
Call to Order – Aliya Chapman, Ph.D, LCP, Chairperson

- Welcome and Introductions
- Establishment of Quorum
- Mission of the Board/Emergency Egress Procedures..... Page 3

Adoption of Agenda

Public Comment

*The Board will receive public comment related to agenda **items** at this time. The Board will not receive comment on any pending regulation process for which a public comment period has closed or any pending or closed complaint or disciplinary matter.*

Approval of Minutes

Board Meeting – December 3, 2024*..... Page 5

Agency Director Report (Verbal Report) – Arne Owens

Presentation

“Minnesota’s EPPP Test Prep Program”

Sam Sands, JD, Executive Director, Minnesota Board of Psychology

Presentation

“Boost Program”

Trinette Randolph, Boost 200 Program Manager, Virginia Health Care Foundation

Chair Report (Verbal Report) - Dr. Chapman

- Association of State and Provincial Psychology Boards (ASPPB) Chair Report

Legislative and Regulatory Report – Erin L. Barrett, JD, DHP Director of Legislative and Regulatory Affairs

- Regulatory Chart.....Page 15
- Legislative Update (handout)

Committee/Board Member Reports

- Regulatory Committee – Dr. Chapman
 - January 27, 2025 Regulatory Committee Draft Minutes.....Page 16

Staff Reports

- **Executive Director’s Report** – Jaime Hoyle, JD, Executive Director, Boards of Counseling, Psychology and Social Work (BSU) (Verbal Report)
 - PSYPACT Updates
 - ASPPB Updates
 - **Discipline Report** – Jennifer Lang, Deputy Director, BSU.....Page 28
 - **Licensing Report** – Charlotte Lenart, Deputy Director, BSU.....Page 31
-
-

New Business

- School Psychology Update – Dr. Trump
-
-

Next Meeting – May 12, 2025

Adjournment

*Requires a Board Vote

This information is in **DRAFT** form and is subject to change. The official agenda and packet will be approved by the public body at the meeting and will be available to the public pursuant to Virginia Code Section 2.2-3708(D).



Virginia Department of
Health Professions
Board of Psychology

MISSION STATEMENT

Our mission is to ensure safe and competent patient care by licensing health professionals, enforcing standards of practice, and providing information to health care practitioners and the public.

EMERGENCY EGRESS

Please listen to the following instructions about exiting these premises in the event of an emergency.

In the event of a fire or other emergency requiring the evacuation of the building, alarms will sound. When the alarms sound, leave the room immediately. Follow any instructions given by the Security staff.

Board Room 1

Exit the room using one of the doors at the back of the room. **(Point)** Upon exiting the room, turn **RIGHT**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

Board Room 2

Exit the room using one of the doors at the back of the room. **(Point)** Upon exiting the room, turn **RIGHT**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

You may also exit the room using the side door **(Point)**, turn **Right** out the door and make an immediate **Left**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

Board Rooms 3 and 4

Exit the room using one of the doors at the back of the room. **(Point)** Upon exiting the room, turn **RIGHT**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

Training Room 1

Exit the room using one of the doors at the back of the room. **(Point)** Upon exiting the room, turn **LEFT**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

Training Room 2

Exit the room using one of the doors at the back of the room. **(Point)** Upon exiting the doors, turn **LEFT**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

Virginia Board of Psychology
Draft Board Meeting Minutes
Tuesday, December 03, 2024, at 10:00 a.m.
9960 Mayland Drive, Henrico, VA 23233
Board Room 1

PRESIDING OFFICER: Aliya Chapman, Ph.D.

BOARD MEMBERS PRESENT: Cheryl Snyder, Citizen Member
Danielle Spearman-Camblard, Psy.D.
Gary Sibcy, Ph.D.
Karen Trump, Ed.D.
Madeline Torres, QMHP-A, Citizen Member
Norma Murdock-Kitt, Ph.D.
Sonal Pancholi Doran, Psy.D.
William Hathaway, Ph.D.

BOARD STAFF PRESENT: Charlotte Lenart, Deputy Executive Director
Dalyce Logan, Licensing Specialist
Jaime Hoyle, JD, Executive Director
Jennifer Lang, Deputy Executive Director
Krystal Blanton, Discipline and Compliance Case Specialist
Meagan Ohlsson, Licensing Supervisor

DHP STAFF PRESENT: Arne Owens, Agency Director, DHP
Erin Barrett, JD, Director of Legislative and Regulatory Affairs, DHP
James Jenkins, RN, Agency Deputy Director, DHP and Special Advisor to the Governor on Workforce

BOARD COUNSEL PRESENT: James Rutkowski, Assistant Attorney General

CALL TO ORDER: Dr. Chapman called the meeting to order at 10:14 a.m.

MISSION STATEMENT: Dr. Chapman read the mission statement of the Department of Health Professions and the emergency egress procedures.

ESTABLISHMENT OF A QUORUM: With nine members present a quorum was established.

ADOPTION OF AGENDA: The agenda was adopted as presented.

PUBLIC ATTENDEES: Tiffany Anderson, Psy.D.

PUBLIC COMMENT: No Public Comment

APPROVAL OF MINUTES: **Motion:** Dr. Sibcy made a motion, which was properly seconded by Ms. Snyder, to approve the minutes from the September 10, 2024, Quarterly Board meeting as presented. The motion passed unanimously.

Dr. Chapman recommended to the Board to add the public comment from Dr. Carol Petty, Ph.D. to the May 13, 2024, Regulatory Committee meeting minutes.

Motion: Dr. Sibcy made a motion, which was properly seconded by Ms. Snyder, to reconsider and amend the minutes from the May 13, 2024, Regulatory Committee meeting to include public comment from Dr. Petty. The motion passed unanimously.

