



**Virginia Board of Psychology
Board Meeting Minutes
Tuesday, February 24, 2025, at 10:00 a.m.
9960 Mayland Drive, Henrico, VA 23233
Board Room 3**

PRESIDING OFFICER: Aliya Chapman, Ph.D.

BOARD MEMBERS PRESENT: Cheryl Snyder, Citizen Member
Gary Sibcy, Ph.D.
Karen Trump, Ed.D.
Madeline Torres, QMHP-A, Citizen Member
Norma Murdock-Kitt, Ph.D. (*joined meeting at 11:48am*)
Sonal Pancholi Doran, Psy.D. (*attend virtually due to testifying in Goldsboro, NC*)
William Hathaway, Ph.D.

BOARD MEMBERS ABSENT: Danielle Spearman-Camblard, Psy.D.

BOARD STAFF PRESENT: Charlotte Lenart, Deputy Executive Director
Dalyce Logan, Sr. Licensing Certification 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 (*left meeting at 11:30am*)

Erin Barrett, JD, Director of Legislative and Regulatory Affairs, DHP (*left meeting at 12:28 pm*)
Matt Novak, Policy & Economic Analyst, DHP (*left meeting at 12:28 pm*)

BOARD COUNSEL PRESENT: James Rutkowski, Assistant Attorney General

CALL TO ORDER: Dr. Chapman called the meeting to order at 10:01 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 six members present a quorum was established.

ADOPTION OF AGENDA: The agenda was adopted as presented.

PUBLIC ATTENDEES: Debbie Oswalt, Executive Director, Virginia Health Care Foundation
Denise Daly-Konrad, Director of Strategic Initiatives for the Virginia Health Care Foundation
Tiffany Anderson, Psy.D.
Trinette Randolph, Boost!, Program Manager, Virginia Health Care Foundation

PUBLIC COMMENT: No Public Comment

APPROVAL OF MINUTES: The Board reviewed the minutes from the last meeting held on December 3, 2024.

Motion: Dr. Sibcy made a motion, which was properly seconded by Ms. Snyder, to approve the minutes from the December 03, 2024, Quarterly Board meeting as presented. The motion passed unanimously.

AGENCY DIRECTOR REPORT:

Mr. Owens provided the following information:

- Acknowledged Jim Jenkins for his important role with DHP as the Chief Deputy Director and his contribution to the behavioral health transformation planning effort, Right Help, Right Now, providing leadership with Jaime Hoyle of Workstream 5, which was a focused effort on the behavioral health care workforce.
- Reported that agency operations are stable.
- Employee retention strategies are in progress, including a salary study.
- Highlighted the successful 2024 General Assembly session, which led to the addition of the psychological practitioner license.
- Updated the Board on the 2025 General Assembly session:
 - SB 752 - Prescriptive authority for clinical psychologist
 - HB 1861 – Endorsement pathway for practitioners
 - SB 826 – Predetermination regarding prior convictions
 - SB 1363 – Eliminates the Board of Health Professions

PRESENTATIONS:

Minnesota's EPPP Test Prep Program

Sam Sands, JD, Executive Director, Minnesota Board of Psychology, provided a presentation on Minnesota's EPPP Test Prep Program Pilot which detailed the steps taken by the Minnesota Board to assist individuals who struggle to pass the examination. The program focuses on individuals who self-identify as people of color, medically underserved areas/populations and languages other than English. (Attachment A)

Dr. Chapman thanked Mr. Sands for his presentation and the Board discussed the information provided.

BOOST Program

Trinette Randolph, Boost! Program Director, Virginia Health Care Foundation provided a presentation on how the Boost Program pays for supervision required for licensure and provides exam preparation for counselors and social workers. (Attachment B)

Dr. Chapman thanked Ms. Randolph for her attendance and the information

regarding the Boost Program.

RECESS: The Board recessed at 11:30 a.m.

RECONVENTION: The Board reconvened at 11:43 a.m.

CHAIR REPORT: Association of State and Provincial Psychology Boards (ASPPB) Report

Dr. Chapman reported that there are no new updates from ASPPB on the reimagined EPPP examination and how this will affect Virginia.

