



What Happens at a Board Meeting

a message from the chair

Kristine M. Herfkens, Ph.D., ABPP

Did you know that the North Carolina Psychology Board meetings are largely public affairs? It is rare for visitors or observers to be present, so we thought this would be a good opportunity to remind you of the public nature of the proceedings, and to explain the process of the meetings.

Board meetings are divided between open and closed session business. Open session items comprise the majority of the agenda; anyone is welcome to attend the open session parts of the meeting. Closed session business is confidential and only open to Board members and staff; much of the closed session business becomes public record at a later date.

The Board meets four times per year. In years past, we scheduled our meetings for three days and tried to cut the length of the meetings down as much as possible over the course of those days. Currently, because we try to do work on our own between meetings by reviewing licensure applications in order to run the meetings as efficiently as possible, we have reduced the meeting length to two days, and sometimes one day. These shorter meetings mean the schedules are packed, without much room to add last minute items to the agenda.

One of the enjoyable aspects of being a Board member is having the opportunity to examine the wide range of issues we are asked to consider. In response to inquiries, typically from psychologists around the state, we spend part of almost all of our meetings talking about the finer interpretations of the North Carolina Psychology Practice Act and Ethical Principles of Psychologists. While I realize that finding enjoyment in such an activity makes me at least a geek (I will not comment on the other Board members), it is a nice intellectual challenge to deal with issues related to the practice of psychology, and to be able to apply, not only basic professional knowledge, but also the guidance provided by the Practice Act and Ethical Principles. Much of our open session meeting is spent in these kinds of discussions.

The meetings follow a predictable format, with both an open and a closed component. In the open meeting, minutes and unfinished business from the previous meeting are considered and addressed, new licensure applications that have been reviewed and approved by both a staff member and Board member between meetings are listed for review, approved supervision changes are listed for review, and questions that staff are unable to answer or with which they request assistance from the Board that have come into the Board office between meetings are discussed. The questions cover a great deal of territory, and may include inquiries about patient records and other types of documentation requirements, recommendations that should be made to patients, new programs that agencies plan to offer, concerns about the way that others practice, the practice of professionals in other disciplines that may be encroaching on the practice of psychology as defined by law, and other related issues. The Board also has a list of projects that we tackle when we have time and/or there is a need, covering areas such as supervision, continuing education, moving the state examination to an online format, telepsychology, and an electronic application for renewal of licensure.

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The closed agenda includes review and discussion of material that is confidential and not subject to public disclosure, including reports on complaints against psychologists that have been investigated and do not require further action, and discussion of specific applicants for licensure. As mentioned earlier, some of this material will become public record at a later date.

Although it does not happen at every meeting, hearings, when they occur, are usually held during regularly scheduled Board meetings. These hearings allow applicants to present additional evidence, for example, to show why they should be permitted, following denial of their application, to sit for licensure. For psychologists licensed by the Board who have been sent a statement of charges which alleges potential violations of the Practice Act and the Ethical Principles, the Board hears the evidence and determines the outcome of the matter. Board members are not privy to information about the disciplinary cases prior to a hearing so that we can listen to evidence objectively and utilize it to reach fair and impartial decisions.

We rarely have observers at the open session of our meetings, but all are welcome. It is worth mentioning that open meetings are not the same as open forums; the public is welcome to observe our meetings, but not participate. There is no discussion with the public at an open meeting, but psychologists and members of the public who have a particular issue to discuss are welcome to submit information and make a written request in advance of the Board meeting, for time on the agenda for the Board to consider.

If you wish to attend a Board meeting, you can find a schedule posted on the last page of the newsletter and also on the Board's website under the "Important Dates" section located on the sidebar. Meetings are generally held in a central location around the state, and you can find information about the meeting time and the address of the meeting facility by contacting the Board office.



Meet the Newest Board Member....Stacie MacDonald, M.A.

After almost 20 years of practicing psychology in the State of North Carolina, I am honored to serve on the NC Psychology Board. I completed my graduate studies at the University of Southern Mississippi, Hattiesburg MS, and then moved to the beautiful Foothills of North Carolina. Working as a Staff Psychologist at Broughton Hospital, Morganton NC, since 1995, I have been provided with meaningful opportunities to support the people served by our State psychiatric system, my colleagues and my community.

I began my career with the Thomas S. Screening Team, serving persons diagnosed with IDD and experiencing mental health concerns. As the needs of the psychiatric hospital system changed, my responsibilities changed as well, and I have provided psychological services in the areas of acute admission services, adolescent services and long-term services. In my career, I have spent focused time on development of treatment planning, psychosocial programming, and working with students of psychology. My current endeavors include being part of a team of professionals bringing Recovery to Practice (RTP) to our mental health system, and taking on the new role of Psychosocial Treatment Center Director at Broughton Hospital. A constant, throughout my years at Broughton Hospital, has been the support and mentoring I have received from my colleagues and the many life lessons I learn from the people around me.

