

MINNESOTA BOARD OF PSYCHOLOGY

Minutes of the 399th Meeting

May 16, 2008

Members Present: M. Fulton, G. Jensen, J. Lee, T. Nguyen-Kelly, J. Romano, M. Seibold, T. Thompson, S. Ward and J. Wolf

Members Absent: S. Hayes

Others Present: P. Stark, MPA's Director of Professional Affairs and N. Hart, Assistant Attorney General

PUBLIC SESSION

Board Chair, T. Thompson called the public session of the meeting to order at 9:06 AM, in the Psychology Board Conference Room, at 2829 University Avenue Southeast, Minneapolis, Minnesota, and a quorum was declared present.

1. Minutes

a. Board Meeting of April 18, 2008.

J. Wolf moved, seconded by M. Fulton that the minutes of the Board meeting of April 18, 2008 be approved as submitted. Voting "aye": M. Fulton, G. Jensen, T. Nguyen-Kelly, M. Seibold, S. Ward and J. Wolf. Voting "nay": none. Abstaining: J. Romano. There being six "ayes" and no "nays", motion carried.

2. Administrative Matters.

a. New Application Review Committee (ARC) Chair. J. Romano is completing his second 4-year term on the Board. One of his Board assignments is Chair of the ARC. At the last ARC meeting on Friday, May 2, 2008, Dr. Romano informed staff that since he will be out of the country during June 2008, there is a possibility that his Board seat will be filled by the Governor before he returns in July.

In order to make sure that the ARC has a Committee Chair for its June 6, 2008 meeting and beyond, Board chair, T. Thompson appointed G. Jensen to serve as the new Chair of the ARC, effective with the June ARC meeting.

b. Board-Sponsored Continuing Education (CE) Activity. At the November 2004 Board meeting, J. Schaffer reported on his trip to the Association of State and Provincial Psychology Boards (ASPPB) Annual Meeting. One of the items included in his report was that the Maryland Psychology Board had realized a savings in its budget, which was used to sponsor a continuing education activity on the subject of "supervision". The activity was free-of-charge to the state's licensees. The event was well received and well attended.

The Minnesota Board voted to explore the feasibility of such a project and a CE Planning Committee was appointed by the Board Chair at the time, Dr. Schaffer. The Committee consisted of J. Wolf, Chair, S. Hayes and T. Thompson. The Committee worked with staff and established that the project was possible and the Board gave its sanction to the planning of the activity.

The Committee planned the Board's first CE activity for Friday, June 24, 2005 at the University of MN Continuing Education and Conference Center on the St. Paul campus. The day long seminar offered six CE credits to the Board's licensees and was telecast to eight Greater Minnesota sites. The topic was, *The Changing Face of Psychology in Minnesota: Underserved Populations*, featuring speakers from the following cultures that the Committee identified as underserved as to competent psychological services: Latino, Southeast Asian, Native American, and African/African American.

The same Committee planned the Board's second day long seminar, offering 6.5 CE credits to licensees. This activity was titled, *The Culture of Poverty: Treatment Challenges*. It was held on Friday, April 20, 2007.

The Board determined in 2004 that it would consider sponsoring a CE activity during the second fiscal year of each biennium, the odd numbered years. Therefore, staff requested that the Board determine whether it wishes to present a third CE during 2009. The former CE Planning Committee Chair, J. Wolf, agreed to serve on the Committee, but not to chair the upcoming event.

The Board discussed the facts that past CE activities were well-attended and represents goodwill for the Board. It is believed that the CE activity has become expected by licensees and the projects have been affordable. N. Hart suggested that the Board look to the Complaint Resolution Committees for ideas on topics.

J. Wolf and G. Jensen volunteered to serve on the CE Committee. In the event that S. Hayes will also remain as a Committee member, T. Thompson stated that he will ask Ms. Hayes to chair the Committee.

- c. **ASPPB 2008 Midyear Meeting Report.** J. Wolf, T. Nguyen-Kelly and S. Hayes attended the meeting in Vancouver, British Columbia on April 10-13, 2008. In her absence, Ms. Hayes provided some written materials. Drs. Wolf and Nguyen-Kelly reported at the Board meeting on their experiences.