AGENCY DIRECTOR REPORT:

Mr. Owens welcomed Board members and provided the following information:

- Welcomed the new Board members.
- Thanked Board members for their patience during the expanded security measures that are in place to provide a safe environment.
- General Assembly 2025 session convenes January 08, 2025. The Agency has submitted several proposals to the Governor's office for consideration.
- Highlighted the successful 2024 General Assembly session which lead to the addition of a psychological practitioner license.
- Highlighted the Administrative Division who supports the agency:
 - Human Resources
 - Finance
 - Procurement
 - Information Technology (IT)
- Finalizing agency's internal budget.
- Reminded Board members and public that the Agency is fully funded by application and renewal fees.
- Reported on employee retention efforts through the completion of a study of agency salaries.

CHAIR REPORT:

ASPPB Report

Dr. Chapman and Ms. Hoyle attended the Association of State and Provincial Psychology Annual Board meeting (ASPPB) in Dallas, Texas, October 28, 2024, to November 03, 2024.

Dr. Chapman discussed and provided a written summary of the topics discussed at the ASPPB annual meeting starting on page 86 of the agenda packet.

Dr. Chapman reviewed with the Board the Texas proposed ASPPB Bylaw A amendment and the change in ASPPB's position related to the examination. After listening to the information provided at the conference and asking for a postponement of the vote, Dr. Chapman felt it appropriate to abstain from the vote

on the proposed amendment.

The Board had a brief discussion about programs that are not accredited by the American Psychological Association (APA) or the Canadian Psychological Association (CPA) and how the Board should handle equivalency determinations for these programs. Dr. Chapman recommended to table the discussion until the next Regulatory Committee and Quarterly Board meeting.

Dr. Trump asked if the Board should consider the National Association of School Psychologists (NASP) examination for school psychologists.

LEGISLATIVE AND REGULATORY REPORT:

Chart of Regulatory Actions

Ms. Barrett reviewed with the Board the current regulatory actions for the Board of Psychology as of November 19, 2024. A copy of the chart was included in the agenda packet.

Consideration of Petition for Rulemaking

Ms. Barrett summarized to the Board the public comments received from the Petition of Rulemaking received July 10, 2024, which requests that the Board amend 18VAC125-20-80 to eliminate the requirement to pass the national examination within two years immediately preceding application for licensure and reduce the passing score to 400 in the regulations.

The Board had a long discussion, and it was recommended to deny the petition as the Board does not currently list a specific passing score in regulation and declined to add such score to regulatory language given the difficulty of changing regulations. The Board expressed concerns related to the mobility of psychologist licensed in Virginia should a passing score of 400 be used or placed in regulation. The Board is not aware of any evidence on which to base a passing score of 400. Furthermore, the Board is concerned the negative impact this would place on the exam candidate. Although the Board denied the petition, the Board recognized the concerns which lead to the petition and will review the requests made at a future Regulatory Committee meeting to determine the bases for the existing passing score and the requirement to take the exam within two years. Should the Regulatory Committee determine regulatory change may be needed, it will recommend that action to the Board.

Motion: Dr. Hathaway made a motion, which was properly seconded by Dr. Trump, to deny the petition for rulemaking, citing the Board did not find it prudent to add a specific passing score to the regulations. Additionally, the Board stated that it was not aware of any evidence provided to which to base a passing score of 400. The Board is committed to continued efforts to discuss, monitor and address test fairness. The motion passed unanimously.

Proposed Action for Amendments to Licensure by Endorsement

Ms. Barrett provided a detailed overview of the proposed action to amend the licensure by endorsement requirements.

Motion: Dr. Murdock-Kitt made a motion, which was properly seconded by Dr. Sibcy, to adopt amendments to endorsement section of the regulations as

proposed. The motion passed unanimously.

RECESS: The Board recessed at 12:14 p.m.

RECONVENTION: The Board reconvened at 12:42 p.m.

COMMITTEE/BOARD MEMBER

REPORTS:

VACP Conference Report

Dr. Sibcy attended and presented at the Virginia Academy of Clinical Psychologists Conference (VACP) in Virginia Beach on October 19, 2024. Dr. Sibcy summarized the discussions relating to the implementation of EPPP (Part 1- Knowledge) and EPPP (Part 2-Skills) examinations. Dr. Sibcy stated that Dr. Herbert Stewart, Ph.D., former Board chair and former president of the ASPPB provided background information on the development and implementation of the EPPP examination and the protections it offers to the public.

The next (VACP) Spring Conference in Williamsburg is scheduled for April 4-5, 2025. Dr. Sibcy and Dr. Hathaway expressed an interest to attend and represent the Board. Dr. Chapman invited Board members to consider attending this conference, those interested are to contact Dr. Chapman or a member of staff.

Dr. Chapman stated that she would like for the Board to have more interaction and conversations with the directors of clinical training.

REGULATORY COMMITTEE:

Consideration of Draft Guidance Document on Equivalency Requirements

Dr. Chapman summarized to the Committee's amendments to proposed Guidance Document 125-3. (Attachment A)

Motion: Dr. Sibcy made a motion, which was properly seconded by Ms. Snyder, to accept the recommended changes from the Regulatory Committee to Guidance Document 125-3. The motion passed unanimously.

Verification of Education form

The Committee provided staff guidance on coursework requirements. Staff will provide a draft of the verification of education form for the Committee's review.

Consideration of Draft Guidance Document on Supervision Requirements

The Committee decided not to create a new guidance document on the supervision requirements. The Committee agreed that the language outlined in 18VAC125-20-59 adequately outlined the requirements.

Sample Supervisor Contract

The Committee discussed the supervision guidelines from The Association of State and Provincial Psychology Boards (ASPPB). The Committee discussed what should be included in the supervisory agreement. Staff will provide a draft of the agreement for the Committee's review.

Consideration of Draft Guidance Document on Scope of Practice

The Committee stated that the scope of practice is dependent on the licensees training and the new psychological practitioner licensees will need to practice within the scope of practice as defined in the Code of Virginia.

STAFF REPORTS:

Executive Director's Report:

Ms. Hoyle welcomed the new Board Members, Dr. Sonal Pancholi Doran, Psy.D. who replaced Dr. Ball and Dr. Karen Trump, Ed.D. who replaced Dr. Wallace.