My family keeps me grounded and helps me to stay focused on those things in life that really matter: connectedness, compassion and respect (and YouTube, pizza and our dogs). Thank you for providing me the opportunity to serve on the NC Psychology Board.

Dual Relationship Concerns

Robert Hill, Ph.D., ABPP

Dual or multiple relationship boundaries can sometimes be challenging to negotiate for psychologists, especially when they are encountered without warning. A dual role exists if a psychologist is in a friendship with a client, or in a friendship with a good friend or family member of a client, has a business relationship with a client, or perhaps attends the same church as a client. The APA Ethics Code describes a dual relationship as involving "...a professional role with a person and (1) is at the same time in another role with the same person, (2) at the same time is in a relationship with a person closely associated with or related to the person with whom the psychologist has the professional relationship, or (3) promises to enter into another relationship in the future with the person or a person closely associated with or related to the person" (Standard 3.05).

Not all dual relationships need be avoided, but all require some deliberation. Such relationships should be avoided "if the multiple relationship could reasonably be expected to impair the psychologist's objectivity, competence or effectiveness in performing his or her functions as a psychologist, or otherwise risks exploitation or harm to the person with whom the professional relationship exists" (Standard 3.05). Thus, psychologists, especially those practicing in small towns or rural areas, are sometimes in a position to recognize the presence of a multiple relationship more readily, and to consider the prospect of impaired objectivity or exploitation of a client. While psychologists agree that sexual intimacies with a current or former client are easily identified examples of exploitative dual relationships to avoid, the subtle dual relationship possibilities can be more challenging to contend with.

When considering dual roles, several possible connections can occur: (1) pre-existing relationships, (2) close associations, and (3) future relationships (Koocher & Kieth-Spiegel, 2008). In pre-existing relationships, the psychologist and client may already share another role such as being in a business relationship, or attending the same tennis club. A close association might include the daughter of a friend, or the receptionist at your father's business. A future association would include agreeing to enter into another role with a client or with a person closely associated with a client in the future, such as serving on a community committee together after termination, or the psychologist agreeing to treat a former client's parents. Dual relationships that would not reasonably be expected to impair the psychologist's objectivity or effectiveness, or to cause harm, do not need to be avoided. Practitioners in rural areas especially may elect to tolerate some multiple relationships with due concern to keep client interests in the forefront. However, potentially problematic multiple relationships are to be avoided. Thus, if a fellow school board member or neighbor requests treatment from a psychologist, the dual role would typically be declined in favor of an appropriate referral.

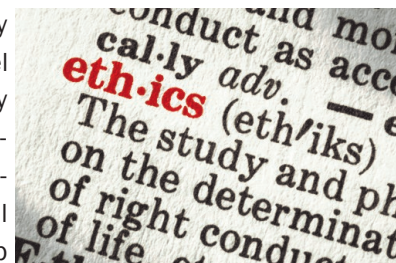
Dual roles can be chosen or declined when anticipated, but can also be encountered unexpectedly, after a professional relationship is established. This includes sometimes awkward scenarios of encountering clients in public settings, such as seeing a client in the waiting room at your physician's office, or at a coffee shop. One psychologist described attending a private dinner at a friend's house, and discovering a current therapy client among the five others seated at the table. Such unexpected encounters require the psychologist to be vigilant about the expectation to maintain the confidentiality of the professional relationship in public, and be creatively tactful in resolving what might be an awkward encounter. One recommended practice, especially for practitioners in rural areas, includes talking with therapy clients about the prospect of a public encounter and discussing expectations early on in the therapeutic relationship.



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When psychologists elect to tolerate a dual relationship they run the risk of creating “fuzzy boundaries” and role confusion for themselves and their clients. Pope and Keith-Spiegel (2008) describe tolerating certain types of dual relationships under the term “boundary crossings,” and include examples such as attempting friendships with current or former clients, attending a special occasion with a client, granting special favors to clients, or patronizing a client’s business. Clients typically would not realize the need for clear professional boundaries, so the psychologist needs to provide an explanation of why the dual relationship circumstance is avoided.



While the psychologist might have good intentions with a boundary crossing, the consequences for that psychologist can be loss of objectivity, divided loyalties, and increased risk. The psychologist who elects to accept a gift from, do business with, or eat lunch with a current client, for example, might step onto the “slippery slope,” leading to role confusion, and unclear boundaries. The psychologist who accepts having coffee with a client incidentally encountered on Saturday might lead the client to assume a special friendship exists, and the psychologist subsequently to find the client’s invitation to a party for the next Friday. Similarly, the psychologist who shops at the retail business of a client intending support might find the client working too hard to provide a special offer, and to leave the therapist feeling indebted in some fashion.