Dr. Chapman noted that umbrella boards and the use of American Psychological Association (APA) Ethics Code and ASPPB Code of Conduct by regulatory boards continue to be active topics of discussion.

Dr. Chapman provided a handout of the ASPPB Task Force on Masters Title and Scope (PRI-LM) recommendations and the Board discussed the how the model act the Board's regulations differ. (Attachment C)

ASPPB will hold its mid-year meeting on April 24-27, 2025, in Montreal, Quebec.

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 February 13, 2025. A copy of the chart was included in the agenda packet.

Legislative Update

Ms. Barrett provided a detailed overview with the Board the current legislative actions for the Board of Psychology as of February 24, 2025. She discussed four bills affecting DHP, particularly SB 752 and HB 1861, which impact the Board of Psychology. (Attachment D)

COMMITTEE/BOARD MEMBER REPORTS:

January 27, 2025, Regulatory Committee Draft Minutes

Dr. Chapman summarized the public comment letters requesting the Board to consider lowering the pass rate for the examination and create alternative pathways to licensure. The Committee discussed the passing score and the implications of lowering the score below the threshold set by ASPPB. The Committee agreed that without substantial supporting evidence, there is no justification to deviate from ASPPB's recommended passing scores of 450. The Committee also discussed the implications if ASPPB chooses to eliminate part 2 of the EPPP examination and how that would affect the new requirements for the newly developed psychological practitioner license type.

Dr. Chapman stated that she would invite Dr. Hao Song, Ph.D., Associate Executive Officer of Examinations Services (ASPPB) to discuss ASPPB's plan on the implementation of the reimagined EPPP exam.

The Committee reviewed and discussed the supplemental forms for the

psychological practitioner license. 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 for those who completed non-accredited degree and internship.

RECESS: The Board recessed at 12:28 p.m.

RECONVENTION: The Board reconvened at 12:54 p.m.

STAFF REPORTS:

Executive Director's Report:

Ms. Hoyle thanked staff for their hard work with the development of forms, handbooks and other resources to aid in the development and implementation of the psychological practitioner license.

Ms. Hoyle provided a brief update on the Psychology Interjurisdictional Compact (PSYPACT). The Finance Committee, of which she is a member, met and proposed creating a reserve fund for the Commission. At the next Finance Meeting, they will begin developing a financial strategic plan. The next PSYPACT Commission's meeting is July 14, 2025 and it will be virtual.

Ms. Hoyle stated ASPPB has established a Task Force on the EPPP exam and Ms. Hoyle expressed interest in joining. She will have to wait until the Fall for the next opportunity to volunteer.

ASPPB mid-year meeting will be held April 24, 2025. Dr. Hathaway and Dr. Chapman expressed an interest to attend and represent the Board.

Discipline Report:

Ms. Lang reported on the discipline case information from November 16, 2024 - February 7, 2025. A copy of the report was included in the agenda packet. She noted that in 2024, the Board of Psychology received 193 new cases and closed 129. For the three behavioral science boards (Counseling, Psychology, and Social Work), discipline staff received 884 new cases and closed 732, with 590 open cases. Since 2021, the new cases received for the three boards have increased by 55%. With the new credentials created for this board and the Board of Counseling, staff expects this number to continue to rise.

Ms. Lang thanked the board's case reviewer for her hard work and noted that she reviewed 91 cases last year and, since starting with the board 2.5 years ago, she has reviewed approximately 250 cases. She also thanked Christy Palmore for her continued hard work and dedication to the public and the Board of Psychology, as well as to the Boards of Counseling and Social Work. Ms. Lang also acknowledged discipline's newest employee, Krystal Blanton. Krystal began with the board in October and continues to do an amazing job.

Licensing Report:

Ms. Lenart provided information on the licensing report included on page 31 of the agenda packet. She indicated that the Board has a little over 6,000 licenses, certification holders and registrants. Board staff is currently reviewing applications within 48 hours and continues to positive survey results of 93.8% for the second quarter of 2025.

Ms. Lenart collaborated with Dr. Hathaway to develop questions for internship directors to help the Board assess whether an applicant's internship meets the Association of Psychology Postdoctoral and Internship Centers (APPIC) minimum standard. The form applies to those without an APA accredited degree or an accredited internship.