Ms. Hoyle provided a brief overview of the Psychology Interjurisdictional Compact (PSYPACT) Commission meeting. She stated that the minutes from the meeting should be posted on the PSYPACT website shortly. Ms. Hoyle reviewed potential changes to the rules related to seasoned psychologist. The recommendation for consideration was to allow seasoned psychologists to be exempt from meeting the educational requirements for the E. Passport and/or Interjurisdictional Practice Certificate (IPC) for those who have been actively licensed for more than 15 years. The Board agreed that there should be flexibility in the education requirements for seasoned psychologists.

Discipline Report:

Ms. Lang referenced the discipline report on page 130 of the agenda packet. She noted that this board currently has 154 open cases in various stages of the case process. Additionally, she advised that the Board of Psychology has received 69% more cases in 2024 (through November 22, 2024) than received in all of 2023. Across the three behavioral science boards, there has been a 13% increase in cases received.

Ms. Lang introduced Krystal Blanton, the new Discipline and Compliance Case Specialist, who started her employment with the BSU boards in October. Ms. Blanton has a Master's in Public Administration from VCU as well as 17 years of experience at DHP with the Boards of Medicine and Nursing. We are all very excited to have Ms. Blanton as part of our team.

Licensing Report:

Ms. Lenart provided information on the licensing report included on page 133 of the agenda packet. She indicated that the Board has over 6,000 licenses, certification holders and registrants. Board staff is currently reviewing applications within 48 hours and continues to positive survey results of 97.7% for the first quarter of 2025.

The re-engineering efforts are complete for all the current license types. These efforts include:

- Development of individual handbooks for each license type;
- New websites pages for individuals applying for licensure, certification, or residency that give step-by-step process information and links to forms;
- Updated all forms including compliance forms and application forms;
- Updated wording on the automated emails;
- Created a new psychology examination FAQs;

- Created a new license verification page; and,
- Created a flow chart for psychological practitioners.

Staff will begin developing a handbook for the psychological practitioners, create a new supervisory contract agreement form, application and other pertinent forms in preparation for the new license type.

NEW BUSINESS:

Prescriptive Authority

Dr. Chapman provided a brief overview of the (ASPPB) Psychopharmacology Examination for Psychologists (PEP) which measures foundational knowledge associated with the safe and effective practice of psychology involving prescribing of psychotropic medications and collaborating with those who prescribe such medications.

Dr. Chapman and Ms. Barrett stated that this issue will be discussed more at the next Regulatory Committee meeting if legislation is introduced during the 2025 General Assembly.

RECOMMENDED DECISIONS:

Attachment "B"

NEXT MEETING DATE:

The next full Board meeting is scheduled for February 24, 2025.

ADJOURNMENT:

Dr. Chapman adjourned the meeting at 3:58p.m.

Aliya Chapman, Ph.D., Chair Chairperson

Date

Jaime Hoyle, JD, Executive Director

Date

Board of Psychology Education for Psychological Practitioner Applicants

Pursuant to Virginia Code § 54.1-3606.3 and 18VAC125-57, an applicant for licensure as a psychological practitioner must have received a master's degree in clinical, counseling, or school psychology from a program accredited by the American Psychological Association ("APA"), from a program equivalent to those accredited by the APA as determined by the Board, or from a program accredited by another national accrediting body approved by the Board.

As of the effective date of this Guidance Document, the Board has not approved a national accrediting body for master's degree programs in clinical, counseling, or school psychology other than the APA.

Educational programs that meet the following guidelines are deemed equivalent to those accredited by the APA for master's degree programs in clinical, counseling, or school psychology.

1. The program offers a training which prepares individuals for practice as a psychological practitioner as defined in Virginia Code § 54.1-3600.
2. The program is within an institution of higher education accredited by an accrediting agency recognized by the U.S. Department of Education or publicly recognized by the Association of Universities and Colleges of Canada as a member in good standing.
3. Graduates of programs that are not within the United States or Canada may provide documentation from a credential evaluation service that provides information that allows the board to determine if the program is comparable to those recognized by the U.S. Department of Education or the Association of Universities and Colleges of Canada.
4. The program is an integrated, organized sequence of study with an identifiable program of study and psychology faculty and a psychologist directly responsible for the program and educates an identifiable body of students who are matriculated in that program for a degree. The faculty of the program provides professional role models and engages in actions that promotes students' acquisition of knowledge, skills, and competencies consistent with the program's training goals.
5. The program encompasses at least two academic years of full-time graduate study or the equivalent thereof.
6. The program requires that all students have acquired a general knowledge in the discipline of psychology prior to graduation in the knowledge areas listed below.

- a. Affective bases of behavior (e.g., the psychology of affect, emotion and mood including topics such as the neuroscience of emotion or emotional regulation);
 - b. Biological bases of behavior (e.g., physiological psychology, comparative psychology, neuropsychology, sensation and perception, health psychology, pharmacology, neuroanatomy);
 - c. Cognitive bases of behavior (e.g., learning theory, cognition, memory, decision making);
 - d. Developmental bases of behavior (e.g., the psychology of development across the life span with a focus on two or more distinct developmental periods); and
 - e. Social bases of behavior (e.g., social psychology, group processes, organizational and systems theory, discrimination multicultural issues).
7. The program requires the following knowledge areas are mastered at the graduate level prior to graduation.
- a. Research Methodology (e.g., research design, quantitative and qualitative methods, data analysis, sampling procedures sufficient to allow consumption and application of psychological research); and
 - b. Psychometrics (e.g., techniques of psychological measurement, issues of reliability and validity of psychological measures).
8. The program's clinical training requires the following master's level practice competencies:
- a. Integrating psychological science and practice;
 - b. Ethical practice;
 - c. Individual and cultural diversity;
 - d. Professional values and behavior;
 - e. Communication and interpersonal skills;
 - f. Psychological assessment;
 - g. Psychological intervention;
 - h. Knowledge of supervision approaches and theories; and

- i. Consultation and interprofessional skills.
9. The program requires students to complete supervised experiences providing direct psychological practice services to a diverse population of clients as part of an organized sequence of training and under the supervision of a trained and credentialed professional that has direct responsibility for the clients receiving the student's services. The program ensures these supervised experiences allow for students to demonstrate practice competencies described in this guidance document.