One set of guidelines developed to help with negotiating dual relationship decisions and to avoid the consequence of unethical practices are provided in a web resource by Jeffery Younggren titled: [Ethical Decision-Making and Dual Relationships](#). In this article, Younggren describes six steps or questions a psychologist might ask in the process of evaluating a dual relationship: 1) Is the relationship necessary? 2) Is the relationship exploitive? 3) Who does the relationship benefit? 4) Is there a risk that the dual relationship could damage the client? 5) Is there a risk that the dual relationship could disrupt the therapeutic relationship? 6) Have I adequately documented my decision-making process? These guidelines emphasize the cautious consideration of potential harm, and suggest what others in the ethics and risk management literature observe: be conservative and avoid dual relationships except where they are clearly benign.

References:

Koocher, G.P. & Keith-Spiegel, P. (2008). *Ethics in Psychology and the Mental Health Professions*. Oxford: University Press.
Younggren, J.N. (2002). *Ethical decision-making and dual relationships*. [On-line]. Available: <http://kspope.com>.

Notice of Address Change

Please print legibly.

Full Name: _____ License Number: _____ Preferred Mailing Address: ☐ Home ☐ Business

Home Address _____

City/State/Zip _____

Business Address _____

City/State/Zip _____

Daytime Phone Number _____ *Email Address _____

Mail address change form to NC Psychology Board, 895 State Farm Road, Suite 101, Boone, NC, 28607.

You may also email a change of address to info@ncpsychologyboard.org or fax to the Board office at 828 265-8611.

**It is very important that all licensees have a current email address on file as Board correspondence is frequently sent via email.*

Child Custody Issues

Jane E. Perrin, PhD.

The Board receives numerous complaints each year regarding child custody matters. Often one side is dissatisfied with the outcome of the case and files a complaint against any of the psychologists who were involved. Sometimes, the Board has found that the psychologist, whether providing the child custody evaluation or therapeutic services to a parent or child, has engaged in unethical behavior. The majority of complaints are not found to involve ethical violations, but in some cases the psychologist has not made an ethically appropriate decision. The Board cautions you to ensure that you have appropriate training and experience if you treat a family member who may be involved in a high conflict child custody case or if you conduct a child custody evaluation. In addition, consultation with colleagues may assist you in maintaining focus on your role and responsibilities in the case.

Many of the problems observed by the Board arise when a psychologist who is treating one parent or a child makes a recommendation about child custody, or when a psychologist renders an opinion about the parent that they have not met or evaluated. For example, consider the case when a psychologist is treating the father who is involved in a child custody dispute. The psychologist does not meet the mother, but the psychologist learns from the father about the mother's erratic behavior around the children. The psychologist has been treating the father for several years and is concerned about the children, based upon what the father has been reporting to her. There is a custody hearing approaching. The psychologist wants to help her patient and is concerned about the children. The psychologist writes a letter to the judge advocating for her patient, the father, in which she provides her clinical opinion that the mother is mentally ill and recommends that she not be given custody or that she only be granted supervised visitation. There are two concerns with the psychologist's letter. First, the psychologist does not have a sufficient basis for her clinical opinion about the mother's mental status or ability to parent because she has not even met the mother, much less evaluated her for purposes of child custody recommendations. Second, she has an insufficient basis to provide a recommendation to the court regarding child custody or visitation. Her opinions are based only on what the father has told her, which may be biased. She has not evaluated the father, either, for his parenting skills. She has not sought information from independent sources, ranging from the children's teachers and babysitters, or reviewed psychological assessments of either parent. Finally, she has not interviewed the children or observed them with either parent. Therefore, the psychologist has inadequate basis to recommend that the mother not be given custody or that she only be granted supervised visitation, or even that the father be granted custody. Finally, the psychologist's role as a therapist is likely to bias her judgment in the other role she has now unfortunately placed herself in, as an informal forensic evaluator. However, when a psychologist renders a clinical opinion based on what she has observed in the process of providing therapy to a patient, it may be given particular significance by the court, and the court may rely on the opinion of the psychologist in rendering a decision.

The conduct as described above appears to be in violation of Standard 9.01 of the APA Ethical Principles and Code of Conduct, which states:

9. Assessment

9.01 Bases for Assessments

(a) Psychologists base the opinions contained in their recommendations, reports, and diagnostic or evaluative statements, including forensic testimony, on information and techniques sufficient to substantiate their findings. (See also Standard 2.04, Bases for Scientific and Professional Judgments.)

(b) Except as noted in 9.01c, psychologists provide opinions of the psychological characteristics of individuals only after they have conducted an examination of the individuals adequate to support their statements or conclusions. When, despite reason-

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able efforts, such an examination is not practical, psychologists document the efforts they made and the result of those efforts, clarify the probable impact of their limited information on the reliability and validity of their opinions, and appropriately limit the nature and extent of their conclusions or recommendations. (See also Standards 2.01, Boundaries of Competence, and 9.06, Interpreting Assessment Results.)

