANCE:

600.00

The performance for this measure for the second quarter of FY 2021 exceeds the target. The Texas Behavioral Health Executive Council was created by the 86th Legislature effective 9/1/2019. However, regulatory authority over the four programs (psychologists, social workers, counselors, and marriage and family therapists) did not transfer to the Council until 9/1/2020. The performance measures for FY 2021 are those that were established for the psychology program only. Therefore, these targets are not representative of what the actual measures will be with the three additional programs.

1,997.00

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

In its 2022-2023 LAR, the Council has projected targets that are representative of all four regulatory programs. For this specific measure, the Council has projected that it will issue 7,000 new licenses. Using this target, the Council would have met this measure by issuing 3,786 new licenses total year to date, or 54% of the target.

2 # LICENSE RENEWALS

^{*} Varies by 5% or more from target.

1,760.00 - 2,640.00

Efficiency/Output Measures with Cover Page and Update Explanation

86th Regular Session, Performance Reporting

Automated Budget and Evaluation System of Texas (ABEST)

8,907.00

101.22 % *

Agency code: 510

Quarter 1

Agency name: Behavioral Health Executive Council

Type/ <u>Strategy</u> /Measure	2021 Target	2021 Actual	2021 YTD	Percent of Annual Target	Target Rang
Output Measures					

Explanation of Variance: FACTORS CAUSING THE VARIANCE

8,800.00

The performance for this measure for the first quarter of FY 2021 exceeds its target. The Texas Behavioral Health Executive Council was created by the 86th Legislature effective 9/1/2019. However, regulatory authority over the four programs (psychologists, social workers, counselors, and marriage and family therapists) did not transfer to the Council until 9/1/2020. The performance measures for FY 2021 are those that were established for the psychology program only. Therefore, these targets are not representative of what the actual measures will be with the three additional programs.

8,907.00

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE

In its 2022-2023 LAR, the Council has projected targets that are representative of all four regulatory programs. For this specific measure, the Council has projected that it will renew 40,000 licenses. Using this target, during this quarter the Council would have met this measure by renewing 8,907 new licenses, or 23% of the target.

^{*} Varies by 5% or more from target.

86th Regular Session, Performance Reporting

Automated Budget and Evaluation System of Texas (ABEST)

Agency code: 510

Agency name: Behavioral Health Executive Council

	2021	2021	2021	Percent of	
Type/Strategy/Measure	Target	Actual	YTD	Annual Target	Target Range

Output Measures

2 # LICENSE RENEWALS

Quarter 2

8,800.00

6,750.00

15,657.00

177.92 % *

3,960.00 - 4,840.00

Explanation of Variance: FACTORS CAUSING THE VARIANCE:

The performance for this measure for the second quarter of FY 2021 exceeds the target. The Texas Behavioral Health Executive Council was created by the 86th Legislature effective 9/1/2019. However, regulatory authority over the four programs (psychologists, social workers, counselors, and marriage and family therapists) did not transfer to the Council until 9/1/2020. The performance measures for FY 2021 are those that were established for the psychology program only. Therefore, these targets are not representative of what the actual measures will be with the three additional programs.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

In its 2022-2023 LAR, the Council has projected targets that are representative of all four regulatory programs. For this specific measure, the Council has projected that it will renew 40,000 licenses. Using this target, the agency would have fallen short of this measure by renewing 15,657 licenses to date, or 40% of the target.

2-1-1 ENFORCEMENT

1 COMPLAINTS RESOLVED

^{*} Varies by 5% or more from target.

86th Regular Session, Performance Reporting

Automated Budget and Evaluation System of Texas (ABEST)

Agency code: 510

Agency name: Behavioral Health Executive Council

	2021	2021	2021	Percent of	
Type/Strategy/Measure	Target	Actual	YTD	Annual Target	Target Range
Output Measures					
1 COMPLAINTS RESOLVED					
Quarter 1	130.00	104.00	104.00	80.00 % *	26.00 - 39.

Explanation of Variance: FACTORS CAUSING THE VARIANCE

The performance for this measure for the first quarter of FY 2021 exceeds its target. The Texas Behavioral Health Executive Council was created by the 86th Legislature effective 9/1/2019. However, regulatory authority over the four programs (psychologists, social workers, counselors, and marriage and family therapists) did not transfer to the Council until 9/1/2020. The performance measures for FY 2021 are those that were established for the psychology program only. Therefore, these targets are not representative of what the actual measures will be with the three additional programs.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE

In its 2022-2023 LAR, the Council has projected targets that are representative of all four regulatory programs. For this specific measure, the Council has projected that it will resolve 800 complaints. Using this target, during this quarter the Council would not have met this measure by resolving 104 complaints, or 13%. The Council's investigators are still in a training state, trying to learn the statutes and rules of all four regulatory programs. However, the number of complaints resolved during the last month of this quarter has significantly increased to 71 from the 12 that were resolved during the first month of the quarter. Additionally, there are 1,379 complaints pending, 200 of which the investigation has been completed and sent to the legal division for review.

^{*} Varies by 5% or more from target.

86th Regular Session, Performance Reporting

Automated Budget and Evaluation System of Texas (ABEST)

Agency code: 510

Agency name: Behavioral Health Executive Council

Type/ <u>Strategy</u> /Measure	2021 Target	2021 Actual	2021 YTD	Percent of Annual Target	Target Range
Output Measures					
1 COMPLAINTS RESOLVED					
Quarter 2	130.00	120.00	224.00	172.31 % *	58.50 - 71

Explanation of Variance: FACTORS CAUSING THE VARIANCE:

The performance for this measure for the second quarter of FY 2021 exceeds the target. The Texas Behavioral Health Executive Council was created by the 86th Legislature effective 9/1/2019. However, regulatory authority over the four programs (psychologists, social workers, counselors, and marriage and family therapists) did not transfer to the Council until 9/1/2020. The performance measures for FY 2021 are those that were established for the psychology program only. Therefore, these targets are not representative of what the actual measures will be with the three additional programs.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

In its 2022-2023 LAR, the Council has projected targets that are representative of all four regulatory programs. For this specific measure, the Council has projected that it will resolve 800 complaints. Using this target, the Council would not have met this measure by resolving 224 complaints year to date, or 28% of the target. The Council's investigators and attorneys are still in a training state, trying to learn the statutes and rules of all four regulatory programs. Additionally, the Council is still trying to fill four vacant investigator positions. As of the end of this quarter, there are 1,339 complaints pending, 220 of which have since been closed and 145 of which the investigation has been completed and sent to the legal division for review.

Efficiency Measures

2-1-1 ENFORCEMENT

1 AVG TIME/COMPLAINT RESOLUTION

^{*} Varies by 5% or more from target.

86th Regular Session, Performance Reporting

Automated Budget and Evaluation System of Texas (ABEST)

Agency code: 510

Agency name: Behavioral Health Executive Council

Type/ <u>Strategy</u> /Measure	2021 Target	2021 Actual	2021 YTD	Percent of Annual Target	Target Range
Efficiency Mensures					
1 AVG TIME/COMPLAINT	RESOLUTION				

Explanation of Variance: FACTORS CAUSING THE VARIANCE:

The performance for this measure for the first quarter of FY 2021 exceeds the target. The Texas Behavioral Health Executive Council was created by the 86th Legislature effective 9/1/2019. However, regulatory authority over the four programs (psychologists, social workers, counselors, and marriage and family therapists) did not transfer to the Council until 9/1/2020. The performance measures for FY 2021 are those that were established for the psychology program only. Therefore, these targets are not representative of what the actual measures will be with the three additional programs.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

In its 2022-2023 LAR, the Council has projected targets that are representative of all four regulatory programs. For this specific measure, the Council has projected an average complaint resolution time of 800 days. Using this target, during this quarter the Council would not have met this measure with an average complaint resolution time of 1,190 days, or 149%. The Council's investigators are still in a training state, trying to learn the statutes and rules of all four regulatory programs. Additionally, there were over 1,300 pending complaints that transferred over from HHSC, some of which dated back to FY 2008. This backlog will take time to clear, and will inevitably cause a higher average complaint resolution time than originally anticipated.

^{*} Varies by 5% or more from target.

86th Regular Session, Performance Reporting

Automated Budget and Evaluation System of Texas (ABEST)

Agency code: 510

Agency name: Behavioral Health Executive Council

Type/ <u>Strategy</u> /Measure	2021 Target	2021 Actual	2021 YTD	Percent of Annual Target	Target Range
Efficiency Measures					
1 AVG TIME/COMPLAINT I	RESOLUTION				
Quarter 2	275.00	1,147.00	1,167.00	424.36 % *	261.25 - 288

Explanation of Variance: FACTORS CAUSING THE VARIANCE:

The performance for this measure for the second quarter of FY 2021 exceeds the target. The Texas Behavioral Health Executive Council was created by the 86th Legislature effective 9/1/2019. However, regulatory authority over the four programs (psychologists, social workers, counselors, and marriage and family therapists) did not transfer to the Council until 9/1/2020. The performance measures for FY 2021 are those that were established for the psychology program only. Therefore, these targets are not representative of what the actual measures will be with the three additional programs.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

In its 2022-2023 LAR, the Council has projected targets that are representative of all four regulatory programs. For this specific measure, the Council has projected an average complaint resolution time of 800 days. Using this target, during this quarter the Council would not have met this measure with an average complaint resolution time of 1,167 days, or 146% of the target. The Council's investigators and attorneys are still in a training state, trying to learn the statutes and rules of all four regulatory programs. Additionally, there were over 1,300 pending complaints that transferred over from HHSC, some of which dated back to FY 2008. This backlog will take time to clear, and will inevitably cause a higher average complaint resolution time than originally anticipated.

^{*} Varies by 5% or more from target.

H.R.7105 - Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act of 2020

ASPPB has been watching this legislation, in particular section 2002 (copied below) which may have impact on the profession of psychology and licensing boards in the US.

Regarding VA psychologists being able to provide services interjurisdictionally. It is ASPPB's understanding that under the supremacy clause, psychologists employed by the VA can provide services from one VA faculty to another facility regardless of where it was located. In other words, if a VA psychologist is licensed in one state, they could provide services to a veteran in another state without being licensed in the latter state. This allowance only applies to employed VA psychologists but not consultant psychologists or local community psychologists and until a few years ago, services had to be delivered to/from a VA facility.

In 2018, the VA adopted the Anywhere-to-Anywhere regulation to increase telehealth services and allowed for VA health care providers, such as psychologists, to provide services from anywhere to anywhere. As a result, along with providing services within a VA facility, a VA psychologist is allowed to provide services from their home office to a veteran in his/her home. It is also possible for a clinician to provide services into another state without having to be licensed in the state where the veteran is located. However, this only applies to psychologists who are employed by the VA and are not consulting psychologists or local community psychologists. Those psychologists have to follow licensing requirements of each state and are not under the supremacy rule.

H.R.7105, as it is written applies only to psychologists, physicians, physician assistants, nurse practitioners, audiologists. This regulation would expand the licensure portability of those professions for a period of 3 years, to contract with the VA to conduct medical disability examinations to address the backlog of compensation and pension (C&P) exams required for VA benefits determinations partly attributed to the temporary suspensions resulting from the COVID-19 pandemic as well as the reduction in use of VHA C&P examiners.

In addition, it appears that language would allow the VA to contract out examination services to other entities. For example, if the VA contracted with an organization to provide examination services, then that organization could hire psychologists to conduct those services. So not only are psychologists who directly contract with the VA being utilized, but now it is possible that the psychologists subcontracted with the VA are included.

ASPPB staff have had several conversations with a variety of individuals in an effort to clarify if the contracted psychologists are to be considered VA employees and if they can practice under the Anywhere-to-Anywhere supremacy clause. Unfortunately, these discussions have not provided any clear guidance on these questions.

In addition, ASPPB has reached out to leadership within the VA in hopes of them being able to share their interpretation of H.R.7105. We will keep you informed as we learn more on this issue.

SEC. 2002. MATTERS RELATING TO DEPARTMENT OF VETERANS AFFAIRS MEDICAL DISABILITY EXAMINATIONS.

- (a) Temporary Clarification of Licensure Requirements for

 Contractor Medical Professionals to Perform Medical Disability

 Examinations for the Department of Veterans Affairs Under Pilot Program

 for Use of Contract Physicians for Disability Examinations.--
 - (1) In general.--Subsection (c) of section 504 of the Veterans'
 Benefits Improvements Act of 1996 (Public Law 104-275; 38 U.S.C.
 5101 note) is amended to read as follows:
 - ``(c) Licensure of Contract Health Care Professionals.--
 - ``(1) In general.--Notwithstanding any law regarding the licensure of health care professionals, a health care professional described in paragraph (2) may conduct an examination pursuant to a contract entered into under subsection (a) at any location in any State, the District of Columbia, or a Commonwealth, territory, or possession of the United States, so long as the examination is within the scope of the authorized duties under such contract.
 - ``(2) Health care professional described.--A health care professional described in this paragraph is a physician, physician assistant, nurse practitioner, audiologist, or psychologist, who--
 - ``(A) has a current unrestricted license to practice the health care profession of the physician, physician assistant, nurse practitioner, audiologist, or psychologist, as the case maybe;
 - ``(B) is not barred from practicing such health care profession in any State, the District of Columbia, or a Commonwealth, territory, or possession of the United States;

and

- ``(C) is performing authorized duties for the Department of Veterans Affairs pursuant to a contract entered into under subsection (a).''.
- (2) Purpose. -- The purpose of the amendment made by paragraph
 (1) is to expand the license portability for physicians assistants,
 nurse practitioners, audiologists, and psychologists to supplement
 the capacity of employees of the Department to provide medical
 examinations described in subsection (b).
- (3) Rule of construction.—The amendment made by paragraph (1) shall not be construed to affect the license portability for physicians in effect under section 504(c) of such Act as in effect on the day before the date of the enactment of this Act.
- (4) Sunset.--On the date that is three years after the date of the enactment of this Act, subsection (c) of such section shall read as it read on the day before the date of the enactment of this Act.
- (b) Temporary Halt on Elimination of Medical Examiner Positions in Department of Veterans Affairs.—The Secretary of Veterans Affairs shall temporarily suspend the efforts of the Secretary in effect on the day before the date of the enactment of this Act to eliminate medical examiner positions in the Department of Veterans Affairs until the number of individuals awaiting a medical examination with respect to medical disability of the individuals for benefits under laws administered by the Secretary that are carried out through the Under Secretary for Benefits is equal to or less than the number of such individuals who were awaiting such a medical examination with respect

to such purposes on March 1, 2020.

- (c) Report on Provision of Medical Examinations. --
- (1) In general.--Not later than 180 days after the date of the enactment of this Act, the Secretary shall submit to the appropriate committees of Congress a report on the provision of medical examinations described in subsection (b) by the Department.
- (2) Contents.--The report submitted under paragraph (1) shall cover the following:
 - (A) How the Secretary will increase the capacity, efficiency, and timeliness of physician assistants, nurse practitioners, audiologists, and psychologists of the Veterans Health Administration with respect to completing medical examinations described in subsection (b).
 - (B) The total number of full-time equivalent employees among all physician assistants, nurse practitioners, audiologists, and psychologists needed for the increases described in subparagraph (A).
 - (C) An assessment regarding the importance of retaining a critical knowledge base within the Department for performing medical examinations for veterans filing claims for compensation under chapters 11 and 13 of title 38, United States Code, including with respect to military sexual trauma, post-traumatic stress disorder, traumatic brain injury, and toxic exposure.
- (3) Collaboration.--The Secretary shall collaborate with the veterans community and stakeholders in the preparation of the report required by paragraph (1).

- (4) Appropriate committees of congress defined.--In this subsection, the term ``appropriate committees of Congress'' means--
 - (A) the Committee on Veterans' Affairs and the Committee on Appropriations of the Senate; and
 - (B) the Committee on Veterans' Affairs and the Committee on Appropriations of the House of Representatives.
- (d) Comptroller General of the United States Review .--
- (1) Review required.--Not later than 360 days after the date of the enactment of this Act, the Comptroller General of the United States shall commence a review of the implementation of the pilot program authorized under subsection (a) of section 504 of the Veterans' Benefits Improvements Act of 1996 (Public Law 104-275; 38 U.S.C. 5101 note).
- (2) Elements.--The review conducted under paragraph (1) shall include the following:
 - (A) An assessment of the use of subsection (c) of section 504 of such Act, as amended by subsection (a)(1) of this section.
 - (B) Efforts to retain and recruit medical examiners as $$\operatorname{\mbox{employees}}$$ of the Department.
 - (C) Use of telehealth for medical examinations described in subsection (b) that are administered by the Department.
- (e) Briefing on Recommendations of Comptroller General of the
 United States.--Not later than 60 days after the date of the enactment
 of this Act, the Secretary shall provide to the Committee on Veterans'
 Affairs of the Senate and the Committee on Veterans' Affairs of the
 House of Representatives a briefing on how the Secretary will implement

the recommendations of the Comptroller General of the United States regarding--

- (1) the monitoring of the training of providers of examinations pursuant to contracts under section 504 of the Veterans' Benefits

 Improvements Act of 1996 (Public Law 104-275; 38 U.S.C. 5101 note);
 and
 - (2) ensuring such providers receive such training.
- (f) Holding Underperforming Contract Medical Examiners

 Accountable.—The Secretary shall take such actions as may be necessary to hold accountable the providers of medical examinations pursuant to contracts under section 504 of the Veterans' Benefits Improvements Act of 1996 (Public Law 104-275; 38 U.S.C. 5101 note) who are underperforming in the meeting of the needs of veterans through the performance of medical examinations pursuant to such contracts.
- , United States Code, for months beginning after the date of the enactment of this Act.

From: To:

Cc: Ohio Cracking Down on ESA Letters
Subject: Thursday, February 25, 2021 12:19:57 PM

Date:

Just an FYI...since Ohio is taking action on this issue, you may start to hear about it from your fellow board members or licensees...I know I've heard this issue come up before in a board or council meeting.

 $\frac{https://fox8.com/news/ohio-cracks-down-on-fraudulent-behaviors-surrounding-emotional-support-animals/}{}$

Executive Director Texas Behavioral Health Executive Council 333 Guadalupe St., Ste. 3-900 Austin, Texas 78701 (512) 305-7700 www.bhec.texas.gov



March 2, 2021 Update

We would like to welcome on North Carolina as an effective PSYPACT participating state. Beginning on March 1, 2021 you may now practice into and out of North Carolina under the authority of PSYPACT. The PSYPACT staff are diligently processing all applications that have selected North Carolina as their home state.

As the 2021 legislative session continues, we wanted to share a few updates regarding PSYPACT. To date, PSYPACT legislation has been introduced in:

- Alabama
- Connecticut
- Indiana
- Iowa
- Kansas
- Kentucky
- Maryland
- Minnesota
- New Mexico
- Ohio
- South Carolina
- Tennessee
- Washington

Additionally, there is carryover legislation from the 2020 legislative session active in the District of Columbia and New Jersey. To monitor the progress of PSYPACT legislation, you can visit the PSYPACT website **HERE**.

Thank you for your continued support,

Your PSYPACT Team

Interested in practicing under PSYPACT?

Visit the PSYPACT website (www.psypact.org) for information about PSYPACT applications.

Click **HERE** to start your application to practice telepsychology under PSYPACT.

Click **HERE** to start your application to practice temporarily under PSYPACT.

IMPORTANT PSYPACT APPLICATION INFORMATION

IF YOU HAVE NOT STARTED AN APPLICATION:

There are two types of applications that must be completed in order to practice under the authority of PSYPACT - one designated for telepsychology and one designated for temporary in-person, face-to-face practice. Psychologists licensed in PSYPACT states can choose to apply for either application or both. Each way of practice requires a separate application and has different application requirements. Visit the PSYPACT website at www.psypact.org to learn more about how to start your PSYPACT application(s) and what to expect.