CONSIDERATION OF RECOMMENDED DECISIONS
December 3, 2024

BOARD MEMBERS IN ATTENDANCE:

William Hathaway, PhD., LCP, Vice-Chairperson
Sonal Doran Pancholi, Ph.D., LCP
Norma Murdoch-Kitt, Ph.D., LCP
Gary Sibcy, II, Ph.D., LCP

Danielle Spearman-Camblard, Psy.D., LCP
Madeline Torres, Citizen Member
Karen Trump, Ed.D., LSP

CLOSED MEETING:

Dr. Pancholi Doran moved that the Board of Psychology convene in closed session pursuant to §2.2-3711(A)(27) of the *Code of Virginia* to consider agency subordinate recommendations. She further moved that Jaime Hoyle, Meagan Ohlsson and Krystal Blanton attend the closed meeting because their presence in the meeting was deemed necessary and would aid the Board in its consideration of the matters. The motion was seconded and passed unanimously.

RECOMMENDATIONS:

Anne Creekmore, LCP

Case Nos.: 208727, 211678, and 222854

Anne Creekmore did not appear before the board but submitted a written response. The board considered the agency subordinate's recommendation to revoke Dr. Creekmore's license to practice clinical psychology.

David Mitchell, LCP Reinstatement Applicant

Case No.: 231811

David Mitchell did not appear before the board and did not submit a written response. The board considered the agency subordinate's recommendation to approve Dr. Mitchell's application for reinstatement with certain terms and conditions.

RECONVENE:

Dr. Pancholi Doran certified that pursuant to §2.2-3712 of the *Code of Virginia*, the Board of Psychology heard, discussed or considered only those public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as identified in the original motion.

DECISION:

In the matter of Anne Creekmore, LCP, Dr. Sibcy made a motion to reject the recommendation of the agency subordinate and enter a revised Order. The motion was seconded and passed with a vote of 6-1-0.

In the matter of David Mitchell, LCP Reinstatement Applicant, Dr. Spearman-Camblard made a motion to accept the recommendation as presented. The motion was seconded and passed unanimously.

Board of Psychology
Current Regulatory Actions
As of February 13, 2025

In the Governor's Office

None.

In the Secretary's Office

None.

At DPB

None.

At OAG

VAC	Stage	Subject Matter	Submitted from agency	Time in current location	Notes
18VAC125-20	Exempt	Licensing of psychological practitioners	9/12/2024	154 days	Pursuant to legislative requirements. Legislation requires effective date of regulations to be January 1, 2025, which the Board will now miss.
18VAC125-20	Proposed	Amendments to licensure by endorsement	12/5/2024	70 days	Reduces burdens on applicants and simplifies the application process.

Recently effective or awaiting publication

None.

**Virginia Board of Psychology
Draft Regulatory Committee Meeting Minutes
Department of Health Professions
Board Room 3
9960 Mayland Drive, Henrico, VA 23233
Monday, January 27, 2025, at 10:00 a.m.**

PRESIDING OFFICER: Aliya Chapman, Ph.D., LCP

COMMITTEE MEMBERS PRESENT: Sonal Pancholi Doran, Psy.D., LCP
William Hathaway, Ph.D., LCP
Karen Trump, Ed.D., LSP

ABSENT COMMITTEE MEMBER: Gary Sibcy, Ph.D., LCP

BOARD STAFF PRESENT: Jaime Hoyle, Executive Director
Charlotte Lenart, Deputy Executive Director
Meagan Ohlsson, Licensing Supervisor

DHP STAFF PRESENT: Erin Barrett, Director of Legislative Affairs and Policy, DHP
Arne Owens, Agency Director, DHP (*left meeting at 11:21am*)

CALL TO ORDER: Dr. Chapman called the meeting to order at 10:01a.m.

MISSION STATEMENT: Dr. Chapman read the mission statement of the Department of Health Professions and the emergency egress procedures.

ESTABLISHMENT OF A QUORUM: With four Committee members present a quorum was established.

APPROVAL OF MINUTES: The Committee reviewed the minutes from the last meeting held on December 02, 2024.

Motion: Dr. Hathaway made a motion, which was seconded by Dr. Pancholi Doran, to adopt the minutes from the December 02, 2024, Regulatory Committee as presented. The motion passed unanimously.

ADOPTION OF AGENDA: The agenda was adopted as presented.

PUBLIC ATTENDEES: None

PUBLIC COMMENT: Taylor Ceroni, Ph.D., provided written comment (Attachment A)
Shannon Cone, Ph.D., provided written comment (Attachment B)
TyKera Marrow, Ph.D., provided written comment (Attachment C)
Ikeshia Smith, Psy.D., provided written comment (Attachment D)
Contessa Tracy, Psy.D., provided written comment (Attachment E)

Patricia Owens, provided written comment (Attachment F)

The Committee decided to not address the written public comments individually, as the subject matter will be discussed later in the agenda.

Dr. Chapman welcomed new Committee members, Dr. Karen Trump, Ed.D., and Sonal Pancholi Doran, Psy.D.

UNFINISHED BUSINESS:

Review Psychological Practitioner Draft Application Forms

Sample Supervisor Agreement

The Committee reviewed in detail the proposed sample of the supervisor agreement, which can be utilized by supervisors and psychological practitioners to ensure that expectations and responsibilities are clearly defined for each party. Staff will incorporate the suggested changes.

During the discussion, the Committee discussed the potential need for a guidance document to further outline the expectations of supervision.

Areas of Graduate Study form

The Committee reviewed and discussed recommended changes to the area of graduate study form. Staff will incorporate the suggested changes.