In this case, the only information the psychologist could provide to the court is what the father reported to her. She should not render any clinical opinion about the mother or make a recommendation about custody or visitation. She could only make statements attributed to the father.

Another area in which psychologists should take heed is when evaluating only one parent and making a recommendation to the court based upon that evaluation. For example, a mother comes to you because she is involved in a contested custody case. The mother asks you to evaluate her so she can provide your evaluation to the court to show she should get custody of the children. You evaluate her and in your report state that she is fit to parent the child, and then make a recommendation that the other parent not be granted custody because that parent has been engaged in parental alienation. This exceeds what should be recommended based on the data, which is limited to the assessment of the mother. If you had conducted a parental fitness evaluation on one parent, it is possible that, based solely on the data you gathered, you have the basis for an opinion that the parent you evaluated appears fit to be granted custodial time with the children. As in the previous example, you exceed the data when you make recommendations about someone whom you have not evaluated.

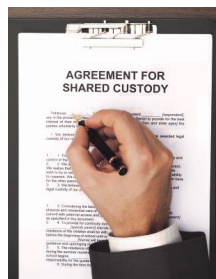
Further, when conducting a child custody evaluation it is important also to tread cautiously. Psychologists need to be mindful of the potential for the appearance of bias for one parent or another. One way to minimize the impression of partiality toward one or the other parent is to require a court order assigning you as the evaluator. In this case, the client is the court rather than either parent. The court order should also state who is responsible for paying for the evaluation, which further reduces the appearance that the psychologist is an agent of one or the other parent. When child custody evaluations are conducted pursuant to a court order, any contact between the psychologist and any of the individuals involved in the evaluation may be disclosed to the court. Be sure all parties sign informed consent forms in which you have clearly stated your role as an evaluator and the limits on confidentiality of any statements that they make to you. Psychologists who are court ordered to evaluate a family need to be aware of pertinent professional standards of conduct, which may involve legal rules, as well. For instance, if both parents are represented by an attorney, it is improper for a psychologist to

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psychTIP

During 2014, there was a noticeable increase in the number of complaints filed against licensees of the Board regarding the completion of psychological evaluation reports; particularly, with respect to reports being completed in a timely manner. The North Carolina Psychology Practice Act and the APA Ethical Principles of Psychologists and Code of Conduct do not specifically set forth an exact deadline in which reports are to be completed by following an evaluation of an individual. Nonetheless, reports should be completed by a psychologist in a timely manner in order for him/her to remain in compliance with the Psychology Practice Act and Standards of the Ethical Principles of Psychologists and Code of Conduct that are related to this issue. Even though the reason(s) for a psychologist's delay, the length of the delay, and its impact on that psychologist's examinee may vary, a practice of not completing reports in a timely manner could substantially raise the risk for that psychologist to find himself/herself in violation of several *possible* provisions and/or standards. Therefore, psychologists are reminded to review their habits and organizational skills, and to develop a plan so that their standard of practice includes producing evaluation reports in a timely manner. The consequences of producing late psychological evaluation reports could result in harm to a client.

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have ex parte communication with one of the lawyers, i.e., substantive discussions about the case with one attorney without informing the other attorney.

There are several sections of the APA Ethical Principles and Code of Conduct that may be relevant when conducting a child custody evaluation, given the complexity of this area of practice. Some of those are below:

2.01 Boundaries of Competence

(f) when assuming forensic roles, psychologists are or become reasonably familiar with the judicial or administrative rules governing their roles.

3.10 Informed Consent

(c) When psychological services are court ordered or otherwise mandated, psychologists inform the individual of the nature of the anticipated services, including whether the services are court ordered or mandated and any limits of confidentiality, before proceeding.

3.05 Multiple Relationships

(a) A multiple relationship occurs when a psychologist is in a professional role with a person and (1) at the same time is in another role with the same person, (2) at the same time is in a relationship with a person closely associated with or related to the person with whom the psychologist has the professional relationship, or (3) promises to enter into another relationship in the future with the person or a person closely associated with or related to the person. A psychologist refrains from entering into a multiple relationship if the multiple relationship could reasonably be expected to impair the psychologist's objectivity, competence, or effectiveness in performing his or her functions as a psychologist, or otherwise risks exploitation or harm to the person with whom the professional relationship exists. Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical.

As stated in Standard 2.01(a), "psychologists provide services, teach, and conduct research with populations and in areas only within the boundaries of their competence, based upon their education, training, supervised experience, consultation, study, or professional experience." This is particularly important in the area of child custody evaluations, where there may be high conflict between the parties and the court is relying on your evaluation to make a decision that will have impact on parents' and children's lives.

A psychologist who is involved in child custody issues needs to be familiar with the following: [The APA Ethical Principles of Psychologists and Code of Conduct \(2010\)](#); [the APA guidelines for custody evaluations in Family Law Proceedings](#); and [the APA Specialty Guidelines for Forensic Psychology](#).