- Telepsychology: To practice telepsychology under the authority of PSYPACT, a psychologist licensed in a PSYPACT state will be required to obtain an Authority to Practice Interjurisdictional Telepsychology (APIT) from the PSYPACT Commission. One requirement of the APIT is that a psychologist must have an active E.Passport Certificate from ASPPB. The application fee for the APIT is \$40. The E.Passport application fee (normally \$400) has been temporarily waived until December 31, 2020. There is a \$100 annual renewal fee for the E.Passport.
- Temporary In-Person, Face-to-Face Practice: To conduct temporary in-person, face-to-face practice (for 30 days per calendar year in each PSYPACT state) under the authority of PSYPACT, a psychologist licensed in a PSYPACT state will be required to obtain a Temporary Authorization to Practice (TAP) from the PSYPACT Commission. One requirement of the TAP is that a psychologist must have an active Interjurisdictional Practice Certificate (IPC) from ASPPB. The application fee for the TAP is \$40. The IPC application fee is \$200 with a \$50 annual renewal fee.

AFTER YOU HAVE STARTED AN APPLICATION:

Thank you for your application! Staff is working hard to process all incoming applications as quickly as possible. Due to the high volume in applications, there may be delays in processing, but we are always here to help! Contact us at info@psypact.org with any questions you may have. Additionally, here are some important tips regarding the application process:

• Transcripts:

- Electronic transcripts are accepted. Official transcripts can be sent to transcripts@asppb.org.
- You will **NOT** be able to Submit for Review until Credentialing staff has received and uploaded your official transcripts to your application(s). We are receiving a high number of transcripts at this time and are uploading in the order they are received. If you already banked your transcripts, Credentialing staff will upload your transcripts in the order your application was initiated.
- If you already had your transcripts sent to ASPPB and they may have come under a different name, please reach out to transcripts@asppb.org if your transcripts have not yet been uploaded.

EPPP:

- You do **NOT** need to request an Official EPPP Score Transfer.
- When completing the Examination section of your application, we do need enough information regarding when you took the exam to locate your score in the repository. If additional information is needed to locate your score, Credentialing staff will contact you.

Education:

- When completing the Education section of your application, please note you only need to complete the Information on Degree portion. You do NOT need to complete the Verification of Degree Program or Submit for Verification by Institution portions. You will save the Information on Degree as Incomplete and the Education section as Complete.

Credentials Bank:

- If you have previously started a Credentials Bank record, please note you will need to initiate an application through the Select an Activity feature on the right panel of your My Activity Summary page.
- Not all sections of the Credentials Bank will be applicable. Once an application is initiated, you will see the sections of the Credentials Bank that apply.

• Supervised Training:

- Verification of supervised training experience is not a requirement of PSYPACT. You do not have to provide information regarding your practicum, internship or post-doctoral experience for your PSYPACT application(s).

Home State:

-At this time, PSYPACT requires that a psychologist be physically located in their Home State of licensure while providing telepsychological services. For the practice of telepsychology under PSYPACT, Home State is the PSYPACT state where you are licensed to practice and physically located when telepsychological services are delivered.

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PSYPACT

Psychology Interjurisdictional Compact (PSYPACT)
Address: 210 Market Road Tyrone, Georgia 30290
Web:
Email:

If you wish to unsubscribe:

View in browser



March 30, 2021 Update

Hello all,

We are excited to announce Alabama and Kentucky have enacted PSYPACT legislation! Governor Kay Ivey signed AL SB 102 into law on March 18, 2021, and the legislation will become effective on June 1, 2021. Governor Andy Beshear signed KY HB 38 into law on March 18, 2021, and the legislation will become effective approximately the end of June 2021. Alabama (effective June 1, 2021) and Kentucky (effective approximately end of June 2021) join other PSYPACT participating states including Arizona, Colorado, Delaware, District of Columbia, Georgia, Illinois, Missouri, Nebraska, Nevada, New Hampshire, North Carolina, Oklahoma, Texas, Utah, Pennsylvania and Virginia. Applications for Alabama and Kentucky will begin being accepted on their respective effective dates, Alabama (effective June 1, 2021) and Kentucky (effective approximately end of June 2021).

As the 2021 legislative session continues, we wanted to share a few updates regarding PSYPACT. To date, PSYPACT legislation has been introduced in:

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- Indiana
- lowa
- Kansas
- Maine
- Marvland
- Minnesota
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PSYPACT

Psychology Interjurisdictional Compact (PSYPACT)
Address: 210 Market Road Tyrone, Georgia 30290
Web:
Email:

If you wish to unsubscribe:

From:

To: For CPQ Accepting/Recognizing Jurisdictions: ASPPB Mobility Program Missing Documentation Affidavit

Subject: Wednesday, March 3, 2021 7:49:03 AM

Date: Missing Documentation Affidavit 3.2.2021.pdf

Attachments:

To those jurisdictions that currently either accept or recognize the Certificate of Professional Qualification in Psychology (CPQ):

In rare cases, a CPQ applicant may find it impossible to secure supporting documentation for their application (e.g., supervisor attestation, proof of internship). For instance, a supervisor may no longer be available, documents may have been misplaced or destroyed, or may have become indecipherable (e.g., microfiche, early photocopies, etc.), or a licensing board may have shredded these documents in accordance with their record retention policies. The ASPPB Mobility Committee wishes to be of assistance in those rare instances.

The ASPPB Mobility Committee has created a form for licensing board completion that we hope will assist applicants in the above circumstances. If an applicant has indicated that the materials supplied during their initial licensure application are no longer available or are not usable, the attached form requests psychology licensing board verification that the licensee, licensed in a specific month/year would have met the eligibility criteria of the CPQ (as listed on the attached fillable PDF form) at the time of initial licensure.

We value your feedback and ongoing participation in this program. As such, we are providing an explanation and copy of the referenced form such that if you receive a request for its completion in the future, you can be confident that it is part of the CPQ application. Please take a moment to review the attached form and offer any feedback you feel appropriate.

Thank you for your continued participation in ASPPB's Mobility Program.

Taja S. Slaughter, MPA

Director of Credentialing

Address: PO Box 849, Tyrone, GA 30290

Office: 678-216-1186 Fax: 678-216-1184

Email: tslaughter@asppb.org

Web: www.asppb.org

ETUlOU%2Fw1YbKdDm03&c=SIGNOFF



MOBILITY PROGRAM

Missing Documentation Affidavit

Please indicat	e if a	licensee would have, at the time
of initial licens	sure in _	, provided verified documentation of and met the following
criteria:		
YES	NO	A minimum of 3,000 hours total of supervised experience (internship and postdoc)
YES	NO	At least 1,500 of the minimum 3,000 hours was completed as a post-doctoral supervised experience
YES	NO	Each experience was completed in no less that ten (10) months and no more than 24 months
YES	NO	Each experience included at least one (1) hour per week of individual face-to-face supervision with a licensed psychologist
Signature:		
Print Name: _		
Title:		
Date:		

Please return this form to Taja S. Slaughter, Director of Credentialing, via email to <u>tslaughter@asppb.org</u> or via postal mail to PO Box 849, Tyrone, GA 30290

CREDENTIALS BANK / PLUS / IPC / E. PASSPORT / CPQ / EPPP SCORE TRANSFER

From: ASPPB BARC

Sent: Wednesday, March 17, 2021 4:22 PM

Subject: FW: Public Notice: Modifications of Accreditation Processes

Good evening,

Please see the below message from APA's Office of Program Consultation and Accreditation regarding modifications to the accreditation processes.

Thanks, Janet

Janet P. Orwig, MBA, CAE

Associate Executive Officer for Member Services

Address: P.O. Box 849, Tyrone, GA 30290

Cell: 404-788-8354 Office: 678-216-1188 Fax: 678-216-1176



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AMERICAN PSYCHOLOGICAL ASSOCIATION

Office of Program Consultation
and Accreditation

PUBLIC NOTICE

Modifications of Accreditation Processes

March 17, 2021

Dear Colleagues,

The APA is required to undergo periodic review to maintain recognition as an accrediting agency by the United States Department of Education (ED or Department) and the Council of Higher Education Accreditation (CHEA). The APA's scope of recognition includes the accreditation of doctoral programs in health service psychology (i.e., clinical, counseling, and school psychology, combinations of two or more of these practice areas and other developed practice areas in health service psychology), doctoral internship programs in health service psychology, and postdoctoral residency programs in health service psychology. As such, accreditation standards and procedures must align with the recognition criteria of both the ED and the CHEA. Two recent events have led to changes in APA accreditation documents. These events are comprised of: 1) a review of the APA for renewal of recognition and 2) regulatory changes made by the ED for all recognized accrediting agencies.

In accordance with the APA "Policies for Accreditation Governance" and the US Department of Education regulations for notice and comment, the CoA is providing additional information and making the changes available for a period of public notice at http://apps.apa.org/accredcomment/.

Please contact the office with questions at APAaccred@apa.org or by calling (202) 336-5979.

Sincerely,

APA Office of Program Consultation and Accreditation









© American Psychological Association

Office of Program Consultation and Accreditation 750 First Street, NE, Washington, DC 20002 T (202) 336-5979 F (202) 336-5978 apaaccred@apa.org

You are receiving this message as an identified constituency or party interested in the accreditation of professional psychology programs. Accredited programs and others served by us opt-in to communications from the Office of Program Consultation and Accreditation. However, if you are no longer an appropriate contact, please notify us by sending an email message to apaacred@apa.org or by calling (202) 336-5979.

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

To unsubscribe from the ASPPB-ADMINS list, click the following link: http://listserv.asppb.org/scripts/wa.exe?TICKET=NzM3ODk2IERhcnJlbC5TcGlua3NAQkhFQy5URVhBUy5 HT1YgQVNQUEItQURNSU5TIKZ6rnyKt%2Bar&c=SIGNOFF

Public Notice: Modifications of Accreditation Processes

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Review of the APA for Recognition as an Accrediting Body

The APA submitted a petition in January 2020 to ED, as required for renewal of recognition. As part of the review process, ED staff have informed the APA that there is a concern with the use of a phrase in the APA Accreditation Operating Procedures (AOP). The phrase of concern states that the APA Commission on Accreditation (CoA) considers probation to be an adverse action.

Department regulations do not incorporate probation in the listing of decisions that are considered adverse actions (please see definitions of adverse actions listed in CFR 34 §602.3). Since the actions listed as adverse in the regulations do not include the term probation, the statement in the AOP is therefore, incongruent. The APA CoA has reviewed the AOP and has approved a revision to a sentence located in AOP sections 8.2.3 D, 8.2.e I and 8.2.e P where this is stated. The sentence, presented in redline font to highlight the change, removes the phrase, adverse action. A copy of the three sections where the sentence is located is provided in Appendix A, following this introduction. In addition, a copy of the entire AOP, revised to include these changes is also presented and may be accessed using this link (will add link to revised AOP). These changes do not alter CoA review processes for programs placed on accredited, on probation status, nor do they impact CoA policies or procedures for adverse actions.

New ED Regulations

The ED has released revised procedures and criteria for recognizing accrediting agencies that are effective for reports and submissions following July 1, 2020. As a result of the new procedures and criteria, two areas of modification to APA CoA procedures have been identified to ensure consistency with ED regulations. These two areas are in the following sections: CFR 34 § 602.25 Due Process and § 602.26 Notification of Accrediting Decisions.

1. CFR 34 § 602.25 Due Process

In CFR 34 § 602.25 the word, "reverses", has been removed from the choices for appeal panel decisions. In addition, specific requirements have been inserted into the section when an appeal

panel remands an adverse action to the decision-making body (e.g., CoA) for further consideration. In this case, the appeals panel must "explain the basis for a decision that differs from that of the original decision-making body." Also, in the case of a remanded decision of the appeals panel, the decision-making body is to act in a manner that is consistent with the appeals panel's decision(s) and follow provided instructions.

The changes to CFR 34 § 602.25 required alterations to the AOP and to one of the Implementing Regulations (IR) that describes the role of the appeal panel. Specifically, the word "reversal" has been removed from AOP § 2.5 Decision and Report of Appeal Panel. A copy of this section of the AOP is provided in Appendix B following this introduction. A copy of the entire AOP, revised to include this change is presented and may be accessed using this link (will add link to AOP). IR 5.1, which delineates hearing procedures for the APA appeals panel, has been modified to reflect changes in CFR 34 § 602.25. IR 5.1 is presented in Appendix C following this introduction.

2. § 602.26 Notification of Accrediting Decisions.

CFR 34 § 602.26 lists requirements for the provision of written notice of accreditation decisions. Changes made to this section of the Department's regulations include modifications of timing of selected notices and thereby, required changes to the IRs that describe procedures of such notification. The changes to the ED regulations now require the accrediting body to notify "the Secretary, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies" of final decisions to place a program on accredited, on probation status or when an initiated adverse action (i.e., withdrawal, denial, revocation) occurs at the same time the program is notified" (CFR 34 § 602.26 XX). Plus, public notice of the decision is required within one day of notifying the program and the program is required to disclose such decisions to current and prospective students within "seven business days of receipt" of the notification from the accrediting agency. Similarly, notification of voluntary withdrawals from accredited are to be made within 10 business days of receipt and accreditation lapses on the part of a program are also to be disclosed within 10 days.

Changes in notification procedures, including dates, were required for the following IRs: IR D.8-2, Procedures for Notification of CoA Actions in Accordance with the Secretary of Education's Standards for Recognition of Accrediting Agencies and IR 8.5, Implementation Procedure for Notification by the Commission on Accreditation of Final Decisions of Denial/Revocation of Accreditation, Denial of a Site Visit, or Probation to the U.S. Secretary of Education, Appropriate State Licensing Agency, and Appropriate Institutional Accrediting Agency. IR 8.2 and IR 8.5 are presented in Appendix D following this introduction.

Public Notification Policies for Accreditation Governance

In accordance with the APA "Policies for Accreditation Governance" and the US Department of Education regulations for notice and comment, the CoA is providing additional information and making the changes available for a 30-day period of public notice.

On behalf of the CoA, thank you in advance for your review and comments. Please contact the APA Office of Program Consultation and Accreditation with any questions or concerns. Address: 750 First Street, N.E., Washington, DC 20002-4242; Phone: (202) 336-5979; Email: apaaccred@apa.org; Web: https://www.accreditation.apa.org/

Appendix A

Accreditation Operating Procedures § 8.2.e D (for Doctoral Programs)

(e) "Accredited, on probation" is considered by the CoA to be an adverse action. It serves as notice to the program, its students, and the public that in the professional judgment of the CoA, the accredited program is not currently consistent with the SoA and may have its accreditation revoked.

Prior to this decision, the program will be given an opportunity to *show cause* why it should not be placed on probation by providing a written response to the issues of concern. The program's show cause response will be reviewed two CoA meetings after the program was provided the show cause notice. Programs that are still not in compliance at the time of the CoA's review are then placed on "accredited, on probation" status.

Following placement on "accredited, on probation" status, the program is given a time by which to comply with the issues identified by the CoA in the probation decision. Doctoral programs must provide a response to the issues within four CoA meetings after the probation decision was reached.

Accreditation Operating Procedures § 8.2.e I (for Internship Programs)

(e) "Accredited, on probation" is considered by the CoA to be an adverse action. It serves as notice to the program, its interns, and the public that in the professional judgment of the CoA, the accredited program is not currently consistent with the SoA and may have its accreditation revoked. Prior to this decision, the program will be given an opportunity to *show cause* why it should not be placed on probation by providing a written response to the issues of concern. The program's show cause response will be reviewed two CoA meetings after the program was provided the show cause notice. Programs that are still not in compliance at the time of the CoA's review are then placed on "accredited, on probation" status.

Following placement on "accredited, on probation" status, the program is given a time certain in which to come into compliance with the issues identified by the CoA in the probation decision. Internship programs must provide a response to the issues within two CoA meetings after the probation decision was reached. In the case of a school psychology internship program that is 10 months in length, the program must provide a response within one CoA meeting after the probation decision was reached.

Accreditation Operating Procedures § 8.2.e P (for Postdoctoral Residency Programs)

(e) "Accredited, on probation" is considered by the CoA to be an adverse action. It serves as notice to the program, its residents, and the public that in the professional judgment of the CoA, the accredited program is not currently consistent with the SoA and may have its accreditation revoked. Prior to this decision, the program will be given an opportunity to *show cause* why it should not be placed on probation by providing a written response to the issues of concern. The program's show cause response will be reviewed two CoA meetings after the program was

provided the show cause notice. Programs that are still not in compliance at the time of the CoA's review are then placed on "accredited, on probation" status.

Following placement on "accredited, on probation" status, the program is given a time certain in which to come into compliance with the issues identified by the CoA in the probation decision. Postdoctoral residency programs must provide a response to the issues within two CoA meetings after the probation decision was reached.

Appendix B

Accreditation Operating Procedures § 2.5 Decision and Report of Appeal Panel

2.5 Decision and Report of Appeal Panel

The CoA's decision should be affirmed unless (a) there was a procedural error and adherence to the proper procedures would dictate a different decision; or(b) based on the record before it, the CoA's decision was plainly wrong or without evidence to support it. The appeal panel has the options of (a) upholding the CoA decision, (b) amending or reversing the CoA decision, or (c) remanding the matter to the CoA to address specific designated issues before final action.

The report of the appeal panel will state its decision and the basis of that decision based on the record before the panel. The report of the panel will be addressed to the president of the APA and sent within 30 days of the hearing. Copies will be provided to the chief executive officer of the doctoral program's host institution or to the responsible administrative officer of an internship or postdoctoral residency program, the chair of the CoA, the chair of the Board of Educational Affairs, and the Office of Program Consultation and Accreditation.

D.5. Regulations related to appeal procedures 10

D.5-1. APA Accreditation Appeal Panel Hearing Procedures

(Board of Educational Affairs, October 2000; revised October 2010, revised for Public Notice, February 2021)

1. General Information

This document will provide some background information about the nature of the hearing and the roles of various participants during the process required when a decision of the APA Commission on Accreditation (CoA) is being appealed.

2. <u>Nature of Hearing</u>

The conduct of the hearing is relatively informal. Besides the members of the hearing panel, present at the hearing are at least one member of the Commission on Accreditation who serves as its advocate, representatives of the Appellant Program, staff members of the Office of Program Consultation and Accreditation who are present in an advisory role, and APA legal counsel. The appellant program may be accompanied by counsel, as may CoA. The goal of the hearing is to provide a meaningful forum for an appeal so that the appellant is accorded the basic right of fundamental fairness and the right to be heard.

3. Role of APA Attorney

APA's legal counsel will attend the hearing. In addition to advising APA, counsel has responsibility to assure compliance with the Accreditation Operating Procedures and may resolve legal or procedural issues or advise the panel regarding those issues. As part of counsel's responsibility to assure compliance with the Procedures, legal counsel may resolve any issues concerning the admissibility of evidence. Although the evidentiary record is not limited to formal evidence that would be admitted in a court of law, counsel will enforce the requirement that only facts or materials that were before the CoA at the time of its final decision may be considered by the hearing panel. Counsel can meet or confer with the panelists privately before, during or after the hearing for the purpose of fulfilling counsel's responsibilities, or advising the panel regarding legal or procedural issues, but will not participate in the panel's substantive deliberations.

4. Function of the Hearing Panel

The issues at the hearing are limited to those findings upon which the Commission based its decision. The procedural and substantive grounds for challenging the Commission's decisions are limited to those stated in the program's appeal letter.

Only the facts or materials that were before the Commission at the time of its final decision may be considered by the panel. Facts which were not before the Commission at the time of its decision

¹⁰ Because appeals are handled by the APA Board of Educational Affairs (BEA), policies in section D5 are BEA policies.

or which came into existence subsequent to the Commission's decision are inadmissible (and any reference to such facts must be disregarded). The program may, however, provide clarifying arguments such as those in briefs, appeal statements, or demonstrative exhibits which clearly relate to the factual record that was before the Commission at the time of its decision.