Ms. Lenart proposed that staff develop an education matrix to document the names of schools and coursework approved by the Committee, which would eliminate the need for repeated evaluations of the same courses and ensure consistency in the Committee's review of education. The Committee agreed that the matrix was a good idea.

Verification of Supervision form

The Committee reviewed and discussed recommended changes to the verification of supervision form. Staff will incorporate the suggested changes in the form.

RECESS:

The Board recessed at 11:21 a.m.

RECONVENTION:

The Board reconvened at 11:30 a.m.

The Committee discussed the public comment letters requesting the Board to consider lowering the pass rate for the examination and create alternative pathways to licensure. The Committee acknowledged the sensitivity of the topic and emphasized the importance of assuring the public that their concerns are being heard. The Committee will continue to explore potential alternative pathways, discuss the possibility of creating or supporting a program to assist those who struggle to pass the EPPP exam through examination prep courses, mentorship and scholarships, and potentially facilitating an open public forum with the exam provider, the Association of State and Provincial Psychology Boards (ASPPB).

Dr. Chapman recommended that the Board invite the Executive Director of the Minnesota Board of Psychology to provide a presentation at the next Board

meeting, detailing the steps taken by Minnesota to assist individuals who struggle to pass the examination.

NEW BUSINESS:

Status of the EPPP Part 2

The Committee discussed the ASPPB Board of Director's announcement and statement to reimagine the EPPP as a single, integrated examination of both knowledge and skills. According to ASPPB, they plan to establish a Working Group, conduct Quarterly Town Halls, and a complete a new Job Task Analysis.

Dr. Chapman noted that she had not heard any information regarding the ASPPB discontinuing the EPPP-2 skills portion of the exam. The Board discussed the potential impact of this change, with a single examination, on both doctoral-level applicants and those at the master's level.

Dr. Chapman recommended to the Committee to invite Alex Siegel, J.D., Ph.D., with ASPPB to discuss the EPPP-2 implementation.

Discuss EPPP passing score for psychological practitioners and school psychologists

The Committee discussed the passing score for both sections of the EPPP examination for the new psychological practitioner. The Committee considered the implications of lowering the passing score below the recommended threshold set by ASPPB. Concerns were raised that reducing the score could potentially compromise public safety. Additionally, the Committee emphasized that, without substantial supporting evidence, there is no justification to deviate from ASPPB's recommended passing score of 450.

Dr. Chapman requested that Dr. Trump contact the Virginia Department of Education (DOE) to discuss the potential impact of lowering examination scores on school psychologists. Dr. Trump will provide an overview of the education requirements, services provided and the importance of school psychologists in Virginia at the Board's meeting on February 24, 2025.

RECESS:

The Board recessed at 12:36 p.m.

RECONVENTION:

The Board reconvened at 12:46 p.m.

Discuss internship equivalency requirements

The Committee discussed methods to better assess the equivalency of internships. For non-APA accredited programs with non-accredited internships, the Committee agreed that staff should develop a standardized questionnaire for the internship clinical director to complete, providing detailed information about the internship to facilitate the Board's determination of equivalency. The Committee also discussed using the internship requirements set by the Association of Psychology Postdoctoral and Internship Centers (APPIC) as the minimum standard for evaluating equivalency.

Additionally, the Board agreed that APA-accredited programs allowing students to complete a non-accredited internship should be considered without further review, provided that the internship clinical director attests that the program conducted due diligence to ensure the non-accredited internship met the necessary standards.

Discuss potential pathways licensure as psychological practitioner for LPCs and Residents in Counseling with psychology degrees

The Committee had a brief discussion regarding potential pathways for licensed professional counselors (LPC) and residents in counseling and concluded not to pursue an alternative pathway. It was agreed that all applicants must meet the degree, coursework, supervised experience, and examination requirements to be eligible for the psychological practitioner license.

NEXT MEETING DATE:

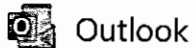
The next Regulatory Committee meeting is scheduled for April 7, 2025.

ADJOURNMENT:

Dr. Chapman adjourned the meeting at 2:14 p.m.

Aliya Chapman, Ph.D., Committee Chair Chairperson

Jaime Hoyle, JD, Executive Director



PUBLIC COMMENT FOR REGULATORY MEETING 1/27/25

From Taylor Ceroni <taylor.ceroni@gmail.com>
Date Fri 1/24/2025 3:49 PM
To Board of Psychology <psy@dhp.virginia.gov>

Dear Members of the Virginia Board of Psychology,

I am writing to express my deep concern regarding the current EPPP pass rates. As a psychologist who has not been able to pass the EPPP with the required score of 500, I have personally experienced the significant and arbitrary barriers this exam imposes, barriers that are not reflective of my clinical abilities or contributions to the field.

Throughout my career, my clinical competency has been recognized and supported by numerous supervisors, administrators, and colleagues. I was hired directly out of my doctoral internship at a VA medical center for a position specifically adapted for my expertise in treating individuals experiencing Intimate Partner Violence (IPV). I was appointed as the program lead for the newly established IPV Assistance Program and later also became the interim lead for the Military Sexual Trauma Program, expanding my oversight to include the treatment and care of this critically underserved population. During this time, I also co-lead the Veterans Integrated Services Networks (VISN) overseeing the clinical operations of IPV treatment programs across the southeastern United States and served on national committees tasked with shaping evidence-based practices and clinical guidelines for these programs nationwide.

Despite my proven ability to provide effective care to some of the most vulnerable populations, I was unable to maintain my position because I could not pass the EPPP with the required score of 500 within the VA's two-year time limit. This test of theoretical knowledge, with an arbitrary, non-empirical passing threshold, ultimately cost me my position.

The EPPP, as currently implemented, does not definitively measure clinical competency or predict therapeutic effectiveness. It primarily tests theoretical knowledge, much of which may have little relevance to the realities of clinical practice. Graduate programs and psychology internship programs already include rigorous clinical training, requiring hundreds of hours of supervised practice and comprehensive evaluations by licensed psychologists. These programs ensure that candidates are well-prepared to deliver safe, effective care, regardless of whether they score a 400 or 500 on the EPPP.