Have an idea for the next newsletter?



If there is a topic you would like to see addressed in a future edition of *psychNEWS*, please send an email to rebecca@ncpsychologyboard.org. Comments and suggestions about the newsletter are always welcome.



Spotlight on Supervision

The Board receives many questions, especially at license renewal time, regarding supervision and the various forms required to properly document supervision. Below are some of the common misconceptions that individuals have about supervision as well as what is actually required under the Board's supervision rules.

Primary Issue – Not Meeting the 30-day Filing Requirement. The primary issue with supervision, particularly seen during the recent license renewal process, is that supervisees sometimes fail to file an updated supervision contract with the Board within the required 30 day period following a change in the circumstances of their previous contract. Pursuant to Board Rules 21 NCAC 54 .2007(c), .2008(e), and .2009(f), all applicants, licensed psychological associates, and provisionally licensed psychologists *must* file a Supervision Contract with the Board to “document either that supervision is required and shall be received, or that supervision is *not* required.” In addition, a new or revised Supervision Contract must also be filed within 30 days of a *change* in the conditions specified in the Supervision Contract already on file with the Board (e.g. a change in supervisors, work settings, duties, hours, etc.). Many individuals change work settings and, unfortunately, do not submit the revised contract within 30 days. Even if the individual maintains the same Supervisor, when changing work settings, a new contract is required.

Section 1 Versus Section 2. The Supervision Contract has two primary sections—Section 1, which shows that supervision is required and is being received, and Section 2, which shows that supervision is not required. While many individuals are familiar with Section 1 of the Supervision Contract, Section 2 of the Supervision Contract is often overlooked. Unfortunately, many individuals neglect to complete Section 2 of the Supervision Contract and file it with the Board when they need to do so. For those individuals, one of the main reasons why they forget to file a revised Supervision Contract with Section 2 completed may be because they are confused, not surprisingly, by the term “supervision” in the Supervision Contract. One might question, if someone is not engaged in the practice of psychology and does not need supervision, why would he/she need to file a new supervision contract? The answer is simple. Pursuant to Board Rule .2007 (d), .2008 (e), and .2009 (f), *any* change to the circumstances reflected on the current Supervision Contract on file with the Board requires that a new Supervision Contract be filed within 30 days. So, if a supervisee changes supervisors, job, work setting, work hours, etc, a new Supervision Contract reflecting that change must be filed with the Board within 30 days.

No Longer Practicing Psychology. If the individual is no longer practicing psychology (e.g. retires, leaves for another field, is terminated, quits, etc), a new Supervision Contract with Section 2 completed must be filed with the Board within 30 days. Even if the individual is in a different field from the practice of psychology and changes jobs or work settings within that different field, a new Supervision Contract reflecting that change must be filed with the Board within 30 days. For example, if an individual had a Supervision Contract with Section 2 completed on file with the Board because he/she was a psychology instructor and then she/he retires, that individual must file a new Supervision Contract

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THE PURPOSE OF THE SUPERVISION CONTRACT FORM

One of the three required items to even apply for licensure in North Carolina is the Supervision Contract Form. Therefore, if you are an applicant, LPA, or LP-Provisional in NC, you have a Supervision Contract Form on file.

A revised or new Supervision Contract Form is required to be filed within 30 days of a change in the conditions specified in the contract on file with the Board.

A few examples of when a new contract needs to be filed might be if you:

1. Change work settings/work status
2. Begin working at an additional work setting
3. Increase/decrease work hours
4. Change supervisors
5. Have applied and been approved by the Board to receive reduced supervision, and are changing work and/or supervision hours
6. Change professional responsibilities and functions

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with the Board within 30 days reflecting that change. In summary, regardless of whether an applicant, licensed psychological associate, or provisionally licensed psychologist is practicing psychology in North Carolina, working in another field, is unemployed or retired, a Supervision Contract must be on file with the Board at all times covering all current activities.

Completing Section 2. When completing Section 2 of the Supervision Contract, individuals must provide a detailed description of their activities. This is required as the Board determines, based on statute and rule, whether or not the described activities require supervision. Often individuals have completed Section 2 of the Supervision Contract and have mistakenly attested that supervision was not required, although the activities described in the contract do, in fact, require supervision. This has been seen in the past when an individual takes a position in a mental health field not labeled “psychology,” but the activities for that position fall under the Psychology Practice Act as the definition of the practice of psychology.

Separate Supervision Contracts. Board rules also require that a separate supervision contract shall be filed for *each* separate work setting. For example, if an individual has a Supervision Contract on file for his/her psychology practice and then takes an additional part-time job working in sales, the individual would need to file an additional Supervision Contract with Section 2 completed for the new, additional work setting. And, as noted above, the individual must file that additional Supervision Contract with the Board within 30 days of starting that new, additional part-time job. In addition, only one work situation can be reflected on a single Supervision Contract. Separate work settings cannot be filed on the same Supervision Contract. This is why at license renewal time a licensee is required to submit a separate Supervision Report for each contract he/she has on file with the Board.