The program will be provided a final listing of the record before the Commission and a copy of the record at least 30 days before the date of the appeal hearing. If the program objects to the record or wishes to refer to any fact or material not included in that record, it must notify the Office of Program Consultation and Accreditation at least 15 days prior to the hearing so that the issue can be resolved by APA's legal counsel.

5. Standard of Review.

The Commission's decision should be affirmed unless (a) there was a procedural error and adherence to the proper procedures would dictate a different decision; or (b) based on the record before it, the Commission's decision was plainly wrong or without evidence to support it.

6. <u>Decision Options of the Panel.</u>

The appeal panel has the options of: (a) <u>upholding</u> the CoA decision; (b) amending <u>or reversing</u> the CoA decision; or (c) remanding the matter to the Commission <u>to address-with an explanation</u> of the basis for a decision different from that of CoA.¹

7. Hearing Procedures

The order of presentation at the hearing is as follows:

- a. The Program presents first.
- b. The Representative of the Commission on Accreditation presents next.
- c. The Program has the opportunity to present a final rebuttal to the Commission's presentation.
- d. The Commission representative may offer a rejoinder to the Program's rebuttal, provided that the program has an opportunity to present a final rebuttal.

8. Written Decision

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¹ US Department of Education requires that, "in the event of a decision to remand the adverse action to the original decision-making body for further consideration, the appeals panel must identify specific issues that explain the basis for a decision that differs from that of the original decision-making body must address. In a decision that is implemented by or remanded to and the original decision-making body, that body must in a remand must act in a manner consistent with the appeals panel's decisions or instructions." (CFR § 602.25 iv)

Within 30 days of the hearing, the panel will prepare a report that will state its decision and the basis of that decision based on the record before the panel.

9. Ex parte Communications

The panel will avoid ex parte communications by adhering to the following requirements:

- a. Only information submitted to the panel for the hearing or in prehearing submissions furnished to both sides shall be considered by the panel in arriving at its final decision.
- b. Parties, or their advocates, shall not communicate with the panel about the appeal outside of the hearing room.
- c. Panel members will not respond to phone calls or letters from parties involved in the hearing, APA members, or any other persons concerning the appeal hearing or the panel's deliberations or its ultimate decision prior to or following the hearing itself.

These requirements do not foreclose APA's Legal Counsel from performing the functions described above.

Approved by the Board of Educational Affairs (BEA), October 22-24, 2000 Revision to Section 6 effective July 1, 2010

D.8-2. Procedures for Notification of CoA Actions in Accordance with the Secretary of Education's Standards for Recognition of Accrediting Agencies

(Commission on Accreditation, October 1997; revised October 2004, July 2009, July 2010, July 2011, February 2016, October 2019; Revised for Public Notice, February 2021)

This implementation procedure outlines the steps that will be taken by the CoA, consistent with the Secretary's requirements and with Section 5 (Confidentiality and Public Disclosure of Information) of the CoA's *Accreditation Operating Procedures*, to provide information on CoA activities, actions and decisions to the Secretary, State agencies, other accrediting agencies, and the public.

1. Information to the U.S. Department of Education (ED)

Item	Appropriate Section Reference in USDE Regulations	How Often and/or When
Lists of Accredited Programs	602.27(b)	Annually
CoA annual report (contains the CoA's accrediting actions as defined in AOP 8.2 D, 8.2 I, and 8.2 P for that year)	602.27(a)	Annually
Summary of CoA's major accrediting activities during previous year (annual data summary)	602.27(c)	If requested
The name of any accredited program that the CoA has reason to believe is failing to comply with Title IV, HEA program responsibilities or is engaged in fraud or abuse, and the CoA's reason for such concern	602.27(e)	As needed
Notification of any proposed change in policies, procedures, or accreditation standards that might alter the CoA's scope of recognition or compliance with the criteria for recognition	602.27(d)	As needed
Notification of decision to award initial accreditation or decision to renew accreditation	602.26(a)(1), and (a)(2)	No later than 30 days after decision

Final ¹² decision to place program on "accredited, on probation" status	602.26(b)	At same time program is informed 14	
Final ¹² decision to deny or revoke accreditation, or deny a site visit to an applicant program or place program on "accredited, on probation" status	602.26(c)(1), and (2)	At same time program is informed, but no later than 30 days after decision is final ¹⁸	
All accreditation decisions as defined in AOP 8.2 D, I, and P with appeal status	Per request of the Department of Education	No later than 30 days after the CoA meeting in which the decision is made	
Program decision to withdraw voluntarily from accreditation	602.26(f)(1)	No later than 130 <u>business</u> days after notification is received by the CoA	
Program decision to allow accreditation to lapse	602.26(e)(2)	No later than 130 days after date on which accreditation lapses	
Brief statement summarizing the reasons for denial or revocation of a program's accreditation or denial of a site visit / program's comments on action (if any)	602.26(d)	No later than 60 days after decision is final	

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¹² The term "final" as used throughout this Implementing Regulation encompasses the following: In the case of appealable decisions (denial of accreditation or a site visit to an applicant program, probation, or revocation), the CoA's accreditation decisions become final either (1) 30 days after the program is notified of the CoA's decision and the program elects not to appeal, or (2) if the program elects to appeal the decision, after receipt of the appeal panel report if the appeal panel upholds the CoA's decision. All decisions are made public within one day of institutional notification.

¹⁴ Note: Programs placed on accredited, on probation status are required to disclose this action to all current and prospective students within 7 days of notice.

2. Publicly-Available Information

Unless otherwise noted, items below appear in electronic form on the accreditation website.

- Current lists of accredited doctoral, internship and postdoctoral programs
- Program review cycles for current year
- Standards of Accreditation, Accreditation Operating Procedures, and Implementing Regulations
- List of current CoA members, including their academic and professional qualifications and relevant employment/organizational affiliations
- List of current accreditation office staff, including the academic and professional qualifications of the principal administrative staff
- Important accreditation dates for the current year, including CoA meeting dates
- A statement of reasons for denial or revocation of accredited status or denial of a site visit, in accordance with CoA procedure for notice of such actions
- In addition to being contained on website and in other published materials, upon request, a program decision to withdraw voluntarily from accreditation 30 days or more after notification is received by CoA
- Upon request, a program decision to allow accreditation to lapse
- CoA annual report, which includes CoA membership composition and diversity, a summary of program review decisions, policy changes, and other CoA activities throughout the year
- When published, aggregate statistics on accredited programs drawn from the Annual Report Online

3. <u>Information to State Licensing Boards</u>

All state psychology licensing boards will receive the following:

- Updated list of accredited doctoral and internship programs (annually)
- Updated Standards of Accreditation and Accreditation Operating Procedures (following publication of updated versions)
- CoA annual report (annually)
- Final decisions to place a program on accredited on probation status
- Initiated and final adverse actions (i.e., denial of accreditation, revocation of accreditation)

4. Information to Other Accrediting Agencies

All accrediting agencies that are currently or were previously recognized either by the Secretary of Education or the Commission on Recognition of Postsecondary Accreditation (CORPA)/Council on Higher Education Accreditation (CHEA); and/or are members of the Association of Specialized and Professional Accreditors (ASPA), will receive the following information:

• CoA annual report (annually)

- Updated list of accredited doctoral and internship programs (annually)
- Updated Standards of Accreditation and Accreditation Operating Procedures (following publication of updated versions)

In addition, the regional or national body that accredits any institution housing a program and the State agency that authorizes that institution (doctoral program only) will be notified of the CoA's action with regard to that program, as follows:

- CoA decisions to award initial accreditation or renew accreditation: no later than 30 days after decision
- Final decisions of "accredited, on probation" status, denial of a site visit, or denial or revocation of accreditation: at the same time the program is informed but no later than 30 days after decision becomes final
- A statement of reasons for denial or revocation of accreditation or denial of a site visit in accordance with Implementing Regulation D.8-4.
- Decisions by accredited programs to voluntarily withdraw from accreditation: no later than 30 10 days after CoA is notified
- Decisions by accredited programs to allow accreditation to lapse: no later than 30 10 days after the date on which accreditation lapses.
- Upon request, CoA will share with the institutional accrediting agency or State approval agency information about the accreditation status and any adverse action it has taken against such a program.

D.8-5. Implementation Procedure for Notification by the Commission on Accreditation of Final Decisions of Denial/Revocation of Accreditation, Denial of a Site Visit, or Probation to the U.S. Secretary of Education, Appropriate State Licensing Agency, and Appropriate Institutional Accrediting Agency

(Commission on Accreditation, October 2000; revised October 2004, Revised for Public Notice, February 2021)

Section 602.26(b-c) of the regulations for the U.S. Secretary of Education's Recognition of Accrediting Agencies (34 CFR Part 602.26, effective July 1, 200020) states the following:

"[The agency] provides written notice of the following types a final decision of a probation or equivalent status, or an initiated adverse actions to the Secretary, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies at the same time it notifies the institution or program of the [accreditation] decision, and by no later than 30 days after it reaches the decision: requires the institution or program to disclose such an action within seven business days of receipt to all current and prospective students;

"[The agency] provides written notice of the following types of decisions to the Secretary, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies at the same time it notifies the institution or program of the [accreditation] decision, but no later than 30 days after it reaches the decision: (1) a final decision to place an institution or program on probation or equivalent status; (2) a final decision to deny, withdraw, suspend, revoke, or terminate the accreditation or preaccreditation of an institution or program (2) A final decision to take any other adverse action, as defined by the agency, not listed in paragraph (c)(1) of this section."

This implementation procedure outlines the steps that will be taken by the CoA, consistent with the Secretary's requirements and with Section 8 (Confidentiality and Public Disclosure of Information) of the CoA's *Accreditation Operating Procedures*. For the purposes of this procedure, "appropriate State licensing or authorizing authority" refers to the psychology licensing board of the state in which the program (doctoral, internship, or postdoctoral residency) is located, and "appropriate accrediting agency" refers to the agency responsible for the accreditation of the institution in which the program is housed (doctoral programs only).

The following CoA decisions are governed by this policy: accredited, on probation; denial of accreditation to an applicant program; revocation of accreditation; and denial of a site visit to an applicant program. Because these decisions are appealable, they do not become final until either (1) 30 days after the program is notified of the CoA's decision and the program elects not to appeal, or (2) if the program elects to appeal the decision, after receipt of the appeal panel report if the appeal panel upholds the CoA's decision. (The appeal panel may also return the matter to the CoA for reconsideration,)

1. When the CoA elects to deny or revoke accreditation, deny a site visit to an applicant program, or place a program on "accredited, on probation" status, the affected program will receive two letters. The first letter will communicate the CoA's decision and will be mailed no more than 30 days after the CoA meeting per the *Accreditation Operating Procedures*. The second letter

will inform the program that the decision of the CoA has become final and will be mailed either: (1) 30 days after the original notification, if the program elects not to appeal the decision, or (2) as a cover letter to the report of the appeal panel, if the program appeals the decision and the decision is upheld by the appeal panel. (Per the *Accreditation Operating Procedures*, the appeal panel has 30 days to file its report.)

2. The Secretary of Education (or his/her designated Department official), the executive director of the appropriate State licensing agency, and (for doctoral programs) the executive director of the appropriate institutional accrediting agency will be listed as recipients of copies of the letter which communicates that the decision has become final. These individuals, however, will not receive copies of any attachments, such as appeal hearing reports.



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February 24, 2021

Dear ASPPB Membership,

As you are aware, approximately one year ago, the American Psychologist published an article that challenged the processes and validation of the EPPP (Part2-Skills). ASPPB provided a clarifying update to members at that time. In 2020, ASPPB also submitted to APA a formal comment to this article and that article was finally published this month. We continue to be in disagreement with the authors and we stand by our earlier position, which we believe is based on fact and accepted principles of test construction and use. Please find attached our comment to the article in an effort to keep you informed.

In addition, to provide clarity about the purpose and validation process for the EPPP (Part 2-Skills), listed below are the most common concerns that have been raised followed by factual information about the exam:

Purpose of the Examination:

Concern: There is no need for a skills exam.

Fact: Skills have not been assessed in a consistent manner by all jurisdictions and many concerns have been raised about the reliance on supervisor evaluations. The EPPP (Part 1-Knowledge) is a foundational knowledge exam that has been criticized for many years because it is <u>not</u> a skills exam. Together, the EPPP (Part 1-Knowledge) and the EPPP (Part 2-Skills) provide licensing boards with a competency examination that assesses both the knowledge and skills of applicants for licensure.

Validity:

Concern: The EPPP (Part 2-Skill) is not valid because criterion-related validity must be established before the exam can be considered to be valid.

Fact: EPPP (Part 2-Skills) is a valid assessment of skills that has undergone a rigorous validation process that exceeds industry standards for development of a licensure exam. As with all licensure exams, the validation process is ongoing and involves continuous review and statistical analysis of every item used in the exam.

Fact: All licensure exams, including the EPPP, are built on a **content** validation strategy. For the EPPP, this also involves expert review from licensed psychologists at every step of the process. Since the purpose of a licensure exam is not to predict future performance, a criterion-related validation process is inappropriate. Moreover, even if criterion-related validity were appropriate, in most cases, any criterion that might be chosen is less psychometrically sound than the exam itself. This has been known and published for decades, but some critics continue to cite a need for inappropriate validation standards for the EPPP. As stated in the *Standards for Educational and Psychological Testing (2014)*:

Criterion-related evidence is of little applicability because credentialing examinations are not intended to predict individual performance but rather to provide evidence that candidates have acquired the knowledge, skills, and judgment required for effective performance. (pp. 175-176)

Test bias:

Concern: ASPPB has not considered diversity factors sufficiently in development of the EPPP.

Fact: Reducing the possibility of test bias on the EPPP has been a priority for ASPPB for decades, and many steps are taken to ensure the exam is fair for all candidates. For example, ASPPB strives to achieve a representative membership in examination committees and item writing groups. This includes seeking writers who vary in gender, ethnicity, training backgrounds, professional expertise, work settings, and geographic locations. Item writers and reviewers are trained to consider many factors in evaluating item suitability, including cultural and linguistic considerations. Additionally, all writers receive training on addressing implicit bias in item development. Most recently, ASPPB has begun to collect ethnicity data in order to conduct Differential Item Functioning (DIF) analyses. Using the results of these analyses, items that function differentially across groups will be reviewed by experts on cultural competence for possible removal of the item from the examination. ASPPB consistently has allocated a great deal of time and resources to extensive review processes designed to ensure that the exam is fair for all candidates.

It is a priority of ASPPB to provide a fair, reliable, valid and defensible examination for use by regulatory authorities throughout the United States, its territories, and Canada. As such, it is ASPPB's hope that the facts associated with the process of test development for the EPPP (Part 2-Skills), as described in this document, will provide you with beneficial and informative details related to the exam.

More detailed information is available in an FAQ section of the ASPPB website, at www.asppb.net. And finally, please contact either Dr. Matt Turner, Senior Director of Examination Services, at mturner@asppb.org or me at mburnetti-atwell@asppb.org should you have any questions or concerns related to the development of the EPPP.

Respectfully,

MBAQUELL

Mariann Burnetti-Atwell, PsyD Chief Executive Officer

Association of State and Provincial Psychology Boards



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Appropriate Validation Standards for Licensure Examinations:

A Response to Callahan et al. (2021)

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Appropriate Validation Standards for Licensure Examinations:

A Response to Callahan et al. (2020)

Abstract

Callahan et al. (2020) asserted that the EPPP (Part 2-Skills) has not undergone appropriate validation. Although they recognized that content validity is the foundation of licensure examinations, they suggested additional validational strategies that are not recommended for licensure examination development. This response clarifies the appropriate validation standards for the examination.

Callahan et al. (2020) argued that the EPPP (Part 2-Skills) had not been subjected to appropriate validation during its development. This response clarifies the appropriate validation standards for the development of licensure examinations.

The EPPP (Part 2-Skills) was developed to provide licensing boards a reliable and valid measure of skills in response to the increasing "culture of competence" in professional psychology (Roberts et al., 2005). Based on input for the need for such an examination from licensing boards, the Association of State and Provincial Psychology Boards (ASPPB) began work on the examination over a decade ago (ASPPB, 2019)

Similar to the development of the EPPP (Part 1-Knowledge) during the past 60 years, the EPPP (Part 2-Skills) was developed using procedures outlined in the *Standards for Educational and Psychological Testing (Standards)* (American Educational Research Association, American Psychological Association, & National Council on Measurement in Education, 2014), including the use of a standard setting procedure to determine the pass point that represents the minimal skills required for entry level practice. The *Standards* emphasize that licensure/credentialing examinations are built from a content validation framework, and this framework is used for licensure examinations

across professions. The *Standards* indicate that validation methodologies typically used for cognitive or psychosocial functioning measures are of limited relevance to licensure testing: "criterion related validity is of limited applicability because credentialing examinations are not intended to predict individual job performance in a specific job but rather provide evidence that the candidates have acquired the knowledge, skills and judgement required for the effective performance, often in a wide variety of settings…" (p. 175-176).

The purpose of a licensing examination is to provide a licensing board with information that, by passing the examination, a candidate has demonstrated a minimum level of knowledge or skills for providing services independently at the point of licensure. Even if criterion related validity evidence was desirable for a licensing examination, there are two constraints that would need to be considered for any validation efforts: (a) measures of external criteria generally do not exist or are not psychometrically sound and (b) only pass/fail results, not the total examination score or the examination domain scores, should be used in validation analyses. To suggest that a licensure examination should not be used due a lack of criterion related validity evidence implies a standard that no licensure examination meets or should meet. Accordingly, the "appropriateness indices" in Callahan et al.'s Table 1, most of which are criterion related validity indices, are largely irrelevant to the development of the EPPP or any other licensing examination. For example, for concurrent validity, psychometrically sound measures of the broad range of entry level skills necessary in professional psychology (not just clinical psychology, as Callahan et al. suggested) would be required; currently, such measures do not exist. The suggestion to determine whether the EPPP (Part 2-Skills) predicts variance in clinical roles beyond that predicted by the EPPP (Part 1-Knowledge) is also problematic. Although this kind of incremental validity analysis is often undertaken with psychological measures, establishing a meaningful, validated criterion for a licensing examination is likely not possible (Kane, 1982). There is no measure of what makes a "good" or competent psychologist and, as Kane noted, "to ignore this limitation by evaluating licensure examinations in

terms of their ability to provide accurate predictions of future performance is to set up an unattainable standard (p. 918)."

As part of their "accuracy indices" Callahan et al. recommended validation studies on structural and measurement variance prior to implementing the examination. Structural validation analysis is sometimes conducted on licensing examinations; however, for such an analysis, data must be available from hundreds of candidates who have taken the examination. It is premature, therefore, to call for such an analysis prior to offering an examination. Callahan and colleagues also indicated a need for stability of structural indicators across groups; again, actual examination data from candidates seeking licensure are needed for such analyses to be conducted.

We agree with Callahan and colleagues about ensuring examination scores are as unaffected by bias as possible. This critical issue has received much attention throughout the development of both parts of the EPPP. As the authors noted, ASPPB has ensured that the many psychologists who have contributed to the examination come from diverse backgrounds. Instruction on language issues, potential bias, and cultural implications is part of the item writing training for the EPPP, as is training to address implicit biases. Differential Item Functioning analyses will also be conducted, with flagged items being reviewed by a panel of cultural competence experts to determine if the items have content that could be biased and should be edited or removed from use. Thus, ASPPB continues to have sound strategies in place to address the potential for bias in the examination development process.

Callahan and colleagues contended that stakeholder involvement in the EPPP (Part 2-Skills) development process does not match what is done by some other professions. We suggest that the job task analysis undertaken to establish the examination content, based on a survey of 2,700 licensed psychologists, constitutes extensive stakeholder involvement. Survey data were used to determine psychologists' views on the knowledge and skills required at the point of licensure, with

the resulting EPPP (Part 2-Skills) blueprint being remarkably similar to competency models provided by the American Psychological Association and the Canadian Psychological Association.