Moreover, there is no evidence to suggest that practitioners who score between 400 and 499 are less competent or pose a greater risk to public safety than those who score above 500. A passing score of 400 would still demonstrate a strong understanding of foundational knowledge, while reducing unnecessary barriers that disproportionately affect candidates from diverse backgrounds. Research has consistently shown that the EPPP disadvantages candidates from minority groups, including Black/African American and Hispanic/Latinx psychologists, due to factors such as economic inequality, access to study resources, and cultural biases in test content. These disparities exacerbate inequities

within the field and hinder the goal of creating a psychological workforce that reflects and serves our communities.

The consequences of these barriers are not abstract. For me, The consequences of this were devastating, not only for me but for the Veterans under my care and my colleagues and supervisors who believed in my ability. Veterans facing IPV are already underserved and face significant barriers to care, often with fatal consequences if they cannot leave abusive relationships safely. Losing my role as a program lead impacted the continuity of care for these individuals and diminished the specialized expertise available to individuals in our community.

I was fortunate to secure a postdoctoral position in a specialty that allows me to continue serving another underserved population. This transition has come at a significant personal and professional cost. I am unable to serve the populations I was specifically trained and deeply committed to helping, particularly in my specialty. The stress, financial hardship, and inability to progress into independent practice have not only hindered my career aspirations but also stunted my ability to advance in every area of my life.

While I understand the Board's concerns, I urge you to reconsider the impact of the current cutoff score on both candidates and the broader mental health landscape in Virginia. The Board cited three primary reasons for denying the previous petition: the absence of a specific score in current regulations, concerns regarding licensure mobility, and the lack of evidence supporting a passing score of 400. I would like to address each of these concerns:

Regulatory Challenges: While the Board does not list a specific passing score in its regulations, ASPPB's recommended score of 500 is applied as a de facto standard. This standard imposes arbitrary and non-empirical barriers to licensure without considering the broader implications. Adopting a passing score of 400 would provide a more equitable standard, particularly given that ASPPB acknowledges supervised practice competency at a score of 450. Even if regulatory changes are difficult, addressing this issue directly would create lasting improvements for both aspiring psychologists and the communities they serve.

Licensure Mobility Concerns: The Board expressed concerns about potential impacts on interstate mobility for Virginia-licensed psychologists. However, PsyPact, which facilitates telepsychology across state lines, does not require a specific EPPP score for eligibility. Instead, it ensures that practitioners meet the licensure requirements of their home state. Lowering the passing score in Virginia would not necessarily impede licensure mobility, as long as the state continues to enforce other licensure requirements, such as supervised clinical experience and adherence to ethical standards.


Lack of Evidence for a Passing Score of 400: The Board noted the absence of evidence supporting a passing score of 400. However, there is similarly no evidence that a passing score of 500 correlates with clinical competency or public safety. The EPPP primarily measures theoretical knowledge, not practical skills, and has not demonstrated predictive validity for clinical success. Lowering the passing score to 400 would still reflect a strong understanding of foundational knowledge while reducing barriers that disproportionately impact diverse candidates, as highlighted by studies showing racial disparities in pass rates (Sharpless, 2019, 2021; Saldaña, Callahan, & Cox, 2024). A passing score of 400 would also address Virginia's urgent need for mental health professionals, particularly in underserved areas.

I appreciate the Board's recognition of the concerns raised in the previous petition and its commitment to continued discussion and monitoring of test fairness. I urge the Board to take action by lowering the

passing score to 400, which would alleviate undue burdens on candidates while maintaining the integrity of the licensure process. By doing so, Virginia can foster a more equitable and inclusive pathway to licensure, address the mental health provider shortage, and expand access to culturally competent care for its residents.

Thank you for your time and consideration.

Sincerely,
Taylor Ceroni, Ph.D.

 Outlook

PUBLIC COMMENT FOR 1/27/2025 REGULATORY MEETING

From Shannon Cone <shannonconephd@gmail.com>

Date Fri 1/24/2025 11:57 AM

To Board of Psychology <psy@dhp.virginia.gov>

Dear Virginia Board of Psychology,

This email is in support of the upcoming discussion of the passing score of the EPPP for Licensure for those candidates pursuing to become Practicing Psychologists and for Doctoral Level School Psychologists.

I also support the discussion of creating additional pathways (NCSP; LPC) for licensure as psychological practitioners and school psychologists in VA.

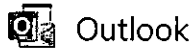
Having alternate criteria for qualified applicants seeking licensure in VA is needed.

I encourage the VA board to discuss pathways towards the process of obtaining licensure. EPPP qualifying scores continue to be an unfortunate but realistic barrier for qualified applicants across the US. I encourage the VA Board of Psychology to consider additional criteria for applicants. One example could include an acceptable "range" of qualified EPPP scores.

Sincerely,

Mr. Shannon Paul Cone, Ph.D., NCSP

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PUBLIC COMMENT FOR REGULATORY MEETING 1/27/25

From Tykera Marrow <tykera.marrow@students.jsums.edu>

Date Thu 1/23/2025 4:25 PM

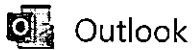
To Board of Psychology <psy@dhp.virginia.gov>