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THE DIFFERENCE BETWEEN A “CONTRACT” AND A “REPORT”

Although the Supervision Contract Form and Supervision Report Form contain some of the same information, they are completely different documents, each having its own purpose.

SUPERVISION CONTRACT FORM

- Four-page document
- Must be notarized
- Covers current and future activities
- Must be filed within 30 days of a change in the contract on file with the Board
- Is valid for as long as it accurately reflects current activities and conditions.

SUPERVISION REPORT FORM

- Two-page document
- Does not require notarization
- Reports on past activities [activities that are listed in contract(s) already on file with the Board]
- Must be filed within 2 weeks of a change in (or termination of) the contract on file with the Board
- Must be submitted biannually by LPAs and LP-Provisionals to report that contracts on file are up-to-date and accurate.

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Insufficient Supervision. Insufficient supervision is another common issue that was discovered when Board staff reviewed the Supervision Reports submitted during the recent license renewal process. Pursuant to Board Rule .2008(h), the amount of supervision that a Licensed Psychological Associate (LPA) is required to receive per month is based on the number of hours per month the LPA is engaged in activities that require supervision. During the recent license renewal process, it was noted that several individuals incorrectly interpreted the supervision requirements believing that they do not need to receive supervision until engaging in at least 10 hours of client contact time. This interpretation of the rule is not consistent with the requirements for supervision. According to the rule, even if an LPA engages in just one hour of activities that require supervision in a month's time, the LPA is required to receive one hour of supervision within that same month. The ratio of the number of hours in which the individual is engaged in activities requiring supervision in relation to the number of hours of supervision required monthly is based on the LPA's level of supervision, whether at Level 1, reduced supervision Level 2, or reduced supervision Level 3. Those ratios are identified in the above referenced rule.

Health services in psychology include services provided directly or indirectly to clients/patients, including but not limited to: diagnosis, evaluation, treatment, remediation, and pre-substance abuse and dependency, and psychological aspects. Health services include psychotherapy, counseling, psychoeducational, and health services include psychological assessment and documentation of services provided to clients/patients, caretakers, and other individuals for the purpose of benefiting them, with other professionals in service to the psychologist's clients/patients.

I. Rate the following areas and provide any comments on an attached sheet below average ratings. If the total number of hours of supervision required is less than the number of hours of supervision provided, the supervisor must sign below.

- Supervisor's adherence to ethical, legal, and professional standards: ☐ 7 excellent ☐ 6 ☐ 5 average ☐ 4 ☐ 3 ☐ 2 below average
- Supervisor's technical skills and competence: ☐ 7 excellent ☐ 6 ☐ 5 average ☐ 4 ☐ 3 ☐ 2 below average
- Supervisor's utilization of supervision: ☐ 7 excellent ☐ 6 ☐ 5 average ☐ 4 ☐ 3 ☐ 2 below average
- Supervisor's ability to function independently or with reduced supervision: ☐ 7 excellent ☐ 6 ☐ 5 average ☐ 4 ☐ 3 ☐ 2 below average

I attest that this Supervision Report has been shared with the supervisee, and that supervision has been provided in accordance with the Supervision Contract Form on file with the Board.

Supervisor's Signature _____ Date _____

LPAs - Supervision Requirement Based Upon Monthly Total Hours. It is important to note that the number of hours in which an LPA engages in activities that require supervision, as specified under Board Rule .2008(h), is based on a monthly, not weekly, number of hours. The Board has previously observed instances in which LPAs have unintentionally received insufficient supervision because they mistakenly believed that the supervision requirements are based on a weekly hourly total rather than a monthly total. For example, an LPA receiving Level 1 supervision, who is engaged in activities requiring supervision for 20 hours per week or 80 hours monthly, would need four hours of supervision per month. However, if the LPA thought the supervision requirements were based on weekly totals, then the LPA might mistakenly believe he/she only needed to receive two hours of supervision per month when, in fact, 80 hours per month of activities requiring supervision would require *four* hours of supervision during the month.

Different Supervision Requirements for Provisionally Licensed Psychologists. While the amount of supervision an LPA is required to receive is based on the number of hours that the LPA engages in activities that require supervision on a monthly basis, this is not the case for provisionally licensed psychologists. The supervision requirements for LPAs and provisionally licensed psychologists differ substantially. Pursuant to Board Rule .2009(c), a provisionally licensed psychologist practicing psychology in North Carolina must receive at least one hour per week of face-to-face individual supervision in any week that he/she engages in the practice of psychology until permanent status is approved by the Board. *Regardless of the number of hours a provisionally licensed psychologist was engaged in practice during that week, he/she must receive one hour of supervision each week in which he/she practices psychology.* A provisionally licensed psychologist who practices psychology five hours weekly, for a total of 20 hours per month, would need to receive one hour of supervision per week, for a total of four hours that month.

