October 4, 2019

Daniel Collins, J.D. North Carolina Psychology Board 895 State Farm Road Boone, NC 28607

OCT 9-2019

RE: Proposed changes to North Carolina Psychology Practice Act

Mr. Collins,

We are writing this letter to provide comment and express concern about the proposed changes to the NC Psychology Practice Act listed in the NC Register (Volume 34; Issue 5). As a group, we represent doctoral level psychologists who have achieved board certification in Clinical Neuropsychology through the American Board of Professional Psychology (ABPP). As you know, these proposed changes eliminate the supervision requirement for Licensed Psychological Associates who have met supervision requirements and achieved a passing score on the EPPP after three years. The purpose of this letter is not to debate the legality or clinical implications of masters level practitioners being independently licensed but to bring light to the fact that clinical neuropsychology is a specialized profession that requires doctoral-level training and formal post-doctoral fellowship.

The practice of neuropsychology has become highly specialized in both the pediatric and adult realms, with clear training requirements having been established via the Houston Conference guidelines in 1998 (see enclosure). Since 2005, a formal two-year post-doctoral fellowship has been required to meet the minimum standards for practice and board certification. Although not required, board certification in neuropsychology has become the common expectation for individuals working in hospital, government, and private practice settings. We are unaware of any state that allows the practice of neuropsychology at the master's level. It is also important to note that specific guidelines for the practice of neuropsychology were created because neuropsychologists often serve client populations (e.g., Traumatic Brain Injury; Epilepsy; Alzheimer's Disease) who present with different evaluation and treatment needs than populations typically served by psychologists. For this reason, we must collectively oppose the proposed revisions as currently written. Specifically, the current version of the NC Practice Act includes the following statement:

The conduct of neuropsychological evaluations by psychological associates requires supervision. Not requiring supervision are neuropsychological screenings which lead to simple behavioral descriptions rather than clinical interpretations, or the administration of rating devices which may be completed by a variety of professional and non-professional observers and are subsequently interpreted by other parties.

The proposed revision removes this language and would allow for the independent practice of neuropsychology after three years of supervision. We would like to reiterate that appropriate training in neuropsychology is not currently achievable in a master's program, and supervision of an LPA by a

clinical neuropsychologist is far from sufficient education and training to allow for independent practice. In addition, we believe that the practice of neuropsychology by improperly trained individuals poses great harm to the public and profession. We strongly advise that any revision to the code include language that precludes independent practice of neuropsychology at the master's level regardless of supervision history.

Please let us know if additional information regarding the current requirements for the practice of neuropsychology are needed. We would also encourage you to reach out to the professional board that governs the practice of neuropsychology, The American Board of Clinical Neuropsychology.

Sincerely,

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