Furthermore, hundreds of psychologists from a variety of geographic regions, sociodemographic backgrounds, training backgrounds, areas of practice, and psychology group memberships (including many members of the training community) contribute to the standard setting procedures, ongoing reviews by subject matter experts, ongoing statistical analysis, and the continuous development of the examination. Moreover, updates on examination development have been provided to many psychology organizations and associations over the past decade, thus providing multiple opportunities for discussion and feedback.

In conclusion, Callahan et al. acknowledged that ASPPB has demonstrated content validation of the EPPP (Part 2-Skills), and we fully agree. Based on procedures outlined in the *Standards*, the EPPP (Part 2-Skills) has been developed through a rigorous, extensive, and thorough process that is appropriate for licensure examinations and is legally defensible for use by licensing boards.

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Roberts, M. C., Borden, K. A., Christiansen, M. D., & Lopez, S. J. (2005). Fostering a culture shift: Assessment of competence in the education and careers of professional psychologists. *Professional Psychology: Research and Practice*, *36*, 355–361.



Summary - APA Assembly on the Value/Distinctiveness of the Doctoral Degree in Health Service Psychology

Focused conversations were held with APA's Board of Directors and Council of Representatives in 2020 about the future of psychology practice and education. Based on feedback from those engagements, an Assembly of 40 diverse leaders gathered on January 28-30, 2021 to create a shared understanding of the value and distinctiveness of the psychology doctoral degree and license in the marketplace. This Assembly was one important step as a professional community to define the future of practice and inform the training of future practitioners.

Assembly participants considered questions regarding a) psychology's contributions to population health and society vis-à-vis other mental health professions, b) how psychology education and practice will be (or should be) different in the future to address emerging demands, and c) how the doctoral degree/license in psychology is distinctive and adds value to our multi-tiered profession, beyond the master's degree. This discussion took place within a context that acknowledged the challenges with equity and access to care and the probability of greater demand for psychological expertise and services as the repercussions of the pandemic unfold.

Participants were selected to represent diverse perspectives, which provided a foundation for rich and broad discussions. At the conclusion of the Assembly, participants shared a strong sense that this work is necessary, and the process was even-handed and meaningful. The Assembly identified a number of issues that are worthy of additional attention, and a clear and strong agreement emerged for the following:

- 1. The doctoral degree/license adds significant value within our multi-tiered profession. Doctoral psychologists have unique expertise in evaluation, specialty practice, leadership, interprofessional teamwork, and areas that include and go beyond direct service provision. Multiple tiers within the profession may be important to advance population health, wherein doctoral psychologists practice with a scope of greatest complexity in both breadth and depth.
- 2. An emphasis on science characterizes and distinguishes psychology, and it undergirds all education and practice. This results in doctoral professionals who are adept at understanding and utilizing science to make complex decisions to improve the health of the people and communities we serve.
- 3. Equity, diversity, and inclusion (EDI) is foundational to psychology and effective health care. It is essential for the psychology workforce to diversify and reflect the U.S. population. Developing and maintaining competence in EDI is essential across the professional lifespan of the psychology practitioner.

Additional considerations: Assembly participants discussed the need for consistent delineation of the multiple tiers of psychology practice across settings and jurisdictions, while also sufficiently distinguishing doctoral practice in regulations and the marketplace. Increasing the cohesiveness of professional identity as psychologists, consistency among training programs, preparation and credentialing for specialization, tracking workforce data, and recognition/expansion of the doctoral scope of practice are important considerations. This may include clarifying the scope and title for those trained with a master's degree and recognizing the greater complexity of doctoral scope in both breadth and depth. Lastly, the Assembly participants agreed it is essential to improve communication to colleagues, stakeholders, and the public about the important skills and abilities of doctoral psychologists, especially as specialists and leaders.

Next steps: To build on the work of the Assembly, a wide variety of colleagues across the discipline will be engaged to generate additional ideas and feedback. Key constituencies include governance leaders, state associations, training councils, regulatory representatives, divisions, students, and others. These efforts will lead to a broader Summit on the Future of Education and Practice to be held later in 2021. Pillars for the Summit will be based on this feedback and may include important matters such as diversifying the workforce, licensing and scope of practice, technology, access and levels of care - all with clear implications for education and psychology practice in the future.

The Distinctiveness of the HSP Doctoral Degree

Mary A. Fernandes, MA

Nadya A. Fouad, PhD, ABPP

Michael L. Hendricks, PhD, ABPP

Tri-Chairs, Practice/Education Steering Committee

Lynn F. Bufka, PhD

Cathi L. Grus, PhD

APA Staff

Saturday, March 06, 2021 | Practice Leadership Conference

Why now?

Unmet societal needs

- Significant untreated and undertreated mental/behavioral health concerns
- COVID-19 pandemic
- Health inequities

Psychology workforce must be prepared to lead

- Improve population health
- Advance psychological science
- Develop EDI foundation for psychology discipline & profession

Align education/training models to evolution of the profession

Clarify roles and value of doctoral psychologists in changing conditions

• Independent of and in relation to other providers, including HSP masters' graduates

Process

- 7-member steering committee representing practice, education, students, and licensing boards
- Tri-Chairs: Education, Practice, Future
- Weekly planning meetings to define purpose and structure of Assembly
- Steering committee identified participants for Assembly
- Assembly
 - 34 participants including steering committee
 - 16 observers from various interested entities
 - 5 key staff, 5 other staff and APA leaders

Attendees

Tri-Chairs: Mary Fernandes, Nadya Fouad, Michael Hendricks

Participants: Blanka Angyal, *Deborah Bell*, Larry Beer, Sharon Bowman, *Mariann Burnetti-Atwell*, Bhupin Butaney, Zeeshan Butt, Jean Carter, Timothy Cavell, Katelyn Coddaire, Samuel Colbert, David Cox, Kristin Dempsey, Joy Wolfe Ensor, Lisa Grossman, Lisa Kearney, James Lichtenberg, Celeste Malone, *Mary Ann McCabe*, Robin McLeod, Michael Mobley, Patricia O'Connor, Andrew Riley, Beth Rom-Rymer, Ranak Trivedi, Jason Washburn, Risa Weisberg, Adrienne Williams, Erica Wise, Aleesha Young, *Jeffrey Zimmerman*

Guests: Jennifer Kelly

Observers: Jeff Baker, Theresa Coddington, Wally Dixon, Elena Eisman, Dwain Fehon, Eleanor Gil-Kashiwabara, Kim Gorgens, Kimberly Howard, Michelle Mlinac, Gilbert Newman, Peter Oppenheimer, Michael Scheel, Juliette Schweitzer, Paula Shear, Julie Takishima-Lacasa, Kendra Westerhaus

APA Staff: Maysa Akbar, Lynn Bufka^, Amanda Clinton, Arthur Evans, Cathi Grus^, Zelka Macrua, Greg Neimeyer^, Sarah Rose^, Jared Skillings^

^ Key APA staff
Practice/Education Steering Committee member

Questions

- How is the doctoral degree/license in psychology distinctive and add value to our multi-tiered profession, beyond the master's degree?
- What are psychology's contributions to population health and society vis-à-vis other mental health professions?
- How will/should psychology education and practice be different in the future to address emerging demands?

Summary

The doctoral degree/license adds significant value within our multi-tiered profession.

- Evaluation, specialty practice, leadership, interprofessional teamwork
- Areas that include and go beyond direct service provision
- Multiple tiers within the profession may be important to advance population health, wherein doctoral psychologists' practice with a scope of greatest complexity in both breadth and depth.

Science characterizes and distinguishes psychology, and it undergirds all education and practice.

 Doctoral professionals are adept at understanding and utilizing science to make complex decisions to improve the health of the people and communities we serve.

Equity, diversity, and inclusion (EDI) is foundational to psychology and effective health care.

- The psychology workforce must diversify and reflect the U.S. population.
- Developing and maintaining competence in EDI is essential across the professional lifespan of the psychology practitioner.

Additional considerations

Consistent delineation of the multiple tiers of psychology practice across settings and jurisdictions

Sufficiently distinguishing doctoral practice in regulations and the marketplace

Increase the cohesiveness of professional identity as psychologists

- Consistency among training programs
- Preparation and credentialing for specialization
- Tracking workforce data

Recognition/expansion of the doctoral scope of practice

Next steps to a Summit

Gather additional ideas and feedback from colleagues across psychology

• Governance leaders, state associations, training councils, regulatory representatives, divisions, students, and others

Summit on the Future of Education and Practice to be held later in 2021

- Diversify the workforce
- Licensing and scope of practice
- Technology
- Access and levels of care
- Implications for education and psychology practice in the future

Context

Accreditation

 Council approved master's HSP accreditation standards

Scope of Practice and Title

- Develop suggested master's scope & title
- Review doctoral scope. Ensure doctoral scope is more complex in breadth & depth.

Education and Training

- BEA/BPA task force continue work on competencies for HSP master's
- Update doctoral HSP competencies
- Ensure competencies are tiered and aligned with efforts around scope and title

Q&A

Networking Lounges

5:15 – 5:45pm ET

- 1st Floor "Continuing the Discussion"
- Seat yourself at a table
- Establish a scribe to take notes on the questions:
 - How is the doctoral degree/license in psychology distinctive and add value to our multi-tiered profession, beyond the master's degree?
 - What are psychology's contributions to population health and society vis-à-vis other mental health professions?
 - How will/should psychology education and practice be different in the future to address emerging demands?
- Send notes to optq@apa.org by March 14, 2021

Dismissals for May 2021 TSBEP Board Meeting

Cases Dismissed by Staff

1) 2021-00164 – General Therapy	Insufficient Evidence
2) 2020-00102 – General Forensic	Insufficient Evidence
3) 2021-00174 – General Forensic	Lack of Jurisdiction
4) 2021-00128 – General Therapy	Insufficient Evidence
5) 2021-00178 – Sexual Misconduct	Previously addressed and resolved
6) 2021-00063 – Forensic Child Custody	Insufficient Evidence
7) 2021-00124 – General Forensic	Insufficient Evidence
8) 2019-00121 – Sexual Misconduct	Insufficient Evidence
9) 2020-00113 – General Forensic	Insufficient Evidence
10) 2020-00136 – General Therapy	Insufficient Evidence
11) 2021-00054 – General Therapy	Lack of Jurisdiction
12) 2021-00171 – Forensic Child Custody	Insufficient Evidence
13) 2019-00114 – Forensic Child Custody	Insufficient Evidence
14) 2020-00137 – General Forensic	Insufficient Evidence
15) 2019-00107 – General Therapy	Insufficient Evidence
16) 2020-00120 – General Forensic	Lack of Jurisdiction
17) 2020-00135 – General Administrative	Lack of Jurisdiction
18) 2021-00057 – General Administrative	Insufficient Evidence
19) 2021-00126 – General Therapy	Untimely
20) 2020-00007 – General Forensic	Insufficient Evidence
21) 2020-00101 – General Therapy	Lack of Jurisdiction
22) 2020-00097 – General Therapy	Lack of Jurisdiction
23) 2020-00133 – Miscellaneous	Lack of Jurisdiction
24) 2021-00130 – General Administrative	Insufficient Evidence
25) 2019-00113 – General Forensic	Insufficient Evidence
26) 2021-00067 – General Forensic	Insufficient Evidence
27) 2020-00008 – Forensic Child Custody	Insufficient Evidence
28) 2020-00118 – General Administrative	Insufficient Evidence
29) 2020-00116 – General Administrative	Insufficient Evidence
30) 2020-00105 – General Administrative	Insufficient Evidence
31) 2020-00117 – General Therapy	Insufficient Evidence
32) 2020-00107 – General Therapy	Insufficient Evidence
33) 2020-00106 – General Therapy	Insufficient Evidence
34) 2021-00020 – General Administrative	Complainant Failed to Cooperate

35) 2021-00133 – General Therapy	Insufficient Evidence
36) 2020-00103 – General Therapy	Insufficient Evidence
37) 2020-00114 – General Administrative	Insufficient Evidence
38) 2020-00047 – Forensic Child Custody	Conditional Letter of Agreement
39) 2021-00145 – General Therapy	Insufficient Evidence
40) 2021-00122 – Sexual Misconduct	Insufficient Evidence
41) 2021-00002 – General Therapy	Insufficient Evidence
42) 2020-00126 – Miscellaneous	Insufficient Evidence

PROJECTED TIME SCHEDULE CHANGES FOR LICENSED PSYCHOLOGISTS

The following is a list of complaint numbers that have received Projected Time Schedule (PTS) Changes since the previous Board meeting.

Changed Projected Time Schedule letters sent to the following cases:

- 1. 2020-00072
- 2. 2020-00076
- 3. 2020-00072
- 4. 2020-00076
- 5. 2019-00088
- 6. 2019-00089
- 7. 2020-00078
- 8. 2020-00081
- 9. 2020-00087
- 10. 2020-00088
- 11. 2020-00090
- 12. 2021-00030
- 13. 2021-00056
- 14. 2021-00058
- 15. 2021-00082

Informal Settlement Conference Panel List

Conference Date:	Conference Panel:	
On Call March 1 – May 31, 2022	??????????????????? ??????????????????	(Future)
On Call Dec 1 – Feb 28, 2022	Jamie Becker, Ph.D. Herman Adler, M.A. John Bielamowicz	(Future)
On Call Sept 1 -Nov 30,2021	Susan Fletcher, Ph.D. Andoni Zagouris, M.A. Jeanette Deas Calhoun, Ph.D	(Future)
August 10-11, 2021	Ronald Palomares, Ph.D. Herman B. Adler, M.A. Ryan T. Bridges	(Future)
May 11-12, 2021	Susan Fletcher, Ph.D Andoni Zagouris, M.A. John Bielamowicz	(Current)
February 9-10, 2021	Susan Fletcher, Ph.D. Herman B. Adler, M.A. Ryan T. Bridges	
November 17-18 2020	Ronald Palomares, Ph.D. Andoni Zagouris, M.A. John Bielamowicz	
August 11-12, 2020	Ronald Palomares, Ph.D. Herman B. Adler, M.A. Ryan T. Bridges	
May 12-13, 2020	Susan Fletcher, Ph.D. Andoni Zagouris, M.A. John Bielamowicz	
February 11-12, 2020	Susan Fletcher, Ph.D. Herman B. Adler, M.A. Ryan T. Bridges	

September 14, 2020

Texas Behavioral Health Executive Council Attn: Licensing Department 333 Guadalupe, Suite 3-900 Austin, TX 78701

RE: Velma Jean Stanley Candidate ID: 15094

To Whom it May Concern:

Please find enclosed the following documents as part of my Request for Issuance of License (Licensed Psychologist) packet:

- (1) Request for License Issuance
- (2) Email verification of passage of Jurisprudence Exam
- (3) Formal Internship Verification Form
- (4) Letter from Dr. Joseph Kartye
- (5) Documentation of Post-Doctoral Experience
- (6) A bank money order for \$381.00 in payment for license issuance made out to Texas Behavioral Health Executive Council

I thank you in advance for your time.

Sincerely,

V. Jean Stanley

TSBEP ENFORCEMENT STATUS REPORT MAY	2Q FY21	1Q FY21	4Q FY20	3Q FY20
2021 BOARD MEETING	1-Dec-20	1-Sep-20	1-Jun-20	1-Mar-20
2021 BOARD WEETING	to	to	to	to
	28-Feb-21	30-Nov-20	31-Aug-20	31-May-20
Number of Pending Complaints	118	96	78	98
Number of New Complaints Received	18	19	39	30
Pending Imminent harm cases	0	0	0	0
Pending cases alleging Sexual Violations	6	3	4	6
Pending Applicant cases	0	2	0	0
Cases Resolved this Quarter (3 dismissals, 0 sanctions)	3	7	46	56
Cases dismissed by Staff	3	5	42	45
Cases dismissed by the Board	0	2	4	3
Cases reviewed at ISC this Quarter	0	0	6	6

TOTAL PENDING CASES

		2Q FY21	1Q FY21	4Q FY20	3Q FY20
		(as of 2/28/21)	(as of 11/30/20)	(as of 08/31/2020)	(as of 05/31/2020)
FY 2019		8	8	19	35
FY 2020		68	69	59	63
FY 2021	0 cases going to SOAH	42	19		
Total		118	96	78	98



TEXAS BEHAVIORAL HEALTH EXECUTIVE COUNCIL

333 Guadalupe, Suite 3-900 Austin, Texas 78701 Tel.: (512) 305-7700 www.bhec.texas.gov For Agency Use Only

REQUEST FOR LICENSE ISSUANCE

Do not submit this form unless you have passed the EPPP and completed your post-doctoral supervised experience.					
APPLICANT INFORMATIO	N and the contract of the contract of				
Full Legal Name: Velma Jean Stanley					
Provisional License No.: 15904	ô01				
OTHER LICENSES AND CREDEN	TIALS				
Please indicate which of the following credentials you currently ho	old:				
□Certificate of Professional Qualification in Psychology (CPQ)					
□Specialist with American Board of Professional Psychology (AE	BPP)				
You must request that verification of your credential be sent direct credentialing entity. You may also proceed directly to the Signature section and the formal internship and post-doctoral supervised experience.	and Personal Acknowledgement				
Are you an actively licensed psychologist in good standing in another jurisdiction without any disciplinary history (other than history related to continuing education)?	□Yes Z No				
If so, have you been practicing in that jurisdiction for at least five years or can you affirm that you received at least 3,000 hours (, ,000 internship hours and ,,000 post -doc hours) of supervised experience from psychologists supervisors?	□Yes □No				
If you answered "yes" to both, you must submit verification of your out-of-state licensure. You may also proceed directly to the Signature and Personal Acknowledgement section and the formal internship and post-doctoral supervised experience verification forms are waived.					

non CED IS AMIN.