By T. Nguyen-Kelly

REPORT OF THE ASPPB PRACTICUM COMMITTEE

APA introduced a policy change regarding training, recommending that for admission to licensure, applicants demonstrate that they have completed two years of supervised experience, which can be completed prior or subsequent to the granting of the doctoral degree. Across programs, there is a lack of standards for practicum training. Two states, Washington and Utah changed their licensing standards to match APA's policy.

In response to the concern about public protection, piecemeal law and rule changes by jurisdictions and perceived threats to mobility, the ASPPB formed a Practicum Committee to provide guidance to members who wish to incorporate change, to serve ASPPB member Boards in setting standards for practica. This ASPPB action is NOT in any way an endorsement of the APA policy change.

The committee is composed of the ASPPB staff, Steve DeMers; Board members, Emil Rodolfo, Jack Schaffer; and members Ron Ross (Ohio) and Jorge Torres-Saenz (CA). This Committee formed a workgroup with the purpose to:

- Examine current knowledge about practicum competencies
- Examine current knowledge about practicum standards
- Develop recommendations from the ASPPB Practicum Committee for the development of model regulations

The workgroup gathered representatives from The Practicum Competencies Document group, the Benchmark groups of APA Education directorate, Commission on Accreditation, APPIC chair, APAGS chair, CPA and the Committee members.

The overview of practicum requirements focused on:

1. An organized sequence of experience
2. Depth and breadth of training
3. Hour requirement
4. Supervision
5. Training sequence and
6. Setting

1. An organized sequence of experience: Practicum shall reflect a faculty-directed, organized, sequential series of supervised experiences of increasing complexity, preparing the student for internship and partially meeting requirements for licensure. Training experiences shall follow appropriate academic preparation.

2. Breadth and depth of training: Requires a written training plan between the student, the practicum training site and the graduate training program. This plan should describe the allocations of training time and ensure quality, breadth and depth of the training experience through specific goals and objectives of practicum, evaluation methods of student performance as well as jurisdictional regulations on supervisory experience (nature of supervision, identities and competencies of supervisors, form and frequency of feedback between the site and faculty supervisors. The training plan will provide a rationale for the experience in light of previous experiences to ensure an overall practicum experience is organized, sequential and meeting the needs of the student. This plan will be submitted as part of the licensure application process.

3. Hour requirement. Practicum experiences anticipated to satisfy the first year of a two year training sequence shall be a minimum of 1500 hours of supervised experience, 50% of which shall be service-related activities with at least 25% of the supervised experience devoted to face-to-face patient/client contact.

4. Supervision. Individual supervision shall be no less than 25% of the time spent in service-related activities. The supervisor shall be a licensed psychologist, 25% of the supervision time may be provided by a licensed allied mental health professional.

5. Training sequence. Several part-time practicum placements of appropriate scope and complexity over the course of training can be combined to satisfy the 1500 hour practicum experience. In general, a placement reflects a minimum of 15 hrs per week for a minimum of 30 weeks. The graduate program will submit for licensure application a certification of accrued hours of practicum. These 1500 hours can be accrued pre-, during, or post-internship provided they follow the training plan.

6. Setting. Supervised experience shall occur in psychological services settings that have as part of the organizational mission a goal of training professional psychologists. Such settings shall have an identifiable licensed psychologist responsible for maintaining the integrity and quality of the experience for each trainee.

MODEL PRACTICUM REQUIREMENTS: OHIO'S REGULATORY CHALLENGE IN CONTEXT

Context of Ohio Regulatory Challenge:

- Late 2005, a bill was introduced to allow 2 years of training to occur pre- or post- doctoral degree. Current law requires 2 years of training at least one of which shall be post-doctoral. The bill died in 2006. The Competence and Sequence of Training Workgroup was formed.
- Ohio Law requires recognition of any doctoral degree in psychology or school psychology, as long as at least one year of supervised experience is completed post-degree. An internship was not required in law to satisfy licensure requirements. Many post-doctoral experiences were disorganized and not focused on training.
- Conflict between OPA and the Ohio Legislature on re-structured training model.