Staff will begin developing a handbook for the psychological practitioners, finalizing the development of instructions, applications and forms in preparation for the new license type. Additionally, following the Regulatory Committee meeting, staff updated the psychological practitioner information on the Board's website, providing potential applicants with detailed requirements regarding education, supervision, and testing.

Staff is working on updating FAQs and forms for the upcoming renewal season.

NEW BUSINESS:

School Psychology Update – Dr. Trump

Dr. Trump delivered a presentation offering an overview of the recruitment and retention challenges faced by school psychologists. She emphasized the educational requirements and the importance of school psychologists in the field. (Attachment E)

NEXT MEETING DATE:

Dr. Chapman thanked Dr. Trump for her presentation and the information regarding school psychologists.

ADJOURNMENT:

The next full Board meeting is scheduled for May 12, 2025.

Dr. Chapman adjourned the meeting at 1:54 p.m.

Signed by:

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5/19/2025

Aliya Chapman, Ph.D., Chair Chairperson

Date

DocuSigned by:

F858AFB08A9F4A4

5/20/2025

Jaime Hoyle, JD, Executive Director

Date

The EPPP Test-Prep Program Pilot



Sam Sands, Executive Director, Minnesota Board of Psychology
Samuel.Sands@state.mn.us

About the EPPP Test-Prep Program Pilot



The Board of Psychology will provide AATBS exam prep packages to approved applicants who have attempted but not yet passed the EPPP licensing exam in Minnesota

- Reviewed and approved by a committee of the Board
- Focused on applicants who:
 - Self-identify as people of color
 - Provide services to medically underserved areas
 - Provide services to medically underserved populations
 - Provide services in a language other than English