FORMAL INTERNSHIP YEAR						
indus If so,	your doctoral training and exper strial/organizational psychology? you may proceed to the POST I cation and the requirement for t ed.	☐ Yes ✔ No				
indus	ur doctoral training and experient strial/organizational psychology, aship as part of your doctoral pro	did you go through a formal	✓ Yes □ No			
	t, have you gone through a formation program?	al internship as part of a re-training	Yes No			
Asso mem Cente If so, and p appli	your internship accredited by the ciation (APA) or Canadian Psychology of the Association of Psychology (APPIC)? please submit documentation of proceed to the POST DOCTORA cation. Additionally, the require is waived.	☐ Yes 🗹 No				
If your formal internship was not accredited by the APA or CPA, or a member of the APPIC, does it comply with the formal internship requirements set forth in 22 TAC 463.11(d)?						
	Basic Infe	ormation Regarding Formal Internship)			
1.	Name of Supervisor or Director of Training:	Dr. Joseph Karty	е			
2.	Address:	Old Union Road Texas 75904				
3.	Email Address: jkartye@consolidated.net					
4.	000 070 0700					
5.	Was the Director of Training or supervisor licensed as a psychologist when the supervision occurred? ✓ Yes ☐ No					
6. Jurisdiction where supervisor was licensed as a psychologist: Texas						
7.	Address where experience	903 North Street	III III III III III III III III III II			
'-	was obtained:	xas 75961				

8.	Duration of expe	erience:	Began 05-01-2010 Ended	10-25-2011 (MM/DD/YY)			
9.	Total hours comperiod?	Total hours completed under supervision during the above time period?					
10.	Job Title used:	Psyc	hologist Trainee				
11.	11 -	_	ence satisfy the requirements of the n Board rule 460.2?	✓ Yes □ No			
12.	Was your super	visor traine	d in the area of supervision provided?	✓ Yes □ No			
13.			d to you within the second degree of anguinity (blood)?	Yes No			
			POST-DOCTORAL YEAR				
If so,		owing serve	year of supervised experience in Texas?	✓ Yes No			
□Licensed by this agency. ☑Provisional trainee status under former TSBEP rule 463.10. □Provided services which were exempt under 22 TAC 882.26. □Other: □None of the above.							
1.	Name of superv	isor:	r. Joseph Kartye				
2.	Address:		Old Union Road				
		Lutkir	n, Texas 75904				
3.	Email Address:	jkarty	e@consolidated.net				
4.							
5.	Was your supervisor licensed as a psychologist when the supervision occurred? ✓ Yes □ No						
6.	Jurisdiction where supervisor was licensed as a psychologist: Texas						
7.	Address where	experience	103 Wildlife Lane				
'	Lufkin, Texas 75904						

8.	Duration of experience:	Began 04-16-2018 Ende	d 05-01-2019 (MM/DD/YY)		
9.	Total hours completed un period?	der supervision during the above time	2466		
10.	Job Title used: Psy	chological Intern			
11.	Does this supervised expe Board's supervision rules	erience satisfy the requirements of the in Board rule 460.2?	✓ Yes □ No		
12.	Was your supervisor train	ed in the area of supervision provided?	✓ Yes □ No		
13.	Was your supervisor relatantification affinity (marriage) or con	ed to you within the second degree of sanguinity (blood)?	☐ Yes 🗹 No		
	Satisfaction of Post-do	octoral Supervised Experience with Doctor	ral Program Hours		
Total number of formal internship hours you want counted toward the minimum required 1,750 hours of post-doctoral supervised experience? Only those formal internship hours from an APA or CPA accredited formal internship (or the substantial equivalent) in excess of 1,750 hours may be counted.					
requi	ired 1,750 hours of post-doo	s you want counted toward the minimum storal supervised experience? Applicants quired by 22 TAC 463.11(b) before			
	SIGNATU	RE AND PERSONAL ACKNOWLEDG	GMENT		
By si	criminal violation under Secti that the Public Information Act the Council has permission to pertinent to this application; you have read the Psychologis that pursuant to Section 232.0 to pay child support; the application and examination	tion, you are acknowledging: In this application is true and correct and that any on 37.10 of the Penal Code and a basis for future det is enforced by this agency as required by state la seek any information or references it deems appropriate. Licensing Act and Council rules and are familials of the Family code, this application or a future on fees submitted in connection with this application equired documentation and information may delay	lisciplinary action; w; priate regarding your credentials ar with both; e renewal may be denied for failure on are non-refundable;		

that you have ninety (90) days following receipt of this application by the agency to ensure that all documentation

Date: 09-11-2020

that you have an obligation to keep your address of record current while your application is being processed.

or result in your application going void or being denied;

that it may take agency staff up to six weeks to process your application; and

and information required has been submitted;

Applicant

Signature:





Report of Score on Jurisprudence Examination

1 message

support@estrategysolutions.com <support@estrategysolutions.com>

Wed, May 30, 2018 at 9:49 PM

Reply-To: support@estrategysolutions.com

To: jean@pathwaysfmhs.com

File Number: 15094

Dear Velma Stanley:

You completed the Texas State Board of Examiners of Psychologists' Jurisprudence Examination. You PASSED the examination with a score of 94.

Please note that you will not receive any additional correspondence from the Board regarding your score. This email constitutes official notification of your score.

For those examinees receiving a passing score, please allow 20 business days for the processing of your exam results before contacting the Board. The Board's goal is to process exam results on a weekly basis, however, employee absences or other agency priorities may lengthen that processing time.

For any questions you may have regarding the next steps in the licensure process, please consult your application packet materials and the Board's website before contacting the Board.

Sincerely, Darrel D. Spinks Executive Director



TEXAS BEHAVIORAL HEALTH EXECUTIVE COUNCIL

333 Guadalupe, Suite 3-900 Austin, Texas 78701 Tel.: (512) 305-7700 | www.bhec.texas.gov For Agency Use Only

Formal Internship Verification Form

To be completed by the Director of Internship Training

The below-named applicant is seeking licensure with the Texas Behavioral Health Executive Council. The following information is needed in order to confirm that the applicant has completed a formal internship consisting of at least 1,750 hours of supervised experience meeting the requirements of 22 TAC 463.11. Please respond as quickly as possible so that agency staff can consider the applicant's qualifications without undue delay.

Applicant Information						
Applicant Name:	Applicant Name: Velma Jean Stanley					
		Director of I	nternship Training			
Name:	Dr.	Joseph Kartye,	Licensed Psyc	hologist		
A 11	573	2 Old Union Road				
Address:	Lufl	Lufkin, TX 75904				
Email Address:	jkar	tye@consolidated.	net			
Telephone No.:	936	-676-0769				
Current Job Positi	on: Lie	censed Psychologist, in	ternship supervisor			
		our licensure at the time than name of the jurisdiction wh		ised. Also provide your license to practice psychology.		
Date		License No.	State	Current? Yes/No		
08-31-09 to 08-31	-11	20894	Texas	Yes		
08-31-17 to 08-31-19		20894	Texas	Yes		
A rec of destoral level training/advention in psychology;						

Area of doctoral level training/education in psychology:

General and abnormal psychology; Intellectual, academic achievement & personality assessments, treatment planning, reporting writing, individual client spe interventions, application of group interventions and techniques, crisis intervention, ethical/legal/professional issues, assessment and diagnostics, diversity a cultural sensitivity, biological and cognitive bases of behavior, developmental considerations in treatment; suicide assessment

	QUESTIONS REGARDING SUPERVISION:							
Expe	Name of Agency Where Experience was Obtained: Samaritan Counseling Center of East Texas, Inc.						nc.	
		903 No	rth	Street				
Addr	ess:	Nacogo	loch	es, Texas 75961				
1.	Dat Wo	es rked:	Be (Ml	an: (DD/YY) 05-01-2010	Ended: (MM/DD/YY) 1	0-25	-2011	
2.	Ove	erall total nu	ımbe	of supervised hours during the above	e time period?	2301		
3.				number of direct (face-to-face indivi- eek to the applicant.	dual) supervision	2		
4.				of professional setting where the sup ampus, private practice, agency, etc.		age	ncy	
5.	1	•		ssional relationship with the applicar nployer in private practice, agency,	. •	intern	nternship director	
6.	What title was used by the applicant?						ologist tra	ainee
7.	Was the internship required as part of the applicant's doctoral program or respecialization/re-training program?						⊉ Yes	□No
8.	24	consecutive	mon	te place in not more than two placemes? An internship with rotations or to gram is considered to be one placement.	hat is part of a cons		₽Yes	□No
9.	At the time of supervision, were you or any of the applicant's supervisors related to the applicant within the second degree of affinity (marriage) or consanguinity [Description of the applicant's supervisors related to the applicant within the second degree of affinity (marriage) or consanguinity [Description of the applicant's supervisors related to the applicant within the second degree of affinity (marriage) or consanguinity [Description of the applicant's supervisors related to the applicant within the second degree of affinity (marriage) or consanguinity						₽No	
10.			*	ne applicant's supervisors under a re f supervision?	stricted license by the	ne	□Yes	ØNo
11.	Ple	ase list the p	osycł	logical services you feel the applican	nt is NOT qualified	to provid	le:	
	None						:	
12.	Did the applicant receive supervision within the areas of each supervisor's training, knowledge, and skill?					□No		
13.	Do you feel the applicant is physically and mentally competent to render psychological services as a licensed psychologist? If not, please attach a written explanation.					□No		
14.				ervations concerning the applicant's as for licensure? If so, please attach			□Yes	ØNo

15.	Was there a process in place for providing an evaluative feedback to the supervisee regarding his/her performance on established service requirements?	② Yes □No				
16.	6. Were all clients informed that applicant and all aspects of applicant's work were being supervised?					
	PLEASE INDICATE THE TYPE OF INTERNSHIP COMPLETED (CHECK O	NLV ONE)				
	The internship program is accredited by the American Psychological Association (A Canadian Psychological Association (CPA), or is a member of the Association of P Postdoctoral and Internship Centers (APPIC). If selected, proceed to SECTION II	APA) or sychology				
2	Internship program meeting requirements of 22 TAC 463.11(d)(2). If selected, prosection I.	ceed to				
	Internship program meeting requirements of 22 TAC 463.11(d)(3). If selected, prosection II.	ceed to				
-	SECTION I.					
	e answer the following questions regarding the non-accredited organized internsher is "No" to any of the questions, please attach a written explanation.	ip. If your				
1.	Did the internship program constitute an organized training program designed to provide the intern with a planned, programmed sequence of training experiences, with the primary focus and purpose being to assure breadth and quality of training?					
	Did the internship agency have a clearly designated staff psychologist actively licensed in the jurisdiction in which the internship took place, who was responsible for the integrity and quality of the training program?	☑Yes □No				
	Was this staff psychologist present at the training facility for a minimum of twenty (20) hours each week?	□Yes ②No				
2.	Name of Staff Supervising Psychologist: Dr. Joseph Kartye, Licensed Psych	nologist				
	Jurisdiction Where Licensed: Texas					
	Did the internship agency have two or more full-time licensed psychologists on the staff as primary supervisors?	□Yes ☑No				
3.	List the names of the supervising psychologists and the Jurisdiction where they are lic					
٠.	Name: Jurisdiction:					
	Name: Jurisdiction:					
4.	Was supervision provided by a staff member or an affiliate of that agency who carried clinical responsibility for the cases being supervised?					

5.	Did the internship provide training in a range of assessment and intervention activities conducted directly with patients/clients?	2 Yes	□No	
6.	Was at least 25% of trainee's time in direct patient/client contact?	⊉ Yes	□No	
	Did the supervisee receive at least two hours of face-to-face individual supervision each week?	₽Yes	□No	
7.	In addition to the face-to-face supervision provided, was there at least four additional hours per week in learning activities, e.g. case conferences involving a case in which the intern was actively involved, seminars dealing with psychology issues, co-therapy with a staff person including discussion, group supervision, and additional individual supervision?	₽Yes	□No	
8.	Was the training post-clerkship, post-practicum, and post-externship level?	₽Yes	□No	
9.	Were there a minimum of two full-time equivalent interns at the internship level of training during applicant's training period?	□Yes	No	
10.	Did the internship agency inform prospective interns about the goals and content of the internship, as well as the expectations for quantity and quality of trainee's work, including expected competencies?	₽Yes	□No	
PROCEED TO SECTION III.				

SECTION II.				
Please answer the following questions regarding the non-accredited organized internship within a school district. If your answer is "No" to any of the questions, please attach a written explanation.				
1.	Was the internship provided at or near the end of the form	mal training period?	□Yes	□No
2.	Did the internship require a minimum of 35 hours per week over a period of one academic year, or a minimum of 20 hours per week over a period of two consecutive academic years?			□No
3.	Was the internship consistent with a written plan, and did it meet the specific training objectives of the program?			□No
4.	Did the internship experience occur in a setting appropriate to the specific training objectives of the program?		□Yes	□No
5.	Did at least 600 clock hours of the internship experience occur in a school setting?		□Yes	□No
6.	Did the internship provide a balanced exposure to regular and special educational programs?		□Yes	□No
7.	7. Did the internship agency have two or more full-time equivalent psychologists/LSSPs on staff as primary supervisors, at least one of whom was employed full-time at the agency and is a school psychologist?			□No
8.	List the names of the supervising psychologists/LSSPs and where they were licensed.			
	Name:	Jurisdiction where licensed	d:	

	Name:	Jurisdiction where licensed:	
	Name:	Jurisdiction where licensed:	
	Name:	Jurisdiction where licensed:	
9.	Was the portion of the internship which took place in a licensed psychologist/LSSP?	school supervised by a Yes No	
9.	Does the jurisdiction in which the internship took place require a separate credential to practice in a school setting?		
10.	Was the portion of the internship which took place in a non-school setting, if any, supervised by a licensed psychologist?		
11.	Were the field based supervisors/I SSPs responsible for no more than two interns		
12.	Ware the university supervisors responsible for no more than twelve interns at		
13.	Did the field-based supervisors provide at least two hours per week of direct supervision for each intern?		
14.	Did the university supervisor maintain an ongoing relationship with the field-		
15.	Did the internship agency inform the interns concerning the period of the internship and the training objectives of the program?		
16.	Was the internship experience systematically evaluated in a manner consistent with the specific training objectives of the program?		
17.	Was the internship experience conducted in a manner consistent with the current legal/ethical standards of the profession?		
18.	Did the internship agency have a minimum of two full-time equivalent interns at the internship level during the applicant's training period?		
	PROCEED TO SECT	ION III.	
	SECTION III		
Please sign where indicated below. Thank you for your cooperation in this matter.			
By sign	ning this document you are acknowledging that the information and that any misrepresentation may constitute a criminal	nation contained in this form is true and	
By signing this document you are also acknowledging that the Public Information Act is enforced by this agency as required by state law.			

Please return this completed form to the applicant.

Kartye PhD

Supervisor's

Signature:

Date: 9/10/20

September 11, 2020

Texas Behavioral Health Executive Council 333 Guadalupe, Suite 3-900 Austin, TX 78701

RE: Candidate #15904, Provisional Trainee, Velma Jean Stanley

To Whom it May Concern:

Pursuant to requirements set forth in the Formal Internship Verification Form related to the above-named trainee, I am providing this letter of explanation regarding the "no" responses on page 3, item 2 "Was this staff psychologist present at the training facility for a minimum of twenty hours per week?" and page 3, item 3, "Did the internship agency have two or more full-time licensed psychologists on the staff as primary supervisors." I also had to indicate "no" on page 4, item 9 "Were there a minimum of two full-time equivalent interns at the internship level of training during applicant's training period?"

At the time of Ms. Stanley's practicum and internship supervision, I performed the primary supervision duties while Ms. Stanley was also supervised by an on-site staff member who carried responsibility for the cases being supervised. In addition to our two hours of weekly supervision meetings, she participated, also weekly, in 2-hour case staffing meetings with the clinical director who was on-site full time. Lufkin, Texas, where I reside is in a highly rural area with very few resources in terms of psychologists or placements available for on-site supervision; therefore, two psychologists were not available. Further, in our neighboring community, where Stephen F. Austin State University in Nacogdoches, Texas has an accredited community counseling program, there are actually very few students in our area who pursue a psychologist's license, which also explains why there was only one psychological intern working at the site where Ms. Stanley obtained her experience.

I hope this will clarify the items on the verification form. With that said, I have been involved in Ms. Stanley's supervision from the beginning of her practicum. I have observed her work both pre- and post-doctoral. I know her standards of care, her work ethic, and her character; and based on each, I have no reservations concerning her ethical, professional, and personal qualifications for practice in the field of psychology.

Thank you for your time,

Joseph Kartye Phil Joseph Kartye, LP #20894



TEXAS BEHAVORIAL HEALTH EXECUTIVE COUNCIL

333 Guadalupe, Suite 3-900 Austin, Texas 78701 Tel.: (512) 305-7700 | www.bhec.texas.gov For Agency Use Only

DOCUMENTATION OF POST-DOCTORAL EXPERIENCE

The below-named applicant is seeking licensure with the Texas Behavioral Health Executive Council. The following information is needed in order to confirm that the applicant has completed a post-doctoral supervision meeting the requirements of 22 TAC 463.11. Please respond as quickly as possible so that agency staff can consider the applicant's qualifications without undue delay.

10-10-	SUPERV	ISOR INFORMATION	
Name:	Dr. Joseph Kartye, Licensed Psychologist		
	5732 Old Union Road		
Mailing Address:	Lufkin, Texas 75904		
Primary Phone No.: 936-676-0769		Alternate Phone No.: 936-875-4116	
Email Address: kartye@consolidated.r	net		
Issuing Jurisdiction and Texas #20894	l Psychologist License	No.:	
Primary Area(s) of Practice Diagnostic testing, treatment, appl		p supervision, consultation	

	SUPERVISEE INFORMATION	
Name:	Velma Jean Stanley	
	Pathways Forensic & Mental Health Services, PLLC	
Name and Address of Primary Facility or Office	103 Wildlife Lane	
Where the Supervised Experience Occurred:	Lufkin, Texas 75904	

Supervisee's Title:	Psychological Intern			
Please identify the time period when the supervision was provided, e.g. May 1, 2014 to March 15, 2016.				
04/16/201	8 _{to} 05/01	1/2019		
(MM	I/DD/YY)	(MM/DD/YY)	_	
Did you provide this individual with at least 1,750 hours of post-doctoral supervised experience in the delivery of psychological services?			✓ Yes □ No	
How many total hours of post-doctoral supervised experience in the delivery of psychological services you did provide to this individual?			2466	
How many hours of direct (face-to-face individual) supervision did you provide to this supervisee each week?			2	
Please select the legal basis f	or the applicant's delivery of	services while under you	ir supervision?	
□ Licensed by this agency. ☑ Provisional trainee status under former TSBEP rule 463.10. □ Provided services which were exempt under 22 TAC 882.26. □ Other: □ None of the above.				
Please describe the professional setting where the supervision took place (e.g., college campus, private practice).			assessment center	
What was your professional rapplicant (e.g., internship dire practice)?		Internship Director		
Were you actively licensed during the period of supervision?		Yes No		
Was your license restricted at any time during the period of supervision?		☐ Yes 🗹 No		
Was the supervisee related to you within the second degree of affinity (marriage) or consanguinity (blood) during the period of supervision?		Yes V No		
Were all patients/clients informed that the supervisee and all aspects of his or her work were being supervised?		Yes No		
Did the supervisee have the experience, skill, and training appropriate to the functions performed during the period of supervision?		Yes No		
Did you provide supervision within your areas of training, knowledge, and skill?			Yes No	

Did you provide supervision in accordance with 22 TAC 465.2?				
If not, please attach a written explanation regarding the aspects of your supervision which did not comply with 22 TAC 465.2, together with an explanation for why the supervision did not comply with the rule.	Yes No			
Are there any psychological services that you believe this supervisee is not qualified to deliver?	Yes No			
If so, please identify those psychological services that you believe this supervisee is not qualified to deliver in the space below.				
Do you believe this supervisee is physically and mentally competent to deliver psychological services as a licensed psychologist?	Yes No			
If not, please attach a written explanation supporting your response.				
Do you have any reservations concerning this supervisee's ethical, professional, or personal qualifications for supervised practice?	Yes No			
If so, please attach a written explanation describing your reservations and the basis for them.				
CYCHARUPE AND ACCEMENT EDGEMENT				
SIGNATURE AND ACKNOWLEDGEMENT				
I acknowledge that the information provided herein is true and correct and that any misrepresentation may constitute a criminal violation under Tex. Penal Code §37.10.				
I understand that the Public Information Act is enforced as required by state law.				
Please return this completed form to the supervisee.				
Supervisor's Signature: Joseph Karline Ph. Date: 199-	10-20			

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TEXAS BEHAVIORAL HEALTH **EXECUTIVE COUNCIL**

Darrel D. Spinks **Executive Director**

November 2, 2020

VELMA JEAN STANLEY PH.D. 140 AUTUMN LAKE DRIVE LUFKIN, TX 75904

Re: Denial of Request for License Issuance Application

Dear Dr. Stanley,

The Texas Behavioral Health Executive Council is in receipt of your Request for License Issuance Application dated September 18, 2020. After review of your application and supporting materials, the Council has determined that your application does not meet the requirements set forth in Board rule 463.11. Therefore, your application has been denied.

22 TAC 463.11(d)(2) states:

The successful completion of an organized internship meeting all of the following criteria:

- (B) The internship agency must have a clearly designated staff psychologist who is responsible for the integrity and quality of the training program and who is actively licensed/certified by the licensing board of the jurisdiction in which the internship takes place and who is present at the training facility for a minimum of 20 hours a week.
- (C) The internship agency must have two or more full-time licensed psychologists on the staff as primary supervisors.
- (I) The internship agency must have a minimum of two full-time equivalent interns at the internship level of training during applicant's training period.

November 2, 2020 Page 2 of 2

On your *Formal Internship Verification Form*, your supervisor Dr. Joseph Kartye, answered "No" to (B), (C), and (I). Dr. Kartye's letter submitted to explain his responses, further supported that the requirements under 22 TAC 463.11(d)(2) were not met.