To address Ohio's challenge, the Ohio Board decides to take the opportunity to strengthen degree requirements and training requirements:

- Not oppose legislation that would recognize 2 years of pre-doctoral training as suitable for initial licensure.
- HB 503 bill was introduced in March 2008:
 1. Accredited or designated doctoral degree required
 2. 2 year requirement retained (1,800 X 2= 3,600 hrs)
 3. Pre-doctoral internship to be required for the first time
 4. Post-doctoral training not required for initial licensure if 3,600 hours of pre-doctoral supervised experience is completed and documented according to rules to be written.

If the Law is amended:

- Training experiences whether pre- or post-doctoral will be more rigorous and more scrutinized than current requirements for the post-doc year
- Doctoral programs may or may not be able to provide students with 1,800 hours of pre-doctoral training. Post-doctoral training will likely continue to be required.
- What will be the responses of doctoral programs and what will be the role of students in driving the availability and quality of practicum placements?

NOTE: Supervision competencies, multiculturalism and distance education will be among the topics of discussion in future ASPPB meetings

CONSISTENCY IN LICENSURE REQUIREMENTS

This first session focused on the possibilities for consistency in licensure in the US and Canada.

1. *The Australian Perspective.* Brin Grenyer from Australia shared the Australian experience in creating a national standard for licensure.

On March 26, 2008, the National Registration and Accreditation Board was approved and will be implemented by July 1, 2010 for all registered health workers. The purpose of the national registration is to address:

- National disaster and mobility issues
- Workforce shortages (aging services shortage)
- Funding pressures
- Weakened “professional silo”
- Restrictive practice between professions

The National Board-in charge of registration and accreditation functions

The state Boards-in charge of administration of complaint handling and local registration matters and independent hearing of serious misconduct

The Federal/State Ministers for Health and the Australian Health workforce Advisory Council are addressing issues related to:

- Certification of psychologist supervisors
- National examination
- Accreditation of internship sites
- International benchmarking, raise standards
- Threats from “generic” health workforce, appropriation of psychology expertise – no protected practices (allied mental health workers provide the same and cheaper services as psychologists)

What has worked?

- Professional Associations and Registration Boards work together to form an united voice (identify differences and work together towards consensus)
- Talk and respond to broader agenda (workforce reform – protect public – health cost, etc.)
- Unify psychology with single register
- Recognize external threats and resist internal conflicts

Tele-practice across States:

- Who will address the problems related to tele-practice when psychologists and patients are in two different states.
- Who will handle the conflict? National Board? State Board? Which state Board?
- Where will the hearing take place?
- Lawyers on both sides will have to reach an agreement.

~ Disagreement observed between master’s and doctoral psychologists

~ Australia and New Zealand Agreement: adopt same measures

~ Struggle in licensing foreign professionals: an Office run by Australia Psychological Association to look at qualification structures to establish equivalence while in Manitoba, Canada, the Board uses outside agency, such as a university to render opinion about credentials (like the US?).

2. *The Canadian Perspective.* Joseph Rallo, PhD shared the Canadian perspective.

In 1994, there were great variations in registration, licensure across provinces, various exemptions, supervision requirement varied from 0 to 6 years. Facing the agreement on

internal trade to remove barriers to movement of goods and services across provinces, the psychologist groups formed a competency-based mobility agreement that will lead to the Mutual Recognition Agreement with common ground on:

- Core competencies (interpersonal relationships, assessment and evaluation, intervention and evaluation, etc.)

Where is Canada today?

- Near 100% compliance related to evaluation of competencies
- Near full mobility
- Common application procedures and formats
- Psychological Associates and Psychologists/Doctoral Psychologists
- Significant differences in education and training requirements still exist across provinces

~ Competence as common ground (not a degree debate like in Australia).

3. *The US Perspective. Stephen DeMers, PhD shared the US perspective.*

Barriers in mobility of licensure still exist. ASPPB was formed 48 years ago and started soon thereafter promoting mobility through consistency of requirements and through single examination. Currently, all states approve the use of the EPPP with consistent “pass” points, supervision guidelines and code of conduct.

He brought out the concern about a possible government initiative that aims to simplify the licensure process under economic pressure and simple thinking (like drivers’ licenses).