Let's do the Numbers

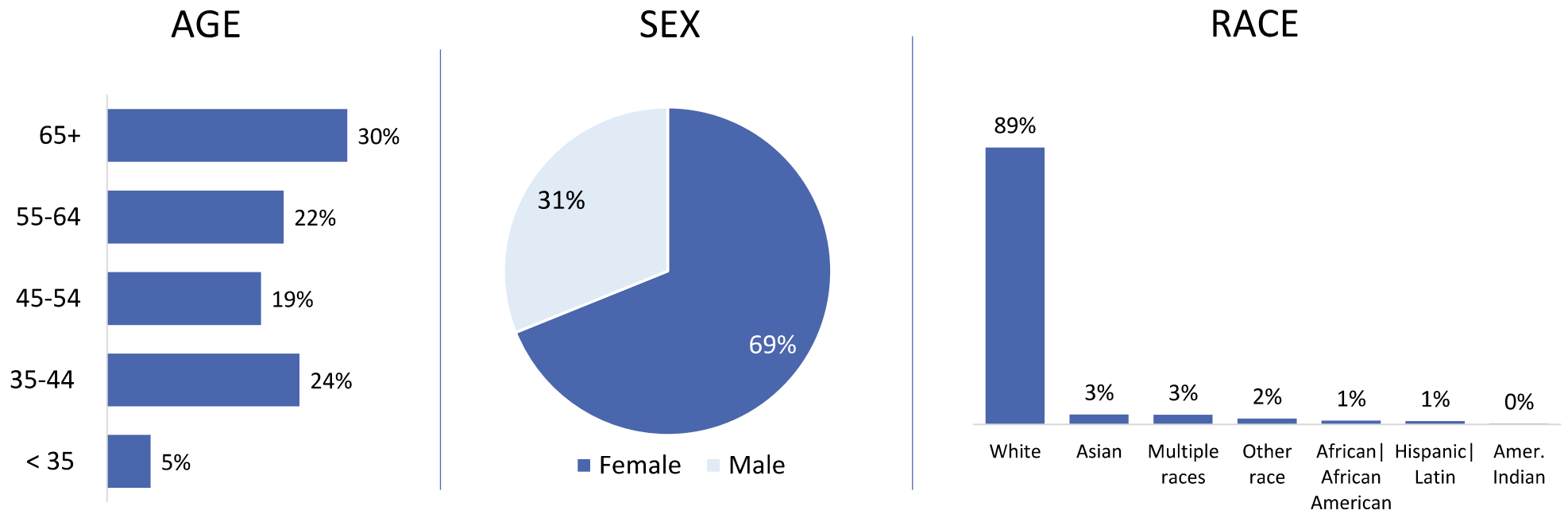
Licenses and Applicants

- The Board has 3,600 licensees
- Licenses approximately 145 individuals a year
- Approves about 160 people a year to sit for the examination
- First Time Pass Rate of the EPPP in Minnesota (past five years) - 79%
- National Time Passage Rate: 75%
- Retake Pass Rate – 37%
- Overall EPPP Pass Rate – 64%

Demographics of the Licensees/Applicants

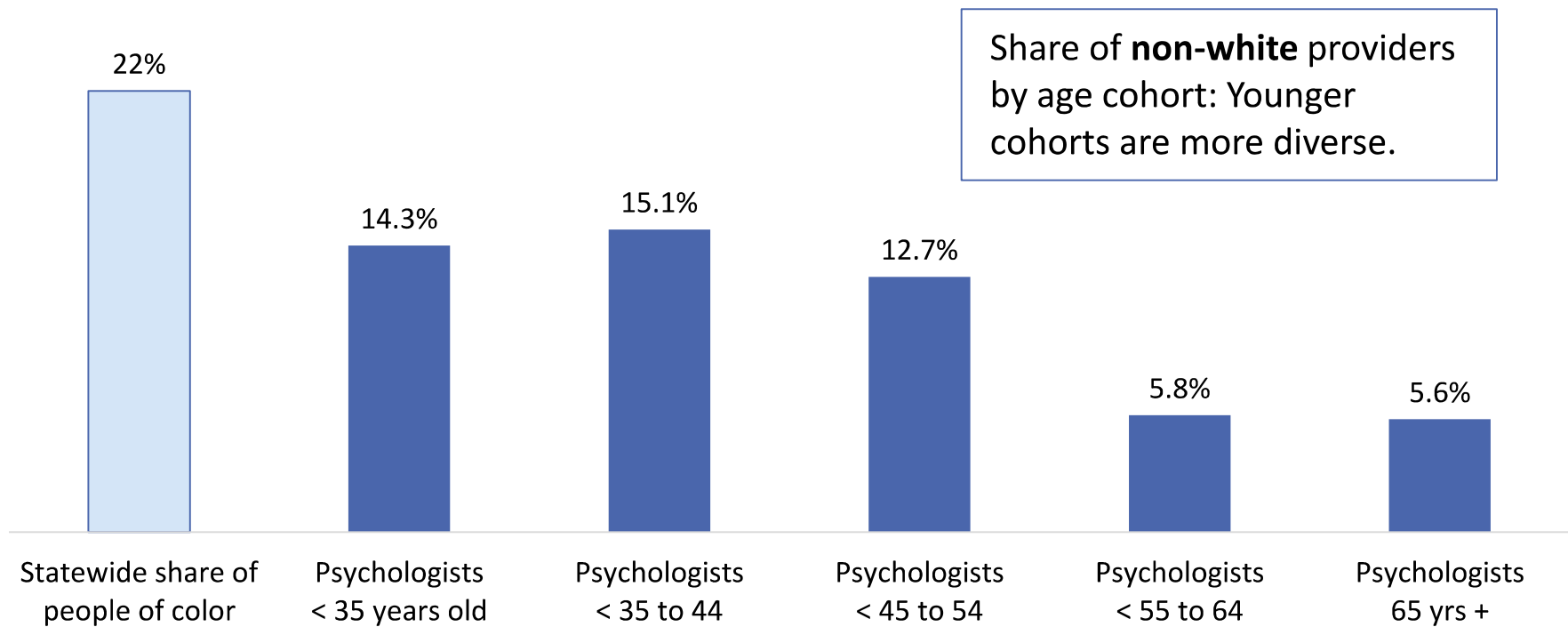
- The Minnesota Department of Health collects licensee demographics
- The Board collects applicant demographics since 2022
- Association of State and Provincial Psychology Boards collects demographics on test takers since 2018