Should you have any questions or concerns, please do not hesitate to contact me at the Council's office. The denial of your application may be appealed, but such an appeal must comply with the requirements of 22 TAC 882.3 or this denial is final.

Thank you for your interest in seeking licensure with the Texas Behavioral Health Executive Council.

Sincerely,

Licensing Division

Monica Fiero

Texas Behavioral Health Executive Council



ANGELINA COUNTY COURT AT LAW #2 ANGELINA COUNTY, TEXAS

CLYDE M. HERRINGTON JUDGE

Kristen Lowery Court Coordinator

Licensing Division Texas Behavioral Executive Council 333 Guadalupe Street, Suite 3-900 Austin, Texas 78701

January 8, 2021

Re: Denial of Psychologist License to Dr. Jean Stanley, Ph.D.

To the Licensing Division:

It is my understanding that Dr. Stanley was denied licensure as a psychologist for failure of her internship to meet all requirements of your agency.

I would respectfully request that this decision be reconsidered in light of several circumstances that may be somewhat unique to our area. First of all, I don't know of any facility in Angelina County or any adjoining county that has two or more psychologists on staff. Secondly, Dr. Stanley has an enormous amount of experience in the field of psychology in a number of diverse areas. Finally, I would ask that the needs of our area be considered. To my knowledge we have only one licensed psychologist in our area that is qualified and willing to provide forensic services to courts dealing with criminal defendants with mental issues related to competency to stand trial and insanity. That person is Dr. Joseph Kartye, Ph.D. I have worked with Dr. Kartye for over 30 years and have the upmost respect for his knowledge and ability, however if he were to retire or be unavailable we are at a loss for someone to provide necessary services.

I now work in the capacity of a judge, but previously I served as District Attorney of Angelina County for 23 years. As District Attorney I dealt with mental issues in many cases involving insanity and competency to stand trial, relating to defendants charged with such things as Aggravated Sexual Assault, Murder, and Capital Murder. In these cases, I have seen and dealt with a number of psychiatrists and psychologists. Now as a Judge, I have to deal with many mental health issues in civil, criminal and family law cases. I am very concerned that we simply don't have sufficient access to qualified psychologists in this county or any of our surrounding counties to meet this need.

As to Dr. Jean Stanley, I can represent to you that I have known her well for over 15 years. I have used her services in a number of criminal and family law cases. I have also referred friends to her in personal capacity. I have seen her testify in court in serious cases. She is professional and credible, as well as a knowledgeable and talented mental health provider.

I would welcome the opportunity to provide further information. If that would be helpful please contact me.

Very truly yours,

Clyde M. Herrington

Clycle M. Herrington

Matthew L. Ferrara, Ph.D.

Clinical and Forensic Psychology 2500 West William Cannon Suite 703 Austin, TX 78745 Tele: 512-708-0502 Fax: 512-708-0557 mferraraphd@outlook.com

January 12, 2021

Attn: Texas State Board of Examiners of Psychologists 333 Guadalupe Street Suite 3-900 Austin, TX. 78701

Re: Appeal from the Denial of License Application for Velma Jean Stanley, Ph.D., LPC-S, LSOTP-S

To the Texas State Board of Examiners of Psychologists,

I have known Jean Stanley, Ph.D. since February 2008, when we met at a professional conference. Since that time, we have had frequent face to face contact at other conferences, over the telephone, and via email. Based upon my contact with her, I believe I have had sufficient knowledge of Dr. Stanley to write this letter.

Most of my contact with Dr. Stanley has been in the form of case consultation. We respect each other's professional and clinical skills, so she is one of the persons I seek out for consultations and I am one of the persons she seeks out for consultations. Based upon these consultations, I am aware that Dr. Stanley has strong assessment and therapy skills.

With regard to Dr. Stanley's assessment skills, she appears comfortable working with a variety of clinical and forensic assessment instruments and we have had consultations on a variety of assessment tools, with the most common being the Minnesota Multiphasic Personality Inventory - 2, Personality Assessment Inventory, Psychopathic Personality Inventory - Revised, Paulhus Deception Scales, Level of Service Inventory - Revised, Level of Service/Case Management Inventory, Static-99, Static-2002, Matrix 2000, Sexual Violence Risk – 20, and History Clinical Risk – 20.

I have been impressed with Dr. Stanley's ability to combine collateral information with interview information and test results, to come-up with parsimonious and accurate assessment opinions. She shows a good understanding of the relevant scientific research regarding the assessments she conducts. She uses her knowledge of the research as a foundation of her opinions. When reviewing her work, it is apparent she adheres to scoring rules but she is also capable of imbuing her reports and opinions with her many years in the field.

From time to time, Dr. Stanley has shared her written reports with me. Dr. Stanley has high-quality writing skills, which should come as no surprise given that she has worked as a mental health professional for approximately two decades. As might be expected from someone with this much experience, Dr. Stanley does a good job of only addressing the referral question. The findings in her report are conservative and do not extrapolate beyond the available information because she makes sure that any findings not based upon reasonable psychological certainty are not included in her report.

With regard to her treatment skills, Dr. Stanley and I have consulted about both her forensic and clinical treatment clients. Dr. Stanley has knowledge of a wide array of clinical and empirical writings that pertain to the therapy she conducts. While she does provide treatment services for a wide variety of clients, the scope of her practice would increase, if she was a licensed psychologist. This would result in a noteworthy resource for clients in her geographic area. As it stands right now, I'm aware that Child Protective Services is seeking to contract with Dr. Stanley to do psychological assessments but she first must be a licensed psychologist. Her licensure as a psychologist would also enable her to provide psychological services for the local Veteran's Administration Clinic. Additionally, a nurse practitioner and the four pediatric clinics in her area regularly seek the services of a licensed psychologist.

A primary reason that Dr. Stanley and I continue to seek out each other for consultations is her relaxed, nondefensive approach to her work. Dr. Stanley is able to separate herself from her work. She knows that a critique of her work is not a criticism of her professionalism. She has a strong sense of who she is as a professional, which makes it easy to consult with her. My experience with Dr. Stanley at conferences suggests others find her easy to relate to. She appears to have many close collegial relationships.

Dr. Stanley's high-quality work and impressive productivity reveals her work ethic, but she is more than just her work. I have enjoyed getting to know Dr. Stanley as a person. I can see how she cares about others. I have been impressed with Dr. Stanley's sensitivity and kindness. She has good moral character and she does an excellent job maintaining her ethics, even when working with individuals who are lacking in these qualities; and, she has demonstrated over the years her care in seeking consultation where there has been any uncertainty or the need for guidance in performing her work.

I am happy to provide this letter of reference for Dr. Stanley. She will be an asset as a licensed psychologist to the underserved area in which she has her practice. Please contact me if you have any questions.

Sincerely,

Signed electronically: Matthew L. Ferrara, Ph.D.

TEXAS BEHAVIORAL HEALTH EXECUTIVE COUNCIL



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Darrel D. Spinks Executive Director

December 2, 2020

Via U.S. Regular Mail Via Email: kenda@dsedlaw.com

Velma Jean Stanley, Ph.D. c/o Kenda B. Dalrymple 901 South MoPac Expressway Building 1, Suite 280 Austin, TX 78746

Re: Appeal of Denial of Request for License Issuance Application

Dear Dr. Stanley,

The Council is in receipt of your Appeal of Denial of Request for License Issuance Application. In reviewing your application and supporting materials, it was determined that your application does not meet the requirements set forth in Board Rule 463.11.

- 22 TAC §463.11(d)(2) states The Successful completion of an organized internship meeting all of the following criteria:
 - (B) The internship agency must have a clearly designated staff psychologist who is responsible for the integrity and quality of the training program and who is actively licensed/certified by the licensing board of the jurisdiction in which the internship takes place and who is present at the training facility for a minimum of 20 hours a week.
 - (C) The internship agency must have two or more full-time licensed psychologists on the staff as primary supervisors.
 - (I) The internship agency must have a minimum of two full-time equivalent interns at the internship level of training during applicant's training period.

333 Guadalupe, Suite 3-900, Austin, Texas 78701 (Phone) 512-305-7700, (Fax) 512-305-7701 December 15, 2020 Page 2 of 2

On your Formal Internship Verification Form, your supervisor, Dr. Joseph Kartye, answered "No" to (B), (C), and (I). Dr. Kartye's letter submitted to explain his responses further supported that the requirements under 22 TAC §463.11(d)(2) were not met.

22 TAC §882.3 (a) states that if an application for licensure is denied at the staff or committee level, the applicant will have 30 days from the date the denial as shown on the letter to submit a written request to the Council for review by the member board. You have submitted and perfected such a request, therefore your application will be submitted for review by the Texas Board of Examiners of Psychologists at their next regularly held meeting which will be February 11, 2021. That meeting will most likely be held via ZOOM. The general notice of agenda will be posted on the BHEC website found at https://www.bhec.texas.gov/texas-state-board-of-examiners-of-psychologists/important-dates/index.html.

Should you choose to attend, you will be given 10 minutes to address the Board when this matter is reached on the agenda. Prior to the meeting, the Board Members will be presented with all of the information you have submitted thus far. If there is any additional information you would like for them to consider, it must be received in this office **10 days prior**. This will allow the Board's staff time to make and distribute copies to the Board members. Given time constraints, it is unlikely Board members will have time to review any supplemental information presented at the Board meeting.

If you have any questions, please feel free to contact me at 512-305-7720.

Sincerely,

John Marshall Bridges

Staff Attorney

Appeal of Denial of License Application

Kenda Dalrymple < kenda@DSEDLAW.COM >

Tue 12/1/2020 2:16 PM

To: licensing licensing@bhec.texas.gov>; Monica Fiero <monica.fiero@bhec.texas.gov>

Cc: Dr. Jean Stanley < jean@pathwaysfmhs.com>

1 attachments (402 KB)

Appeal of License App Denial to BHEC 12.01.2020.pdf;

Re: Appeal of Denial of License Application

Applicant: Jean Stanley, Ph.D., LPC-S, LSOTP-S

Attn: Licensing Division

I am the attorney for Dr. Jean Stanley, an applicant for a Psychologist license in Texas. Dr. Stanley received a letter, dated November 2, 2020, from Monica Fiero which advised her that her application for licensure had been denied. I have attached Dr. Stanley appeal from the denial of her license application, which is timely submitted within 30 days of the date of the denial letter, as set forth in 22 TAC §882.3. A hard copy of the appeal went out today by certified mail, return receipt requested.

Please acknowledge receipt by reply e-mail.

Best Regards,



Kenda B. Dalrymple, Managing Partner Dalrymple, Shellhorse, Ellis & Diamond, LLP

901 South MoPac Expressway

Building 1, Suite 280

Austin, Texas 78746

Telephone: (512) 623-5433 Direct Line

(512) 472-4845 Main

(512) 576-1271 Cell Phone

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Direct Line: 512-623-5433 Email: kenda@dsedlaw.com

December 1, 2020

BY ELECTRONIC MAIL AND BY CERTIFIED MAIL (RRR) NO. 7019 0160 0000 7188 1834

Attn: Licensing Division Texas Behavioral Health Executive Council 333 Guadalupe Street, Suite 3-900 Austin, TX 78701

Re: Appeal from the denial of License Application

Applicant: Velma Jean Stanley, Ph.D., LPC-S, LSOTP-S

To the Licensing Division:

I am the attorney for Dr. Jean Stanley, LPC-S, LSOTP-S. Please be advised that all future communications between you and your office and Dr. Stanley should be directed to me. Dr. Stanley received your letter, dated November 2, 2020, which denied her application for licensure as a Psychologist because of issues with her formal internship, specifically:

- 1. The supervising psychologist was not present at the training facility for a minimum of 20 hours per week;
- 2. The internship agency did not have two or more full-time psychologists on the staff as primary supervisors; and
- 3. The internship agency did not have a minimum of two full-time equivalent interns at the internship level of training during Dr. Stanley's training period.

The purpose of this letter is to appeal the decision to deny her license application. This appeal letter was filed with BHEC within thirty (30) days of the date of the denial letter and is therefore timely.

Appeal Letter to TSBEP/BHEC Re: Jean Stanley, Ph.D., LPC-S, LSOTP December 1, 2020 Page 2

Dr. Stanley has been a Licensed Professional Counselor-Supervisor and a Licensed Sex Offender Treatment Provider-Supervisor in Lufkin, Texas for 17 years. We have enclosed a copy of her Curriculum Vitae for your review. Dr. Stanley is well-regarded by her peers in Texas for her excellent clinical skills and her dedication to providing access to much-needed mental health services to the people of Texas. Recently, Dr. Stanley was appointed by Governor Abbott as a professional member to the Council on Sex Offender Treatment.

Dr. Stanley has had a thriving private practice in the Lufkin area for many years, and she is actually one of the few Licensed Professional Counselors in East Texas who provides psychological testing. She decided to complete her doctorate in Psychology because it was the highest degree she could obtain in her field, she wanted to be able to teach at the university level in the future, and the Lufkin area had so few doctoral-level mental health professionals and a growing need for psychological care.

At the time Dr. Stanley was pursuing her doctorate degree, the fine details of becoming licensed as a Psychologist were not on her radar. In fact, she did not apply for licensure as a Psychologist until 2018. Dr. Stanley completed her doctoral degree in 2014, shortly after her father died; since that time, she had devoted time to her practice and caring for her elderly mother. Dr. Stanley did not seriously consider applying for licensure as a Psychologist until she was encouraged by a respected colleague to put her doctoral degree into full use and become licensed as a Psychologist in Texas. Dr. Stanley knew there was a desperate need for psychological services in her area and she thought that becoming licensed as a Psychologist would challenge her and open new doors professionally. So even though it had been several years since she obtained her Ph.D., she submitted her application to the Board.

Dr. Stanley earned her doctoral degree in Psychology from North Central University in 2014. NCU is a regionally accredited online university based in Prescott, Arizona. The online aspect initially appealed to Dr. Stanley because of the class flexibility. With her busy practice, it was out of the question for her to drive the distance to either Dallas or Houston to attend an in-person graduate program. Stephen F. Austin State University (SFA) in Nacogdoches used to have a doctoral psychology program but it was discontinued before Dr. Stanley began working on her doctorate in 2008. While SFA has an excellent counseling program, the brick-and-mortar doctoral psychology programs are far from Lufkin, Texas.¹

¹ Texas A & M University is 125 miles from Lufkin; University of Houston is 120 miles from Lufkin; Dallas-area programs are at least 170 miles from Lufkin; Baylor University is 160 miles from Lufkin; and U. T. Austin is 220 miles from Lufkin.

Appeal Letter to TSBEP/BHEC Re: Jean Stanley, Ph.D., LPC-S, LSOTP December 1, 2020 Page 3

In 2010, Dr. Stanley had to submit a proposed pre-doctoral internship site to her internship professor at NCU and list the services she would be providing, the name of the direct supervisor for her daily work, and how she would be supervised by a licensed psychologist. When Dr. Stanley proposed Samaritan Counseling Center (which had two sites in Nacogdoches and Lufkin), it was reviewed by her internship professor and was ultimately approved by NCU. Dr. Stanley completed her formal pre-doctoral internship in January of 2011 at the two locations of the Samaritan Counseling Center in Nacogdoches and Lufkin, Texas. No one from NCU – not her internship professor or any other person - ever questioned whether the internship site complied with TSBEP Rule 463.11.

There is a pressing need for psychological services in the area where Dr. Stanley lives and works. Lufkin, Texas is a primarily rural area with few resources for high-level psychological services or mental health treatment. This area is within a Medically Underserved Area (MUA) and also a Health Professional Shortage Area (HPSA), as designed by the federal Health Resources and Services Administration. The MUA designation is assigned to areas where there are too few primarily care providers and where the population is high poverty, elderly or one with high-infant mortality. The HPSA designation is assigned to geographical areas where there are shortages of primary medical care, dental or mental health providers and where the population is low-income or Medicaid-eligible. The National Health Service Corps assigns a score" to Health Professional Shortage Areas and the scores are used to determine the priorities for the assignment of clinicians. For primary care and mental health services, scores range from 1-25, and the higher the score, the greater the priority for the assignment of professionals.

We have enclosed for review by the Board a summary of the statistics regarding the Lufkin, Texas area and surround counties gathered from data published by the Texas Department of State Health Services and other federal agency reports. In short, there are currently seven (7) clinical psychologists who practice in the area and those psychologists practice in Lufkin and Nacogdoches – not in any of the surrounding counties. In the catchment area (Lufkin and surrounding counties), there are no agencies or private practices with two psychologists on staff. Moreover, there are no agencies or practices where psychologist interns are utilized that have two psychologists on staff. The likelihood that any site in the catchment area has more than one psychology intern is very low.

The primary mission of the Board and BHEC is to protect the public. By protecting the public, the agencies should also facilitate the licensure of mental health professionals to provide much-needed and scarce mental health services to Texans. Other licensing boards, most notably the Texas Medical Board, have waived non-essential requirements for licensure for practitioners who agree to serve in a Medically

Appeal Letter to TSBEP/BHEC
Re: Jean Stanley, Ph.D., LPC-S, LSOTP
December 1, 2020
Page 4
Lindargery and Area or Health P

Underserved Area or Health Professional Shortage Area so there is precedent at the agency level for the waiver we are requesting in this letter.

Dr. Stanley is not a typical applicant for licensure because of her years of experience providing mental health and testing services in a rural and critically underserved area of the State. The fact that Dr. Kartye was not on-sight for 20 hours a week during her formal internship in 2010-2011; the lack of another intern at the internship site; and the fact that the site did not have at least two staff psychologists back in 2010-2011 will have *no* impact on Dr. Stanley's ability to provide excellent psychological services *today* to Texans who live in a federally-designated MUA and HPSA areas and who lack access to critically-important, high-level psychological services. If BHEC and the TSBEP are serious about facilitating access to psychological care for all Texans, this case provides a perfect opportunity to make that happen.

Dr. Stanley was chagrined to learn of the deficiencies in the internship program – especially since the internship was 9 years ago and she cannot go back and correct the problems. Dr. Stanley completed her doctoral degree in 2014; she passed the Board's Jurisprudence Exam on May 30, 2018; she completed her post-doctoral supervision; and she passed the EPPP on August 31, 2020. If she is licensed as a Psychologist, she will stay in the Lufkin area and provide the residents with much-needed access to high-level psychological services.

By this letter, Dr. Stanley respectfully requests that the TSBEP and BHEC waive the cited deficiencies in her formal internship and allow her to obtain her Psychologist license. Dr. Stanley is willing to complete whatever remediation or additional training the Board or BHEC may require and she welcomes the opportunity to discuss this matter further.

Very truly yours,

Kenda B. Dalrymple

Enclosures



Dr. JEAN STANLEY Ph.D., Licensed Clinical Psychologist, Provisional. LPCS, LSOTPS

CLINICAL DIRECTOR

PATHWAYS FORENSIC & MENTAL HEALTH SERVICES, PLLC

103 Wildlife Lane Lufkin, TX 75904

jean@pathwaysfmhs.com / http://www.jeanspathways.com

Phone: (936) 238-3868 (w) FAX: (936) 238-3867

Academic Degrees / Diplomas

PhD.