There needs to be an increasing dialogue between APA, CPA, and ASPPB on:

- Competency model
- Assessment of entry to practice
- Maintaining credibility through consistency of competencies
- Goal to promoting consistency in the profession

The process in the US seems to be more complex and more challenging to get a consensus across all states.

By J. Wolf

**ADJUDICATING COMPLAINTS AGAINST PSYCHOLOGISTS: EXPLORING
COMPLEMENTARY ROLES FOR PSYCHOLOGICAL ASSOCIATIONS AND
REGULATORY BOARDS**

The Canadian and American perspectives on the issue were compared. Canada (and Australia) have fewer differences between their regulatory boards and the association (CPA). The CPA Committee on Ethics handles ethical complaints against CPA members at the request of the CPA president. The committee accepts only complaints about CPA members and it defers to regulatory bodies all complaints regarding CPA members who are registered with those bodies and is a complaint about a CPA member who is not registered with a regulatory body, such as colleagues complaining about colleagues or students about professors. It has no investigating teams. The number of complaints handled directly by CPA has decreased over the past decade due to more formal problem-resolution structures in society and an increase in consultation services to psychologists.

In the US, the connections between the Boards and associations have been developing since about 1994. APA contends that through their code of ethics, they see themselves as protecting the public. Unlike the CPA, the APA code of ethics is more concrete than the CPA code which is primarily aspirations and educational in nature. Currently, over half of the US Boards use the APA as the standard of ethics for complaint issues. However, ethics adjudication is costly and it can not be done without legal counsel.

Joint APA and ASPPB meetings have resulted in APA offering ethics consultations, fielding calls from psychologists regarding ethical issues, supervisory issues, and in defining impairment and recusal issues.

IMPLEMENTING COLLEAGUE ASSISTANCE

Colleague Assistance Programs (CAPs) function both to educate psychologists on how to ameliorate the effects of stress through self-care and to provide treatment and support services for psychologists who self-refer for help or are referred by others, including licensing boards. Generally, the most effective and efficient CAPs are intended to benefit both the public and the profession. At this point most jurisdictions do not have a CAP. The American Psychological Association (Professional Affairs' Advisory Committee on Colleague Assistance) along with ASPBB have developed models to provide an understanding of the nature and extent of psychologists' competence problems and to provide a rationale for services through citing supportive literature.

Although at this point, most jurisdictions do not have a CAP, they often have included support services as part of the remedial plan resulting from a complaint (as Minnesota does). For those that do, volunteer psychologists are trained to be on hand for impaired psychologists. The purpose of colleague assistance is both remedial and preventive. Generally, impairment of a psychologist has meant substance abuse, when in fact, it is more common that impairment has been a result of relationships. The latter gets little attention.

In Minnesota we have HPSP, used by all the health boards, which serves some of the functions that CAPs would. However, psychologists usually have different stressors than other health professionals have. Research has long documented the high incidence of distress that occurs among psychologists. For instance, one study reports that those who conduct psychotherapy have a much higher rate of burnout than nurses.

The Committee on Colleague Assistance has drawn up an expansive monograph on CAPs.

PREVIEW OF THE REVISED SPECIALTY GUIDELINES FOR FORENSIC PSYCHOLOGY

The Committee on the Revision of the Specialty Guidelines for Forensic Psychology presented the third draft of the new guidelines. It will replace the 1991 version. The following is lifted out of the introduction to these guidelines.

FYI: Forensic psychology refers to all professional practice by any psychologist working within any subdiscipline of psychology when the intended purpose of the service is to apply the scientific, technical, or specialized knowledge of psychology to the law and to use that knowledge to assist in solving legal, contractual, and administrative problems.

Application of the Guidelines does not depend on the practitioner's typical areas of practice, but rather on the service provided in the case at hand. These Guidelines apply in all matters in which practitioners provide forensic psychological expertise to judicial, administrative, and educational systems including, but not limited to examining treating persons in anticipation of or subsequent to legal, contractual, administrative, or disability determination proceedings....

Psychological practice is not considered forensic solely because the conduct takes place in, or the product is presented in, a tribunal or other judicial legislative, or administrative forum.