In some instances, provisionally licensed psychologists who have not adhered to supervision requirements during the renewal period, or who have confused these rules with the LPA rules for supervision thereby not receiving adequate supervision, have found that their failure to be supervised in the manner required in the rule has, at minimum, delayed their approval by the Board for permanent licensure. For the convenience of all supervisees, the differences in time requirements regarding supervision are listed on the Supervision Contract.

Interruptions to Supervision. The Board also receives numerous questions regarding what to do when supervision has not

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occurred or when the supervisee or supervisor experiences circumstances that preclude being able to meet for supervision. If a supervisor is unable to provide the required number of face-to-face supervision hours, then the supervisee should consider reasonable alternatives to be certain that the supervision requirements in Board rule are properly followed. Such alternatives could include filing a new Supervision Contract with the Board until the former supervisor returns or, within parameters discussed with Board staff, putting a plan in writing to the Board regarding a replacement supervisor for a few weeks. Supervisees may wish to review the Board's advisory statement about face-to-face supervision by electronic means, which may be beneficial to a supervisee when he/she is unable to meet in person with his/her supervisor. A copy of the advisory statement can be found on the Board's website at the following link - <http://www.ncpsychologyboard.org/Office/PDFFiles/FacetoFaceSupervisionbyElectronicMeans.pdf>.

Supervision Reports. Supervision is not required when a supervisee has not engaged in any activities that require supervision. Regardless of whether or not supervision occurred during the reporting period, a supervisor who has a Supervision Contract on file with the Board to provide supervision must always complete a Supervision Report at the termination of supervision or at license renewal time in order to verify whether or not supervision was required. The Board received numerous Supervision Reports during the recent license renewal process that were completed by the supervisee, instead of the supervisor, because the supervisee had not engaged in any activities that require supervision during the renewal period. However, it is the supervisor's responsibility to verify what did or did not occur with regard to supervision during the reporting period, and, therefore, Section 1 of a Supervision Report must be completed. Section 2 of a Supervision Report may only be completed if an individual had a Supervision Contract with Section 2 completed on file with the Board.

A few examples of when a report needs to be filed might be if your supervisee:

1. Changes work settings
2. Has applied and been approved by the Board to receive reduced supervision, and is changing work and/or supervision hours
3. Increases or decreases hours he/she engages in activities requiring supervision per week/month
4. Changes professional responsibilities and functions
5. Terminates supervision, or if you decide to terminate the supervisory relationship
6. Is renewing his/her license
7. Retires
8. Moves out of state

Many of the questions in Section 1 of the Supervision Report may not be applicable if the supervisee has not engaged in activities requiring supervision during the reporting period. In those cases, the supervisor should write zero ("0") for any items in the Supervision Report which do not apply. If the total number of hours of supervision reported equals zero ("0"), ratings should be left blank. The supervisor may simply note "N/A" in the margin, and then sign and date the report. It should be noted that only one section per Supervision Report may be completed. Therefore, a supervisor should never complete Section 1 of the report to indicate that supervision was not required and then have the supervisee complete Section 2 to verify that the individual did not engage in activities requiring supervision. Either the supervisor should complete Section 1 of the Supervision Report or the supervisee should complete Section 2 of the report.

Complying with the Supervision Requirements. The Board requires that applicants, LPAs and provisionally licensed psychologists comply with all supervision requirements in a timely manner and in the manner required by Board rule. Failure to do so could potentially result in action by the Board against the individual's application or license. Licensees are always welcome to contact the Board office if they have any questions about supervision. In addition, there are a number of helpful supervision resources on the Board's website that provide answers to frequently asked supervision questions and offer tips on how to complete supervision forms correctly. Please click [here](#) to view these materials or visit the Board's website at www.ncpsychologyboard.org and click on the "Supervision" link on the sidebar for more information about supervision.

Martha Storie Installed as President of ASPPB

At the 54th Annual Meeting Delegates of the Association of State and Provincial Psychology Boards (ASPPB), held October 22-26, 2014 in Rancho Mirage, CA, Martha Storie, former Executive Director of the North Carolina Psychology Board, was installed as President of ASPPB. Ms. Storie is the first non-psychologist to be elevated to this prestigious office in ASPPB's fifty-three year history. Ms. Storie has been actively involved with ASPPB for more than 25 years, including serving as the organization's President-elect for the past year, Secretary/Treasurer from 2006-2012 and serving on numerous ASPPB committees over the years. Ms. Storie will serve one year as ASPPB President. Her time in office will conclude with a one-year term as Past President beginning in January 2016.



ASPPB President-Elect, Don Crowder, Ph.D., and Martha N. Storie, ASPPB President, sworn into office by Former ASPPB President, Jacqueline B. Horn, Ph.D.