Northcentral University, Prescott Valley, AZ

(REGIONALLY ACCREDITED) (Dec. 2014)

Major: Doctor of Philosophy with Psychology Specialization Dissertation: "Family Cohesion and Desistance Status in Adultonset Offenders: Examining Relationships and the Moderating

Effects of Gender"

MA

Stephen F. Austin State University, Nacogdoches, TX,

August 2002

Major: Community Counseling

BAAS

Stephen F. Austin State University, Nacogdoches, TX, May 1995

Major: Communications

Minor: Business Administration

Certifications /Licensure / Authorities

Licensed Clinical Psychologist, Provisional (supervision by Dr. Joseph Kartey, LP) Texas Behavioral Health Executive Board (TxBHEC)

Licensed Professional Counselor, Supervisor (LPC-S)

Licensed Sex Offender Treatment Provider Supervisor (LSOTP-S)

Certified Sentence Mitigation Specialist (American College of Certified Forensic Counselors)

Certified Criminal Justice Addictions Specialist (American College of Certified Forensic Counselors)

Clinically Certified Forensic Counselor (American College of Certified Forensic Counselors) Certified Sex Offender Deregistration Evaluation Specialist Texas Council on Sex Offender Treatment (CSOT)

State Appointments

Board Member: Texas Council on Sex Offender Treatment, appointed October 1, 2020 by Texas Governor Gregg Abbott

Professional Associations

National Association of Forensic Counselors (NAFC)
Association of Family and Conciliation Courts (AFCC)
Texas Association of Family and Conciliation Courts (TX-AFCC)
Association for the Treatment of Sexual Abusers (ATSA)
Texas Association for the Treatment of Sexual Abusers (TxATSA)
Texas Counselors Association (TCA)
American Psychotherapy Association (APA)
Texas Trial Lawyers Association (TCDLA affiliate)
Texas District & County Attorneys Assn (TDCAA affiliate)

Work with representatives from and become familiar with the following entities.

Adult criminal & family court exposure

- Family Law attorneys (i.e. guardians ad litem, amicus)
- United States Federal Probation
- Community Supervision and Corrections
- Juvenile Probation Community
- Texas Juvenile Justice Department
- Texas Department of Criminal Justice Parole Division
- County Courts at Law Judges (direct referrals)
- District Court Judges (direct referrals)
- Drug & Family Courts operated through probation department
- Offices of the District Attorney
- County Attorneys in charge of misdemeanor prosecution
- Criminal defense attorneys

Criminal and Family Law Forensic Mental

Health Experience

May 2012 to present, Owner, Pathways Forensic & Mental Health Services, Lufkin, Texas

Feb. 2004 to October 2012: Therapist, psychologist trainee internship 2010-2011

Responsible for providing individual and group counseling for clients referred directly to me by local judges, Civil Litigation attorneys, Federal Probation, adult and juvenile probation officers, and criminal defense and civil litigation attorneys. The clients include adult and juvenile offenders, and adults and children involved in high-conflict divorce proceedings.

General individual and group counseling issues addressed:

- Sex offender risk assessments for Federal offenders
- Sex offender specific evaluations for Federal offenders
- Mental health evaluations for Federal offenders
- Substance abuse evaluations for Federal offenders
- Retained as an expert for pre-trial risk assessments
- Retained as trial consultant on child molestations cases.
- Anger Management
- Batterers intervention (past)
- Substance abuse counseling
- Impulse control counseling
- Sex offender treatment provider
- Pre-trial counseling for sexual behavior problems
- Counseling for mental health issues
- Cooperative parenting counseling
- Parenting Coordination Services
- Custody evaluations which often involve issues related to sexual abuse outcries
- Development of child specific parenting plans
- Divorce adjustment counseling for children
- Developed curriculum and taught (3 years) My Two Homes
 Class for divorcing parents in Angelina and Nacogdoches
 Counties (average 25 people per class monthly)
- Retained as an expert for one-sided social study in out-of-state custody / access litigation

Judicial appointments to serve in the following capacities:

- Child custody evaluator
- Family crisis intervention counselor
- Parenting coordinator
- Parenting Facilitator
- Sexual risk evaluator
- Referrals to parenting class: "My Two Homes." **
- Sex offender treatment provider
- Mental Health Professional for Collaborative Law cases

**"My Two Homes": A curriculum I developed for parents named in Petitions for Divorce or Suits Affecting Parent-Child Relationships. The handbook was used as a supplement to an educational presentation by me about the impact of high-conflict parental relationship on children. The presentation factored in the developmental, age-appropriate needs of the children, including special needs kids. Parents were taught cooperative parenting techniques and challenged to find motivation to "behave" before and after litigation.

Experienced in the administration, scoring, interpretation and report writing using the following instruments:

- MMPI-2 Minnesota Multiphasic Personality Inventory
- MCMI-III Millon Clinical Multiaxial Inventory
- PAI Personality Assessment Inventory: Adolescent, and Public Safety
- NEO Personality Inventory-Revised
- PDS- Paulhus Deception Scales
- LSI-R Level of Service Inventory Revised
- ADS Anger Disorder Scale
- KBIT-2 Kaufman Brief Intelligence Test -2
- WASI Weschler Abbreviated Scale of Intelligence
- WAIS Weschler Adult Intelligence Scales
- WISC Weschler Intelligence Scale for Children
- TONI Test of Non-verbal Intelligence
- ASI Addiction Severity Index
- SASSI-3 Substance Abuse Subtle Screening
- SASSI-A Substance Abuse Subtle Screening, Adolescents
- AASI-3 Abel Assessment for Sexual Interest
- JSOAP-II Juvenile Sex Offender Assessment Protocol
- Jesness Inventory juvenile delinquency assessment
- TOVA Test of Variable Attention
- SVR 20 Sexual Violence Risk Assessment
- HCR 20 Violence Risk Assessment
- PCL-R Hare Psychopathy Checklist- Revised

Treatment and Assessments services for various agencies:

- Administered risk assessments for family law attorneys in custody cases involving sexual outcries
- Pre-trial risk assessments for defense attorneys of those accused of sex crimes
- Sentence mitigation evaluations non-sexual cases
- Contracted with United States Federal Probation Department to do Sexual Interest, Sex Offender Specific, Mental Health, and Substance Abuse Assessments

- Service provider for Angelina County Community Supervision and Corrections Department: sex offenders, cognitive therapy, individual mental health therapy.
- Contracted with Angelina County Juvenile Probation Department to conduct sexual interest and treatment needs assessments; mental health treatment
- Contracted with Polk County Juvenile Probation Department to conduct sexual interest and treatment needs assessments for Trinity, San Jacinto, and Polk Counties...
- Administered mental health assessments for probationers referred by Angelina and Nacogdoches Counties with purpose of making appropriate referrals.
- Contracted with Angelina County as vendor responsible for substance abuse assessments using the Addiction Severity Index (ASI)
- Administered risk assessments for Nacogdoches County Juvenile Probation in relation to placement and treatments needs related to juvenile sex offenders.

Further, I have served as an expert witness numerous times each under Daubert challenge in the following:

- Child custody evaluation hearings
- High conflict divorce / family law cases
- Divorce proceedings
- CPS placement hearings
- CPS Termination of Rights hearings
- Sex offender sentencing hearings
- Sex offender prosecution proceedings
- Sex offender registration hearings
- Sex offender hearings on Motions to Revoke Probation

Group Facilitator Experience Therapy

Provide counseling / classroom instruction for adults and juveniles.

The following behavioral groups required initial assessment and classroom instruction:

- Sex Offender Risk Assessments and Treatment: Angelina County Adult Probation (10 years)
- Sex Offender Risk Assessments and Treatment US Federal Probation (10 years)
- Cognitive Behavioral Therapy group: Nacogdoches County Adult Probation (2 years)
- Sex Offender Risk Assessments and Treatment as requested: Angelina County Juvenile Probation (10 yrs)
- Sex Offender Risk Assessments and Treatment: Nacogdoches County Juvenile Probation (12 years)
- Sex Offender Assessment and Treatment: Houston County Juvenile Probation (5 years)
- Cognitive Behavioral Therapy: Angelina County

Community Corrections and Supervision (CSCD) ISF (1 year)

Batterers intervention class Houston County Court at Law (2 years)

Other Group Therapy Facilitator Experience in previous employment:

- a. Group Therapy Facilitator for Texas Youth Commission Resocialization Program
- b. Facilitator TYC Core therapy groups for youth

March 3, 2003 to February 17, 2004

As an Institutional Caseworker III, for Texas Youth Commission I performed the following correctional mental health duties:

- Individual and group counseling and case management of incarcerated male youth age 14-21 (youth were adjudicated delinquent and assigned to the Emotionally Disturbed/Mental Health Needs Program
- Teach components of Resocialization Program
- Develop monthly Individual Case Plans (ICP) with ongoing assessment and treatment planning
- Coordinate release planning to include referrals for individual, family, sex offender, chemical dependency and parenting counseling
- Facilitate family contact and involvement in each youth's treatment.
- Participate in monthly Phase Assessment Team to evaluate progress
- Participation in weekly clinical staffing sessions to update treatment needs
- Maintain documentation according to TYC policy and procedures
- Conduct daily core groups to foster opportunity to progress in the TYC Resocialization Program
- Lead groups to teach new positive methods of problemsolving and taking responsibility for actions within the student's environment
- Prepare monthly case management reports
- Maintain networking channels to help facilitate transition services that will assist in reintegrating the youth back into their communities
- Coordinate conditions of parole through youth parole officers
- Help youth develop transition plans that include socialbehavioral, educational, vocational, family and personal goals.

- Maintaining ongoing evaluation for appropriate placement of youth going on parole or to other placement options.
 - Conducting a meeting with offenders giving them the results of their testing and subsequent staffing status
 - Assessed and counseled with population of offenders with nearly exclusively diagnosed with anti-social personality disorder

Information regarding experience prior to 2004 available upon request.

<u>Professional Speaking</u> Experience:

Stanley, J. (2016, March). Sex Offender Treatment: The quiet partner in the prevention of future sexual abuse." Power point presented at the Mission Possible XXI, Stephen F. Austin State University, Nacogdoches, TX.

Stanley, J. (2016, September). Sex Offender Treatment: The quiet partner in the prevention of future sexual abuse." Power point presented at the National Association of Forensic Counselors conference, Las Vegas, NV.

Curriculum Development And Copyrights

"Freedom Thinking". Cognitive Behavioral Intervention for Offenders and Others with Anti-Social Tendencies."

A 12-week cognitive intervention curriculum written and developed by me for adult offenders or individuals with anti-social behavioral tendencies. The program has been utilized for sanctions and/or education training by the following entities:

- United States Federal Probation Department
- Angelina County Adult Probation ISF
- Angelina County Adult Probation (outpatient)
- Nacogdoches County Adult Probation
- Regions 4 & 5 Department of Family and Protective Services
 Parenting intervention for parents with major infractions

"Thoughtbusters: A Juvenile Offender's Guide to Right Thinking."

An 8-week cognitive behavioral intervention curriculum written and developed by me for juvenile offenders or non-adjudicated juveniles with conduct disorder. The

program has been utilized for sanctions and/or education training by the following entities:

- Angelina County Juvenile Probation Department
- US Federal Probation Department
- Houston County Juvenile Probation Department
- For individual counseling for juveniles through Samaritan Counseling Center in Lufkin and Nacogdoches Counties.

"My Two Homes": A handbook for parents named in petitions for divorce or suits affecting parent-child relationships. The handbook was used a supplement to an educational presentation about the impact of high-conflict parental relationship on children. The presentation factored in the developmental, age-appropriate needs of the children, including special needs kids. Parents were taught cooperative parenting techniques and challenged to find motivation to "behave" before and after litigation.

STATISTICS REGARDING THE LUFKIN, TEXAS AREA

1. Population of Lufkin (2018):

35,510

2. Population of Nacogdoches (2108): 32,877

3. The Health Professionals Shortage Area designation in Lufkin, Texas and all surrounding counties (catchment area) by scores on a 0-25 scale:

a. Lufkin (Proper) - 13

Lufkin (Rural) - 17

- b. Nacogdoches (Proper) 13 Nacogdoches (Rural) 19
- c. Shelby County 19
- d. San Augustine County 19
- e. Polk County 17
- f. Sabine County 17
- g. Cherokee County 16
- h. Trinity County 17
- i. Rusk County 14
- i. Houston County 18
- 4. Psychologists: Number of Licensed Clinical Psychologists available in catchment area:
 - a. Lufkin (4), all in private practice.
 - b. Nacogdoches (3), 1 works at the VA (not an intern site) and the other 2 are in private practice
 - c. Livingston (0)
 - d. Shelby (0)
 - e. Polk (0)
 - f. San Augustine (0)

5. Facilities

- a. In the catchment area with two psychologists onsite (0)
- b. In the catchment area in which psychologist interns are utilized AND have two psychologists onsite 0
- c. In the catchment area with a psychologist onsite
 - Rusk State Hospital has one psychologist (per website); 150 miles from Lufkin, round trip
 - ii. VA Lufkin has one psychologist, not an intern site
 - iii. Stephen F. Austin State University has internship for doctoral-level "school psychology" students whose internship program is tied "exclusively to the PhD school psychology program." SFASU does not have an intern site available to clinical psychology interns.
 - iv. Burke Center Headquartered in Lufkin has psychiatrists (medical doctors) that mostly do telehealth. There are no psychologists on staff. This site is widely used for LPC interns because of its affiliation with the SFASU Counseling Master's program.



Dalrymple, Shellhorse, Ellis & Diamond, L.L.P. 901 South MoPac Expressway
Barton Oaks Plaza 1, Suite 280
Austin, TX 78746

Attn: Licensing Division Texas Behavioral Health Executive Council 333 Guadalupe Street, Suite 3-900 Austin, TX 78701

PRIVILEGED AND CONFIDENTIAL

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TEXAS BEHAVIORAL HEALTH EXECUTIVE COUNCIL



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George Francis, IV, M.B.A.
Ben Morris, M.Ed.
Jennifer Smothermon, M.A.

Darrel D. Spinks
Executive Director

March 2, 2021

Via Regular Mail Via Email: kenda@dsedlaw.com

Velma Jean Stanley, Ph.D. c/o Kenda B. Dalrymple 901 South MoPac Expressway Building 1, Suite 280 Austin, TX 78746

Re: Appeal of Denial of Request for License Issuance Application

Dear Dr. Stanley,

The Council is in receipt of your Appeal of Denial of Request for License Issuance Application. In reviewing your application and supporting materials, it was determined that your application does not meet the requirements set forth in Board Rule 463.11.

22 TAC §463.11(d)(2) states The Successful completion of an organized internship meeting all of the following criteria:

- (B) The internship agency must have a clearly designated staff psychologist who is responsible for the integrity and quality of the training program and who is actively licensed/certified by the licensing board of the jurisdiction in which the internship takes place and who is present at the training facility for a minimum of 20 hours a week.
- (C) The internship agency must have two or more full-time licensed psychologists on the staff as primary supervisors.
- (I) The internship agency must have a minimum of two full-time equivalent interns at the internship level of training during applicant's training period.

333 Guadalupe, Suite 3-900, Austin, Texas 78701 (Phone) 512-305-7700, (Fax) 512-305-7701 On your Formal Internship Verification Form, your supervisor, Dr. Joseph Kartye, answered "No" to (B), (C), and (I). Dr. Kartye's letter submitted to explain his responses further supported that the requirements under 22 TAC §463.11(d)(2) were not met.

22 TAC §882.3 (a) states that if an application for licensure is denied at the staff or committee level, the applicant will have 30 days from the date the denial as shown on the letter to submit a written request to the Council for review by the member board. You have submitted and perfected such a request. Your application was submitted for review by the Texas Board of Examiners of Psychologists at their regularly held meeting which was February 11, 2021. At that meeting no final decision was made and instead the discussion was tabled until their next regularly scheduled meeting which is May 13th, 2021. That meeting will most likely be held via ZOOM. The general notice of agenda will be posted on the BHEC website found at https://www.bhec.texas.gov/texas-state-board-of-examiners-of-psychologists/important-dates/index.html.

Should you choose to attend, you will be given 10 minutes to address the Board when this matter is reached on the agenda. Prior to the meeting, the Board Members will be presented with all of the information you have submitted thus far. If there is any additional information you would like for them to consider, it must be received in this office 10 days prior. This will allow the Board's staff time to make and distribute copies to the Board members. Given time constraints, it is unlikely Board members will have time to review any supplemental information presented at the Board meeting.

If you have any questions, please feel free to contact me at 512-305-7720.

Sincerely,

John Marshall Bridges

Staff Attorney

From:

To:

Subject: Supporting Materials for Dr. Velma Jean Stanley"s Application Denial Appeal

Date: Friday, February 5, 2021 3:19:06 PM

Attachments: <u>image001.png</u>

Judge Herrington Support Letter for Dr. Stanley.pdf

Matthew L. Ferrara, Ph.D. Support Letter for Dr. Stanley.pdf

Importance: High

Good afternoon!

I am the attorney for Dr. Velma Jean Stanley (she goes by Jean). Dr. Stanley applied for full licensure as a Psychologist last year and was granted Provisional Status. After she passed the EPPP, she filed for full licensure and was informed that her application was denied. We timely filed an appeal and her application denial appeal will be heard by the TSBEP at the meeting on February 11, 2021.

Please see attached two letters of support for Dr. Jean Stanley's application for licensure. We respectfully request that these letters be sent to the Board members for their review prior to the meeting next week.

Unfortunately, there is one more letter that has gone AWOL and we are trying to obtain another copy. The writer MAILED it to me and it never made it to my office. If we are able to get another copy, I will send it to you under separate cover.

Thank you for your kind assistance with this matter. Please let me know if you have any questions.

Best Regards,



Kenda B. Dalrymple, Managing Partner Dalrymple, Shellhorse, Ellis & Diamond, LLP 901 South MoPac Expressway Building 1, Suite 280

Austin, Texas 78746

Telephone: (512) 623-5433 Direct Line

(512) 472-4845 Main

(512) 576-1271 Cell Phone

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TEXAS BEHAVIORAL HEALTH EXECUTIVE COUNCIL

333 Guadalupe, Suite 3-900 Austin, Texas 78701 (512) 305-7700 Phone

PSYCH APP COMMITTEE MEMBERS

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

APPLICATIONS COMMITTEE REVIEW - PSYCHOLOGY

Licensing Staff has reviewed an application for licensure for the applicant listed below and has identified an area(s) of concern. Licensing Staff is now seeking the guidance from the Applications Committee.

APPLICANT INFORMATION						
Applicant's Name:	Tanga Franklin		Today's Date:	April 27, 2021		
App Rec'd Date:	Feb. 10, 2021	. 10, 2021		Nov. 13, 2022 (Lic. exp)		
Application Type:	Request for License Issuance	uest for License Issuance		Feb. 28, 2010		
AREA(S) OF CONCERN						
Formal Internship Experience Dates:		Post-Doctoral Experience Dates:				
Use of doctoral program hours 22 TAC 463.11(b).		\boxtimes	Gap rule 22 TAC 463.11(c)(2) 11 year gap: Feb. 10, 2010 to Feb. 10, 2021			
Other:						
ADDITIONAL INFORMATION						
Dr. Franklin have been applicant for licensure since 2011 and has submitted 4 applications (open 2 years each) prior to the one currently under review. Dr. Franklin has on record 19 (nineteen) EPPP attempts since Feb. 2013; finally passing in Nov. 2020. Formal Internship: 2075 hrs - March 1, 2008 to Aug. 24, 2009 Post-Doc: 2010 hrs - March 1, 2010 to March 1, 2011						
Initial Review: Monica Fiero, Licenso monica.fiero@bhec.tex		e & Permit Specialist III - Psychology (as.gov				
Secondary Review: Direct Supervisor: Stephanie Woodruff Division Manager: Maricela Ramirez						
Enclosures:	• Request for Gap Waiver (second request from applicant)					

EXPLANATION FOR WHY GAP OF SEVEN OR MORE YEARS from when My Degree was CONFERRED. (2-2010) to date of application (3-2021). Listed below are the activities that I have been doing and involved in to stay abreast of in Psychology

2011-2020 – From this time frame until I passed it in 2020, I have consistently been studying for the EPPP. This consisted of but not limited to:

$\label{eq:epper} \textbf{EPPP Activities that I paid for a subscription to online access to study books and Testing} \\ \textbf{Program}$

2011-2012 – Purchased and was involved in an online EPPP Study Course 2012-2013 – Participated in an EPPP Study group with two other people 01 -2015 through 1-2016 Paid and Took Individual Consulting for the EPPP 04-2015 – I myself took ill. During this time I took a Self-Paced EPPP online Workshop 5-17-2017 – 8-15-2017 - Paid and Took EPPP Tutoring one on one 01-2018 EPPP Coaching

These are the activities I was involved in IN ADDITION to Studying for the EPPP.