To obtain the full copy or to provide comments or ask questions about this, use these contacts:

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- d. **ASPPB Board of Directors Meeting Minutes.** As has become their custom, ASPPB provided for the Board's review and discussion, the minutes of ASPPB's February 2, 2008 Board of Director's meeting.
- e. **Office of Mental Health Practice (OMHP) Update.** The OMHP investigates complaints and takes actions against individuals who practice in the mental health field unlicensed, for example, as a psychotherapist. The Office was formerly housed and funded by the Minnesota Department of Health. The 2005 legislature placed the Office under the administration of the "Mental Health Licensing Boards" (Boards of Social Work, Marriage and Family Therapy, Psychology, Nursing, Medical Practice and Behavioral Health and Therapy).

The new law designated one Board (Social Work volunteered) to provide administrative management and created an OMHP committee made up of a member of each of the Mental Health Licensing Boards. J. Wolf was selected by the Board of Psychology to be its representative on the Committee. Dr. Wolf reported to the Board on the Committee's last meeting on Thursday, April 17, 2008.

Dr. Wolf reported that—

- ◆ Her first Committee meeting was in October 2005.
- ◆ The Office currently has one ½ time employee.
- ◆ The Office sunsets in July 2009 according to the statute that created it.
- ◆ N. Hart suggested that the Board of Psychology spearhead an effort to eliminate the unlicensed provision of mental health services and sunset the OMHP.
- ◆ Dr. Stark agreed with a request from staff to consider bringing Mr. Hart's suggestion to her Executive Council for discussion and consideration of working with the Board on the initiative.

- ◆ The Committee functions basically as a complaint committee, reviewing complaints against unlicensed individuals who practice in the mental health arena and taking action, when the individuals violate the statute.
- ◆ They first establish jurisdictionality of complaints/issues by determining whether the individuals are licensed by an agency and what discipline they appear to be practicing. (They only investigate further if the individual is not licensed by the state.)
- ◆ Typical cases: Former licensees who lost their license; professional (for example, a social worker or psychologist practicing in a government agency which is exempted from licensure by a licensing Board); an unlicensed massage therapist; a parenting consultant.

3. **Waivers/Variations.**

- a. Lynn John Rambeck, PsyD, LP renewed his license on March 3, 2008. His bank mistakenly returned his check on March 17, 2008 unpaid, incurring a late renewal fee for Dr. Rambeck. Dr. Rambeck notified the Board that the returned check was a bank error and requested a waiver of the late fee. In support of the waiver request, the bank wrote to the Board that the check had indeed been returned because of a bank error. M. Seibold moved, seconded by S. Ward that the waiver request be approved on the basis that the licensee met the burden to prove that adherence to the rule would impose an undue burden and that granting the waiver will not adversely affect the public welfare. Voting “aye”: M. Fulton, G. Jensen, J. Lee, T. Nguyen-Kelly, J. Romano, M. Seibold, S. Ward and J. Wolf. Voting “nay”: none. There being eight “ayes” and no “nays”, motion carried unanimously.
- b. Applicant 07C-158 applied for the EPPP and requested a variance. Applicant met the requirements for a PhD with a major in Clinical Psychology from Capella University on July 31, 2005. Applicant has failed to demonstrate one quarter credit in Application of Psychological Principles to Problem Identification and five quarter credits in the applied area of Application of Psychological Principles to Problem Solution. Applicant offered course work that does not demonstrate content in the areas and also master’s level courses that were not transferred into Applicant’s doctoral program as fulfilling Capella’s doctoral requirements. Application Review Committee moved denial of the variance request from MN Rule 7200.1300, Subp. 4 B (2) and (3), Educational Requirements for Licensure on the basis that the applicant did not meet the burden to prove that adherence to the rule would impose an undue burden, that granting the variance will not adversely affect the public welfare, and that the alternative proposed meets the rationale for the rule. Voting “aye”: M. Fulton, G. Jensen, J. Lee, T. Nguyen-Kelly, J. Romano, M. Seibold, S. Ward and J. Wolf. Voting “nay”: none. There being eight “ayes” and no “nays”, motion carried unanimously.