During her installation speech, Ms. Storie began by thanking the ASPPB membership for the opportunity to serve as the Association's President and noted that she "realize[s] that psychology is a diverse profession, and that economics and a competitive marketplace for mental health services have driven a number of decisions. However, I do believe that consistency in licensure is critical for the protection of the public, as well as for the survival of the licensed profession." In addition, Ms. Storie noted that "we need to be clear and united about what distinguishes a psychologist from another mental health professional. This is particularly important with a more mobile society and the advancements in technology." Ms. Storie concluded by stating that it was time to "work together toward the adoption of common standards for licensure of psychologists. I know it won't be an overnight process, as the past clearly indicates, but I do believe that we're now in a better climate to make more progress."

In addition to officer and Board member elections and other ASPPB business matters, the Annual Meeting, which was titled "Navigating the Boundaries: Working Together for the Best Public Protection" primarily focused on encouraging collaboration between the various stakeholders in the field of psychology in order to enhance public protection. Representatives of the North Carolina Psychology Board and the North Carolina Psychological Association, as well as representatives from other state/provincial psychology licensing boards and the American Psychological Association, served on a panel discussion regarding collaboration on ethical issues at the local level. The Annual Meeting also included a presentation on ASPPB's continuing efforts in developing a national approach to regulating interjurisdictional telepsychology.

ASPPB is the alliance of state, provincial, and territorial agencies responsible for the licensure and certification of psychologists throughout the United States and Canada. Formed in 1961, ASPPB currently has as members the psychology boards of all fifty states of the U.S. as well as the psychology boards of the District of Columbia, the U.S. Virgin Islands, Puerto Rico, Guam and all ten provinces of Canada.



The ASPPB Board of Directors (left to right) Karen Messer-Engel, MA, R. Psych, Secretary-Treasurer; Don S. Meck, PhD, JD, ABPP, Member-at-Large; Don Crowder, PhD, President-Elect; Martha N. Storie, President; Fred Millán, PhD, ABPP, Past-President; Jacqueline B. Horn, PhD, Former President; C. Gerald O'Brien, Jr, PhD, Member-at-Large; and Sharon Lightfoot, PhD, Member-at-Large.

During the period of time from August 1, 2014 through December 31, 2014, the Board reviewed and closed eight investigative cases involving psychologists in which it found either no evidence of probable cause of a violation or insufficient evidence to issue a statement of charges, and reviewed and closed one case involving a non-psychologist. Further, it took the following action:

James J. Buldas, Ed.D. – ORDER OF SUMMARY SUSPENSION was approved and signed on November 6, 2014. The State Board of Psychology of Ohio indefinitely suspended Respondent's license to practice psychology. Respondent's conduct violates several provisions of the NC Psychology Practice Act and several provisions of the Ethical Principles of Psychologists and Code of Conduct. Based upon the nature of the findings and conclusions by the State Board of Psychology of Ohio, the NC Psychology Board SUMMARILY SUSPENDED Respondent's license to practice psychology.

Cameron K. Collins, Ph.D. – CONSENT ORDER was approved and signed on August 7, 2014. Respondent's admits that the described conduct was unprofessional in violation of N.C. Gen. Stat. § 90-270.15(a)(10) & (a)(17) and Standard 6.01 of the Ethical Principles of Psychologist and Code of Conduct. Respondent must successfully complete a monitoring program and manage her medical condition in accordance with her physician's orders; and she must remit \$300 in costs.

Nancy L. Miller, Psy.D. – CONSENT ORDER was approved and signed on August 7, 2014. Respondent admits that the described conduct violates N.C. Gen. Stat. § 90-270.15(a)(10) (unprofessional conduct) & (a) (14) and Standards 3.05 (a) & 9.01 of the Ethical Principles of Psychologist and Code of Conduct. Respondent must successfully complete tutorials; receive face to face supervision; and remit \$300 in costs.

David K. Trayford, M.S. – FINAL DECISION was approved and signed on August 7, 2014. Respondent's conduct constitutes violations of N.C. GEN. STAT. § 90-270.15(a) (10), (a)(19), and (a)(22); Standard 3.09 of the *Ethical Principles of Psychologists and Code of Conduct*; Rule 21 NCAC 54 .2002; and the Consent Order Respondent entered into with the Board on July 19, 2012. Respondent's license is REVOKED. He must cease to practice psychology by August 29, 2014 and remit \$1,500 in costs.

Richard D. Welser, Ph.D. – FINAL DECISION was approved and signed on August 7, 2014. Respondent's conduct constitutes violations of N.C. Gen. Stat. § 90-270.15(a)(10), (a)(17), (a)(18), and (a)(22); Standards 1.06 and 4.01 of the Ethical Principles of Psychologist and Code of Conduct. Respondent's license is REVOKED. He must cease to practice psychology within two weeks of receipt of the FINAL DECISION and remit \$300 in costs.

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