The EPPP has been an unnecessary barrier to many highly trained and competent clinicians who have spent many years and significant sums of money obtaining research and clinical competence through various APA-accredited programs, only to be hindered from independent practice by this single exam. I am disappointed this has continued despite decades of complaints from licensing candidates and peer-reviewed publications on the unfairness of this exam. The EPPP is not a definitive measure of clinical competency. The exam primarily tests theoretical knowledge, not practical skills, and its structure has been criticized for being a poor predictor of clinical success or therapeutic effectiveness. Many graduate programs already implement rigorous clinical training, which includes hundreds of hours of supervised practice and regular evaluations by licensed psychologists. These programs ensure that candidates are well-prepared for real-world clinical work, regardless of whether they score a 4-5-600 on a knowledge-based test. Moreover, no empirical evidence suggests that practitioners who score between 400 and 499 are less competent or at a greater risk to public safety than those who score at or above 500. A passing score of 400, 450, or 475 still represents a strong understanding of the foundational knowledge required for licensure, and allowing a slightly lower threshold would allow otherwise highly qualified individuals to enter the field without compromising public safety. It is widely known that the EPPP has been routinely criticized for disproportionately disadvantaging specific populations, particularly candidates from minority backgrounds. Research indicates that candidates from underrepresented groups tend to have lower pass rates on the EPPP. This disparity likely stems from various factors, including economic inequality, access to study resources, and cultural bias in test content. A higher passing threshold (500) exacerbates these disparities, creating unnecessary barriers for diverse candidates who might otherwise be highly competent practitioners. Clinical psychology is a demanding field that requires years of education, supervised training, and professional dedication. Removing barriers does not reflect a lack of commitment; it acknowledges that professional growth is a lifelong process, and candidates may need more time to meet specific requirements due to personal or external circumstances. The goal should be to produce effective, compassionate clinicians, not to impose rigid time constraints that may hinder the development of future psychologists.

TyKera Marrow, PhD

Jackson State University | College of Liberal Arts

License Eligible Psychologist | Clinical Psychology



PUBLIC COMMENT FOR REGULATORY MEETING 1/27/25

From Ikeshia Smith <ikeshiasmith@gmail.com>

Date Fri 1/24/2025 6:05 PM

To Board of Psychology <psy@dhp.virginia.gov>

Hello,

My name is Dr. Ikeshia Smith and I am based out of Ohio. It has come to my attention over the past three years the disparities in pass rates for the EPPP. While much advocacy and research has been put forth by many past and current psychologists, the problem remains. As a next step, I want to acknowledge my support in changing the EPPP score that will not only increase the diversity among practitioners but also end the baseless standards that are often not supported through valid measures.

Thank you

Dr. Ikeshia Smith



PUBLIC COMMENT FOR REGULATORY MEETING 1/27/25

From Contessa Tracy <contessatracy13@gmail.com>

Date Thu 1/23/2025 5:10 PM

To Board of Psychology <psy@dhp.virginia.gov>

Dear Members of the Board,

I am writing to bring attention to critical issues with the Examination for Professional Practice in Psychology (EPPP) and the practices of the Association of State and Provincial Psychology Boards (ASPPB). As a clinically trained psychologist (at the doctoral level), former Military Intelligence Officer, and current Medical Operations planner, I have dedicated 16 years to serving in both the military and mental health fields. Upon earning my doctorate in Clinical Psychology, I completed both my clinical internship and residency with the U.S Army at Brooke Army Medical Center. Despite fulfilling all academic requirements and receiving highly valuable clinical training from this reputable Military Treatment Facility, I have faced repeated challenges in passing the EPPP, which unfortunately led to discrimination, maltreatment, and an adverse impact on my mental and physical well-being.

Despite completing three EPPP prep programs, over 100 hours of tutoring, and nine testing attempts, my highest score remains 472—below the required 500 for independent licensure in the state of Virginia (my beloved home state). This has resulted in my removal from the Army Clinical Psychology branch, forcing me to fulfill my service obligation in another career field. More importantly, this is not an isolated experience—many BIPOC individuals face similar struggles both within the Army Psychology career field and in the psychology civilian sector.

ASPPB's refusal to provide meaningful feedback beyond a basic bar graph is a major concern, particularly for repeat test takers. The current process is opaque and lacks accountability, allowing the continued generation of substantial revenue with no oversight into the negative impacts on independently licensed candidates. Furthermore, the nature of some test questions, including those that disproportionately emphasize race and gender, raises ethical concerns about the fairness of the exam.

I beg this board to consider calling for a public meeting with ASPPB to address the EPPP's content and ASPPB's practices. Additionally, I ask the board to revisit their regulations and the passing score requirement, potentially lowering it to 400, and taking a strong stance against EPPP Part 2-Skills. In support of ongoing efforts by the Texas State Board of Examiners of Psychologists, I ask that VA be urged to amend its bylaws, and consider joining with Texas to use a fair examination that is not provided or overseen by ASPBB or any of its affiliates.

Thank you for your attention to this matter and for your consideration.

Contessa A. Tracy, PsyD
CPT, Army



Public Comment for Regulatory Meeting 1/27/2025

From Pat Cone <patcone467@gmail.com>
Date Fri 1/24/2025 11:44 AM
To Board of Psychology <psy@dhp.virginia.gov>

Dear Virginia Department of Health Professions: Board of Psychology,

This email is to support the upcoming discussion at the next regulatory meeting (1/27/2025) of the passing score of the EPPP for Licensure for Practicing Psychologists and for Doctoral Level School Psychologists. In addition, I support the discussion of the creation of additional pathways for licensure as psychological practitioners and school psychologists with a current LPC and NCSP credential.

As a retired educator and former practicing mental health licensed professional, having additional/alternate criteria in place for qualified applicants seeking licensure in VA seems imperative. After reviewing recent data from NASP and APA, it appears that the number of graduate training programs in school psychology are not increasing. The number of licenses cannot meet the number of needs of our communities. In addition, the number of working (licensed and/or nationally certified) school psychologists are dropping significantly nationwide.

I encourage the board of psychology to continue discussing this unfortunate reality and find unique and creative solutions for the process of obtaining licensure in VA. Creating additional methods to allow qualified and interested licensure candidates to obtain licensure in VA is crucial. Having an additional pathway (i.e., new acceptable "range" of EPPP qualifying scores) for qualified applicants seems imperative to help the growing need of mental health services to our growing communities. An active NCSP is an extremely significant credential. This is one example that could be used as a possible criteria (i.e., new acceptable alternative pathway) for doctoral level school psychologists seeking a practicing licensure in VA.

