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To Whom It May Concern,

I am a Licensed Psychological Associate (LPA) who has been licensed by the North Carolina Psychology Board since March 2005. As of the date of this letter, I have had approximately 29,000 hours of supervised clinical practice.

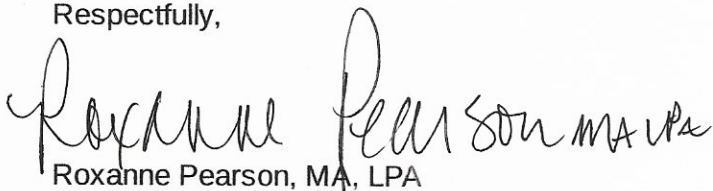
I am writing in full support of the NC Psychology Board proposed rule changes addressing supervision (21 NCAC 54.2008). You have likely heard many other LPAs speak to how this will allow for LPAs to have parity with other Masters-level clinicians, such as LCSWs, LPCs, and LMFTs. You may also have heard other LPAs such as myself testify as to how being unable to become paneled with most insurance companies due to the restricted nature of our licensure creates financial hardships for us. I would like to share a more personal story with you, however.

In September 2018, my community was absolutely devastated by the floodwaters of Hurricane Florence. I am a "helper" by nature, and when the call went out that the Red Cross needed clinicians for disaster response, I was first in line...what better way to give back to my community than to use the skills that I honed for well over a decade and provide disaster counseling to my neighbors who have lost everything? Yet, I was told that because I have a "restricted license," I was unable to volunteer to provide this type of disaster relief. I was turned away from VOLUNTEER work due to the supervision that I must still receive after 14 years of competent clinical practice.

Allowing LPAs to practice independently is well overdue. There are a great many reasons for LPA independent licensure, but by far the most important reason is that independent licensure for LPAs will allow for greater access to quality mental health services for the public.

Thank you for your time and consideration.

Respectfully,



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