4-11-2014 – Attended Workshop entitled "Cultural Perspective: An Interactive Approach to Identify. And Adding Biases"

6-13-2014 - Attended Workshop entitled "DSM-5 with Tom Burdenski, PhD

8-25-2014 - Attended Workshop entitled "DSM-5 Video Series

12- 2014 and 2015. Husband took ill and I had to care for him.

01-09-2015. Workshop Preparing Your Practice For Your Departure

2021 - Preparing Documentation for Licensed Psychologist Application I joined the Fort Worth Area Psychological Association (FWAPA) and the Dallas Psychological Association.

TEXAS BEHAVIORAL HEALTH EXECUTIVE COUNCIL



MEMBERS OF THE COUNCIL

Gloria Z. Canseco, M.A., Chair

Dr.h.c. Sarah Abraham John K. Bielamowicz Timothy M. Brown, M.S.W. Steve Christopherson, M.S. Susan Fletcher, Ph.D. George Francis, IV, M.B.A. Ben Morris, M.Ed. Jennifer Smothermon, M.A.

Darrel D. Spinks Executive Director

April 28, 2021

Via U.S. Regular Mail Via Email: tfpmkeene@aol.com

Dr. Tanga Franklin, Ph.D. 6308 Talgarth Ct. Fort Worth, TX 76133

Re: Consideration of Gap Issue.

Dear Dr. Franklin,

The Council is in receipt of your Application. In reviewing your application and supporting materials, it was determined that your application does not meet the requirements set forth in Board Rule 463.11 (c)(2):

- c) General Requirements for Supervised Experience. All supervised experience for licensure as a psychologist, including the formal internship, must meet the following requirements:
 - (2) Gaps Related to Supervised Experience.
- (A) Unless a waiver is granted by the Council, an application for a psychologist's license will be denied if a gap of more than seven years exists between the date an applicant's doctoral degree was officially conferred and the date of the application.
- (B) The Council shall grant a waiver upon a showing of good cause by the applicant. Good cause shall include, but is not limited to:
- (i) proof of continued employment in the delivery of psychological services in an exempt setting as described in §501.004 of the Psychologists' Licensing Act, during any gap period;
- (ii) proof of professional development, which at a minimum meets the Council's professional development requirements, during any gap period;
- (iii) proof of enrollment in a course of study in a regionally accredited institution or training facility designed to prepare the individual for the profession of psychology during any gap period; or
- (iv) proof of licensure as a psychologist and continued employment in the delivery of psychological services in another jurisdiction.

Your degree was conferred in February, 2010 but your Application was submitted in December of 2020.

Your application was considered by the applications subcommittee who recommended full Board review. Normally they might issue a denial after which 22 TAC §882.3 (a) states that if an application for licensure is denied at the staff or committee level, the applicant will have 30 days from the date the denial as shown on the letter to submit a written request to the Council for review by the member board. As per our phone conversation on 4/28/2021 you wished to have your Gap situation expedited for consideration before the full Board on May 13, 2021 instead of having to wait until August 12, 2021. Therefore, your application will be submitted for review by the Texas Board of Examiners of Psychologists at their next regularly held meeting which will be May 13th, 2021. That meeting will most likely be held via ZOOM. The general notice of agenda will be posted on the BHEC website found at

https://www.bhec.texas.gov/texas-state-board-of-examiners-of-psychologists/important-dates/index.html.

Should you choose to attend, you will be given 10 minutes to address the Board when this matter is reached on the agenda. Prior to the meeting, the Board Members will be presented with all of the information you have submitted thus far. If there is any additional information you would like for them to consider, it must be received in this office **10 days prior**. This will allow the Board's staff time to make and distribute copies to the Board members. Given time constraints, it is unlikely Board members will have time to review any supplemental information presented at the Board meeting.

If you have any questions, please feel free to contact me at 512-305-7720.

Sincerely,

John Marshall Bridges Staff Attorney 465.13. Personal Problems, Conflicts and Dual Relationship.

Action: Proposed Amendment

Comment: The proposed amendment is intended to clarify the requirements that are currently

in the rule.

§465.13. Personal Problems, Conflicts and Dual Relationships

(a) In General.

- (1) Licensees <u>shall</u> 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 <u>shall</u> seek professional assistance for any personal problems, including alcohol or substance abuse likely to impair their competency.
- (3) Licensees <u>shall</u> 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) A licensee shall conduct the practice of psychology with the best interest of a patient, client, supervisee, student, or research participant in mind. 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 shall 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 <u>shall must</u> 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) If a licensee has reason to believe that a harmful dual relationship exists or may arise, the licensee shall take reasonable steps to ensure the wellbeing and best interest of the affected person is placed ahead of the licensee's interests.

 Reasonable steps include obtaining professional consultation or assistance, to determine whether the existing or potential dual relationship is likely to impair the

licensee's objectivity or cause harm to the other party. Licensees shall withdraw from any professional or non-professional relationship if they would be precluded from entering the relationship under this rule. 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 <u>shall</u> do not provide psychological services to a person with whom they have had a sexual <u>or dating</u> relationship.
- (5) Licensees shall do not terminate psychological services with a person in order to have a sexual or dating relationship with that person. Licensees do not terminate psychological services with a person in order to have a sexual or dating relationship with individuals who the licensee knows to be the parents, guardians, spouses, significant others, children, or siblings of the client.

465.13. Personal Problems, Conflicts and Dual Relationship.

Action: Proposed Amendment

Comment: The proposed amendment is intended to clarify the requirements that are currently

in the rule.

§465.13. Personal Problems, Conflicts and Dual Relationships

(a) In General.

- (1) Licensees <u>shall</u> 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 <u>shall</u> seek professional assistance for any personal problems, including alcohol or substance abuse likely to impair their competency.
- (3) Licensees <u>shall</u> 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) A licensee shall conduct the practice of psychology with the best interest of a patient, client, supervisee, student, or research participant in mind. 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 shall 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 <u>shall must</u> 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) <u>Licensees shall withdraw from any professional or non-professional relationship</u>
 <u>if they would be precluded from entering the relationship under this rule. If a licensee has reason to believe that a harmful dual relationship exists or may arise, the licensee shall take reasonable steps to ensure the wellbeing and best interest of the affected person is placed ahead of the licensee's interests. Reasonable steps</u>

include obtaining professional consultation or assistance, to determine whether the existing or potential dual relationship is likely to impair the licensee's objectivity or cause harm to the other party. 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 <u>shall</u> do not provide psychological services to a person with whom they have had a sexual or dating relationship.
- (5) Licensees shall do not terminate psychological services with a person in order to have a sexual or dating relationship with that person. Licensees do not terminate psychological services with a person in order to have a sexual or dating relationship with individuals who the licensee knows to be the parents, guardians, spouses, significant others, children, or siblings of the client.

463.11. Supervised Experience Required for Licensure as a Psychologist.

- (f) Licensure Following Respecialization.
 - (1) In order to qualify for licensure after undergoing respecialization, an applicant must demonstrate the following:
 - (A) conferral of a doctoral degree in psychology from a regionally accredited institution of higher education prior to undergoing respecialization;
 - (B) completion of a formal post-doctoral respecialization program in psychology which included at least 1,750 hours in a formal internship;
 - (C) completion of respecialization within the two year period preceding the date of application for licensure under this rule; and
 - (D) upon completion of the respecialization program, at least 1,750 hours of supervised experience obtained as a provisionally licensed psychologist (or under provisional trainee status under prior versions of this rule).
 - (2) An applicant meeting the requirements of this subsection is considered to have met the requirements for supervised experience under this rule.
 - (3) The rules governing the waiver of gaps related to supervised experience shall also govern any request for waiver of a gap following respecialization.

(g) Remedy for Incomplete Supervised Experience.

- An applicant who has completed at least 1,500 hours of supervised experience in a formal internship, 1,500 hours of supervised experience following conferral of a doctoral degree, and who does not meet all of the supervised experience qualifications for licensure set out in subsections (a). (c), and (d) of this rule or rule 465.2, may petition for a waiver or modification of the areas of deficiency. An applicant may not however, petition for the waiver or modification of the requisite doctoral degree or passage of the requisite examinations.
- (2) The Council may waive or modify a qualification identified in paragraph (1) if the prerequisite is not mandated by federal law, the state constitution or statute, or 22 TAC Part 41.
- (3) The Council may approve or deny a petition under this subsection, and in the case of approval, may condition the approval on reasonable terms and conditions designed to ensure the applicant's education, training, and experience provide reasonable assurance that the applicant has the knowledge and skills necessary for entry-level practice as a licensed psychologist.

From: general

Sent: Wednesday, March 10, 2021 10:34 AM

To: Diane Moore; Brenda Skiff

Subject: Fw: Public Comment Social Media

From: Olivia Perez <olivia821@aol.com>
Sent: Wednesday, March 10, 2021 4:06 PM
To: general <general@bhec.texas.gov>
Subject: Public Comment Social Media

To BHEC and TSBEP,

I am in disagreement with the definition of social media as outlined in the proposed document:

"Social media, as that term is used herein, 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 other forms of social networking."

Texting, emailing, and instant messaging are NOT social media and are instead communication platforms utilized between two parties.

A licensee under the board would be put under unduly onerous scrutinization of personal communications if the definition of social media remains as stated in the document.

Olivia Perez, LSSP Houston, TX

From: general

Sent: Friday, March 5, 2021 1:11 PM Brenda Skiff; Diane Moore

Subject: Fw: Public Comment on Guidelines for Using Social Medial & Electronic Communication

From: Lisa Daniel < lisa_m_daniel@hotmail.com>

Sent: Friday, March 5, 2021 7:01 PM

To: general < general@bhec.texas.gov>; Lisa Daniel < ldaniel@etbu.edu>

Subject: Public Comment on Guidelines for Using Social Medial & Electronic Communication

Good afternoon. Hope you are doing well.

I do not agree that the inclusion of "email" should be included in these guidelines. This is something that is very different from using social media websites and is even very different from texting and other means of communication listed in the draft. Many clients are unable or unwilling to attend meetings in person and some are additionally unable or unwilling to participate in conversation over the phone. Some clients prefer email communication over other methods. By restricting or limiting the use of email this in turn will likely make it more difficult to communicate in a variety of ways to clients which in turn will lead to poorer communication, understanding, and services to and for clients. This may also lead to a lessened ability to treat individuals. It is appropriate to set guidelines for "true" social media such as Facebook, Twitter, Snapchat, etc. but the use of email has been an effective tool that can be used to indirectly promote client mental health. Can you address/review what is currently in place for the use of email pertaining to rules, regulations, and guidelines by the Council?

Thank you for all that you do to help practitioners help others!

Lisa Daniel

From: general

Sent: Thursday, March 4, 2021 5:03 PM

To: Diane Moore; Brenda Skiff

Subject: Fw: Brief comments on proposed Guidelines for Using Social Media and Electronic

Communications

From: Dr. Richard A. Warshak <doc@warshak.com>

Sent: Thursday, March 4, 2021 7:41 PM **To:** general < general@bhec.texas.gov>

Subject: Brief comments on proposed Guidelines for Using Social Media and Electronic Communications

Dear Ms. Skiff,

Following are some observations about the proposed Guidelines.

The Guidelines define social media to include websites and, presumably, websites that contain blogposts or essays. I think it would be preferable if the Guidelines distinguished such types of social media from social media that is used to communicate specifically with a client. For example, it would not be possible to obtain informed consent from each client prior to the client visiting the psychologist's website. Similarly, the licensee cannot create and maintain a website that fulfills the following provision of the Guidelines: "Evaluate the appropriateness of using specific social media with each client. Consideration of individual issues such as culture, language, service needs, access to technology, client comfort and competence with technology." While this would apply to media that is targeted for a specific client, it does not apply to a website that is offered for general viewing, but that might be accessed by a future client.

Re: Maintain current knowledge and skills of all social media platforms pertaining to all individuals, devices, and accounts being used in the psychological practice.

It is not clear what is meant by maintaining "skills of all social media platforms." The licensee may rely on technicians for such skills. Perhaps this provision can be clarified so that it is clear exactly what the Guidelines have in mind. Thanks for allowing comments to these proposed Guidelines. I hope that my comments can be considered by the Board but not made public.

Richard Warshak

From:

general

Sent:

Friday, February 26, 2021 11:00 AM

To:

Diane Moore; Brenda Skiff

Subject:

Fw: Comment on Social Media Guidelines - TSBEP

From: Kimberly Thompson < kimberlysu1985@gmail.com>

Sent: Friday, February 26, 2021 11:23 AM **To:** general < general@bhec.texas.gov>

Subject: Comment on Social Media Guidelines - TSBEP

1) With regards to the following proposed guideline:

"Do not provide professional or psychological advice to specific patients online unless this is done via the secure patient portal of a practice or institution."

This is far too specific, and does not reflect actual technologies that are being used. Platforms that are encrypted to the level required by professional ethics and HIPPA regulations are not necessarily the same technology as a clinician's or practice's client portal. A client portal typically is asynchronous and used for messaging, sharing documents, scheduling, submitting and responding to records requests, and the like. A secure videoconferencing platform may or may not be integrated with/into a clinician's client portal.

2) The title of these guidelines includes both social media and other electronic communication.

There really is no need to redefine social media in the body of the document to include texting, email, and websites. Use of the term "social media" in an unconventional manner is likely to result in future confusion.

3) Rather than specific instructions to turn down requests from clients to connect via personal accounts on social media platforms, it would be more helpful to advise psychologists to consider whether a particular connection on social media might constitute a potentially harmful dual relationship, and to seek consultation when in doubt. This is because the proliferation of social media platforms, and the fluidity with which these platforms are used and integrated with other forms of technology, means that the social media world is constantly changing. Lines between personal and professional are being blurred in ways that are difficult to predict or even track. The more the guidelines can encourage critical thinking (as opposed to providing rules), the better.

Thank you for the consideration of my comments.

Sincerely,

Kimberly D. Thompson

Kimberly D. Thompson, Ph.D.
Licensed Psychologist
1406 Lancelot Avenue
Wolfforth, Texas 79382-3207
(806) 993-3529
Fax: (806) 702-7433
Email: kthompson@nym.hush.com

From:

general

Sent:

Friday, February 26, 2021 10:59 AM

To:

Diane Moore; Brenda Skiff

Subject:

Fw: typo

From: E. Scott Hamilton <escotthamiltonphd@gmail.com>

Sent: Friday, February 26, 2021 11:45 AM **To:** general < general@bhec.texas.gov>

Subject: typo

Ms. Skiff,

In the fourth paragraph of the draft pertaining to electronic communications, does the word *complaint* need to be *compliance*?

E. Scott Hamilton, Ph.D., PLLC Licensed Psychologist Nocona, Texas 76255 940.247.0595

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From:

general

Sent:

Friday, February 26, 2021 10:59 AM

To:

Diane Moore; Brenda Skiff

Subject:

Fw: Social Media Comment

From: Nita Zepeda <nitaruthzepeda@gmail.com>

Sent: Friday, February 26, 2021 3:00 PM **To:** general < general@bhec.texas.gov>

Subject: Social Media Comment

With other, less risky platforms available, I propose that social media usage presents undue risk to practitioner and client. Please consider making recommendations for use of alternative platforms, such as visual meeting, user novel encryption and/or dedicated websites.

Thank you for accepting comments and ongoing concern.

Juanita Zepeda, LSSP Retired

From:

general

Sent:

Friday, February 26, 2021 10:58 AM

To:

Diane Moore; Brenda Skiff

Subject:

Fw: Guidelines for using social media...

From: Rion Hart <rionhart1@gmail.com>
Sent: Friday, February 26, 2021 3:58 PM
To: general <general@bhec.texas.gov>
Subject: Guidelines for using social media...

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Dictated and not proofed so please excuse errors and AutoCorrect oddities.

Ms. Skiff,

I am so pleasantly surprised by the practical approach to the Guidelines. I expected, with a grimace, to see the all to frequent attempt to cover all possible contingencies with an exhaustive and often unrealistic list of rules. These Guidelines instead are exactly what guidelines should be. Please do not yield to any rigid obsessionals who may push for the detailed rules approach that actually stifles our thinking about what we do and how, rather than stimulates it. Many thanks to the contributors.

Kind regards,

Rion

Rion Hart, Ph.D.
1215 Barkdull
Houston, TX 77006
Office 713.522.3133
Direct 713.524.2780
rionhart1@gmail.com

From: TPA Executive Director

To: <u>Diane Moore</u>

Subject: Social Media Guidelines

Date: Tuesday, March 30, 2021 10:49:42 AM

Diane,

Good morning! I know you're busy getting ready for the TSBEP meeting tomorrow. This is just a quick note to say we aren't offering any comments on the social media guidelines. We asked our internal group and they didn't have any suggestions. A first!

Jessica Magee Executive Director

Texas Psychological Association

Office: 512-528-8400
Toll Free: 888-872-3435
Direct: 737-881-7348
http://www.texaspsyc.org



TEXAS STATE BOARD OF EXAMINERS OF PSYCHOLOGISTS



Guidelines for Using Social Media and Electronic Communication

The mission of the Texas State Board of Examiners of Psychologists ("Board") is to protect the public by ensuring that psychological services are provided to the people of Texas by qualified and competent practitioners who adhere to established professional standards. This mission, derived from the Psychologists' Licensing Act, supersedes the interest of any individual or special interest group. It is with this mission in mind that the Board set out to develop these guidelines for using social media. When developing these guidelines, the Board relied in-part upon stakeholder input and the prior work of ASPPB's Social Media Taskforce.

Social media, as that term is used herein, 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 other forms of social networking.

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 are 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.

TSBEP licensees who choose to use social media in their practice should take precautions to be mindful and remain in compliant with all relevant ethical, professional, and legal responsibilities, in addition to policies and guidelines in Texas. Below are guidelines that licensees should consider when using electronic communication and social media with patients.

- Ensure that the proper informed consent is conducted prior to engaging in social media with clients.
- Maintain appropriate professional boundaries with patients and their surrogates, whether online or in person.
- Provide business practices and psychological services in a manner that safeguards the privacy and confidentiality of patients and clients.
- Licensees should evaluate the appropriateness of using specific social media with each client. Consideration of individual issues such as culture, language, service needs, access to technology, client comfort and competence with technology.
- Do not provide professional or psychological advice to specific patients online unless this is done via the secure patient portal of a practice or institution.

- Do not disclose individually identifiable patient health information or post images or videos online.
- Politely turn down requests from patients/clients to connect on personal social networking sites. It may be acceptable to accept requests on professional accounts, provided that the account is used for professional purposes only.
- Communicate and engage in social media in personal and professional settings with civility and respect for others.
- Consider any social media post as permanent, even after it has been deleted.
- Maintain current knowledge and skills of all social media platforms pertaining to all individuals, devices, and accounts being used in the psychological practice.
- Upon discovery of unprofessional or inappropriate content online posted by a professional colleague, notify the individual so that they may remove the post or change their methods of communicating.
- When marketing your practice online, be sure to adhere to the law governing advertising.

The Texas Behavioral Health Executive Council has the authority to discipline licensees for unprofessional behavior relating to the inappropriate use of social media and electronic communication. Disciplinary actions range from an administrative penalty to the revocation of a license. Examples of unprofessional behavior can include:

- Inappropriate communication with patients online
- Online sexual misconduct
- Use of the internet for unprofessional behavior
- Online misrepresentation of credentials
- Online violations of patient confidentiality
- Failure to reveal conflicts of interest online
- Online derogatory remarks regarding a patient
- Any engagement in online discriminatory language or practices online