Lastly, I also support the continued discussion of the possibility of LPC's with a graduate level academic background in psychology to apply for licensure as psychological practitioners and school psychologists. Again, the need for mental health services is enormous and having pathways for qualified licensure applicants seeking this level of licensure should be thoroughly explored. Again, the current level of licenses cannot meet the needs of our growing communities in VA.

Respectfully submitted,

Ms. Patricia A. Owens

Discipline Reports

Nov 16, 2024 - Feb 7, 2025

NEW CASES REC'D FROM ENFORCEMENT Nov 16, 2024 - Feb 7, 2025
32

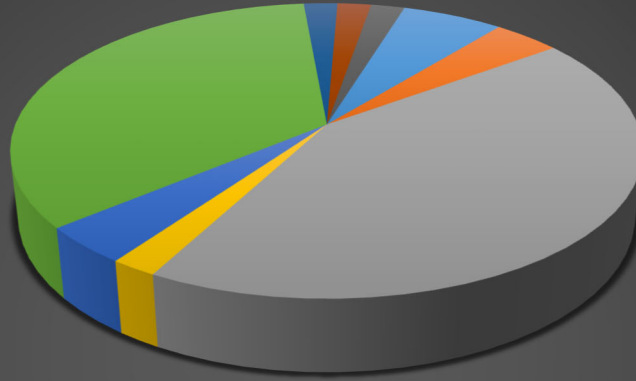
TOTAL OPEN INVESTIGATIONS (ENFORCEMENT)
23

OPEN CASE STAGES as of Feb 7, 2025	
Probable Cause Review	111
Scheduled for Informal Conferences	12
Scheduled for Formal Hearings	0
Other (pending CCA, PHCO, hold, etc.)	8
Cases with APD for processing (IFC, FH, Consent Order)	7
TOTAL CASES AT BOARD LEVEL	138

CASES CLOSED Nov 16, 2024 - Feb 7, 2025	
No violation	45
Undetermined	0
Violation 3 Informal Conferences	3
Application Appeal Approved 1 Informal Conference	1
Application Appeal Denied	0
Application Appeal Withdrawn	0
TOTAL CASES CLOSED	49

AVERAGE CASE PROCESSING TIMES (counted on closed cases)	
Average time for case closures	428 days
Avg. time in Enforcement (investigations)	106 days
Avg. time in APD (IFC/FH preparation)	76 days
Avg. time in Board (includes hearings, reviews, etc).	316 days

Closed Case Categories



■ Business Practice Issues (3)

■ Confidentiality Breach (2)

■ Diagnosis/Treatment (21)
3 violations (LCP)

■ Fraud, non-patient care (1)

■ Inability to Safely Practice (2)

■ No jurisdiction (17)

■ Records Release (1)

■ Reinstatement (1)
1 approved (LCP)

■ Scope of Practice (1)

Behavioral Science Unit (BSU)
Boards of Counseling, Psychology, and Social Work

CURRENT OPEN CASES PER BOARD as of Feb 7, 2025	
Board of Counseling	227
Board of Psychology	138
Board of Social Work	225
TOTAL CASES WITH BOARD STAFF	590

2024 BSU Cases Received from Enforcement

	COUNSELING	PSYCHOLOGY	SOCIAL WORK	BSU TOTAL
2021	344	132	94	570
2022	381	127	108	616
2023	440	124	160	724
2024	493	193	198	884

Discipline Staff for BSU

Jennifer Lang, Deputy Executive Director
 Christy Palmore, Discipline and Compliance Case Specialist
 Krystal Blanton, Discipline and Compliance Case Specialist
 Discipline Reviewer, Board of Counseling (part-time)
 Discipline Reviewer, Board of Psychology (part-time)
 Discipline Reviewer, Board of Social Work (part-time)

PSYCHOLOGY LICENSING REPORT

Satisfaction Survey Results	
2025 2nd Quarter (October 1, 2024 – December 31, 2024)	93.8%

Totals as of February 13, 2025*

Current Active Licenses	
Clinical Psychologists	4,736
Resident in Training	416
Applied Psychologist	24
School Psychologists	100
Resident in School Psychology	34
School Psychologist-Limited	275
Sex Offender Treatment Provider	454
Sex Offender Treatment Provider Trainee	72
Total	6,111

*Unofficial numbers (for informational purposes only)

APPLICATIONS RECEIVED

Applications Received	August 2024*	September 2024*	October 2024*	November 2024*	December 2024*	January 2025*
Clinical Psychologists	50	48	39	43	27	53
Resident in Training	20	31	17	8	6	8
Applied Psychologist	1	2	1	1	3	1
School Psychologists	2	1	1	2	0	3
Resident in School Psychology	1	1	1	1	0	1
School Psychologist-Limited	1	0	1	0	1	0
Sex Offender Treatment Provider	1	1	0	2	0	0
Sex Offender Treatment Provider Trainee	1	1	3	3	1	3
Total	77	85	63	60	38	69

LICENSES ISSUED

Licensed Issued	August 2024	September 2024	October 2024	November 2024	December 2024	January 2025
Clinical Psychologists	43	35	51	26	26	29
Resident in Training	13	26	23	8	7	6
Applied Psychologist	2	0	0	0	0	0
School Psychologists	0	1	1	1	0	2
Resident in School Psychology	0	0	3	1	0	1
School Psychologist-Limited	1	1	0	0	1	0
Sex Offender Treatment Provider	2	0	0	2	0	2
Sex Offender Treatment Provider Trainee	2	1	2	4	1	0
Total	63	64	80	420	35	40

*Unofficial numbers (for informational purposes only)

Additional Information:

- **Board of Psychology Staffing Information:**

- The Board currently has one full-time position to answer phone calls, emails and to process applications across all license types.
 - Licensing Staff:
 - Meagan Ohlsson – Licensing Supervisor (Full-Time)

- **Psychological Practitioner License (Coming Soon):**

- In preparation for the introduction of the new license type, the staff has developed a comprehensive PowerPoint presentation outlining the requirements and process, created new forms and agreements, and is in the process of finalizing the online applications and instructions.