4. **Admit to EPPP.**

Application Review Committee moved that the following applicants be admitted to the national standardized examination on the basis that Applicants’ degrees meet the educational requirements for licensure. Voting “aye”: M. Fulton, G. Jensen, J. Lee, T. Nguyen-Kelly, J. Romano, M. Seibold, S. Ward and J. Wolf. Voting “nay”: none. There being eight “ayes” and no “nays”, motion carried unanimously.

07C-235
07C-251

07C-243
07C-255

07C-247
07C-250

07C-254
07C-248

07C-244
07C-233

07C-242
05C-046

07C-252

07C-125

5. Admit to PRE.

Application Review Committee moved that the degrees of the following PRE applicants be approved on the basis that Applicants' degrees meet the educational requirements for licensure. Voting "aye": M. Fulton, G. Jensen, J. Lee, T. Nguyen-Kelly, J. Romano, M. Seibold, S. Ward and J. Wolf. Voting "nay": none. There being eight "ayes" and no "nays", motion carried unanimously.

07C-204
07C-227
07C-240

06C-364
07C-254
07C-248

07C-202
07C-194
07C-252

07C-243
07C-236
07C-125

07C-119
07C-189
07C-192

6. Licensure as Licensed Psychologists.

Application Review Committee moved that the Applicants listed below be granted licensure as Licensed Psychologists based upon doctoral degrees, having performed successfully on both parts of the examination and having fulfilled all of the requirements of MN. Stat. 148.907, Subd. 2. Voting "aye": M. Fulton, G. Jensen, J. Lee, T. Nguyen-Kelly, J. Romano, M. Seibold, S. Ward and J. Wolf. Voting "nay": none. There being eight "ayes" and no "nays", motion carried unanimously.

Aikman, Kerry Gayle, PhD
Golden, Valerie, PhD
Groberski, Mark Joseph, PhD
Lodhi Khan, Mohammed Salman, PhD
Russell-Martin, Leslie Ann, PhD

7. Other Business.

a. Rule Committee Update. P. Walker-Singleton reported that she received an email from Sandy Glass-Sirany, Office of the Revisor of Statutes, stating that she will be sending to us the proposed licensure rules by Friday, May 16, 2008.

b. Psychology Board Appointments. P. Walker-Singleton reported that she had had email contact with the Governor's appointment's director. The open Board seats were clarified. We set up a meeting for Monday, May 19, 2008 to further discuss the Board's openings.

c. Minnesota Psychological Association's (MPA) Bill HF3251/SF3416 Update. Staff requested that Dr. Trisha Stark update the Board on the status of their bill. Dr. Stark reported that the bill would not be passed this legislative session. However, their Legislative Committee will re-visit the bill provisions this July.

d. Update on the Transfer of Funds from the Special Revenue Fund to the General Fund. P. Walker-Singleton reported that the legislature passed bill requiring a \$3.219 million planned transfer from the Special Revenue Fund to help balance the General Fund deficit. The transfer would be completed during fiscal year 2009 (July 1, 2008-June 30, 2009). The proposed licensure surcharge to build a new licensing system did not pass in conference committee.

e. Electronic Medical Records. Trisha Stark, PhD, LP reported to the Board that there is a state law that mandates that all hospitals and health care providers implement a electronic health records system. The language of the law is as follows:

[Minnesota Statutes 62J.495 HEALTH INFORMATION TECHNOLOGY AND INFRASTRUCTURE](#)

Subdivision 1. Implementation. By January 1, 2015, all hospitals and health care providers must have in place an interoperable electronic health records system within their hospital system or clinical practice setting. The commissioner of health, in consultation with the Health Information Technology and Infrastructure Advisory Committee, shall develop a statewide plan to meet this goal, including uniform standards to be used for the interoperable system for sharing and synchronizing patient data across systems. The standards must be compatible with federal efforts. The uniform standards must be developed by January 1, 2009, with a status report on the development of these standards submitted to the legislature by January 15, 2008.

Dr. Stark plans to attend a meeting in June 2008 that is designed to provide education about the initiative.

8. Adjournment.

M. Fulton moved, seconded by J. Romano that the meeting be adjourned. Motion carried unanimously. The meeting adjourned at 10:44 AM.

Respectfully submitted,

T. NGUYEN-KELLY
Board Secretary