Demographics of Psychology licensees



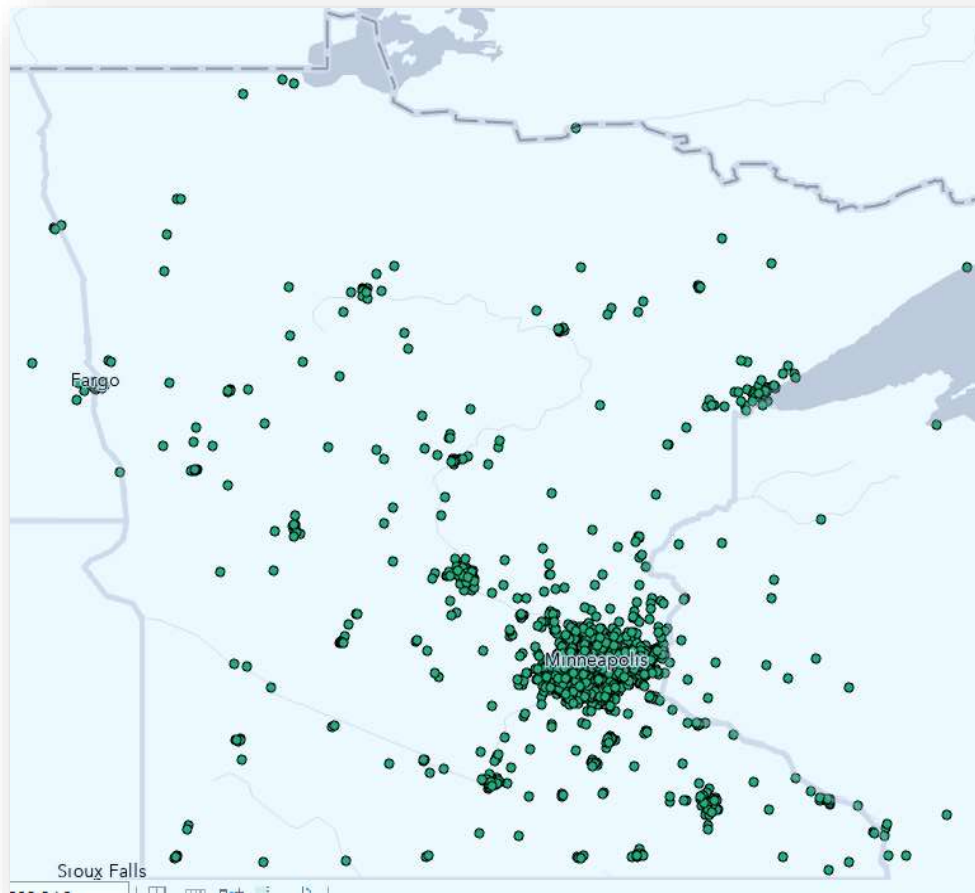
Data sources: Age and sex data are from the Board of Psychology, February, 2023. Race data are from the MDH Healthcare Workforce Survey (Psychologists only), administered from February 2022 through February 2023.

Changes in the racial diversity of the profession



Data source: MDH Healthcare Workforce Survey (Psychologists only), administered from February 2022 through February 2023.

Where MN psychologists practice (map view)



Data source: MDH analysis of the Minnesota Board of Psychology address records.

Selection Process

Applicant population for the pilot

- In the last five years, 45 people have taken the EPPP but have not yet passed in Minnesota
- Demonstrated commitment to providing services into Minnesota
- Already otherwise qualified/approved
- Contacted these individuals and offered them the opportunity to apply for the pilot
- Committee selected candidates based on 13 scored questions
- Told applicants which questions scored
- Worked through applications and scoring in a committee meeting



General Characteristics of the Program Cohort

62%

Qualified applicants who applied for the pilot program

72%

Qualified applicants who applied received test prep support

Of the 20 qualified applicants supported

- 15 identified as people of color
- 11 identified as an English Language Learner
- 4 meet some criteria as defined by the Americans with Disabilities Act
- 9 were McNair Scholars and/or Pell Grant recipients
- 12 female, 7 male, 1 chose not to report

General Characteristics of the Program Cohort (Continued)

333-495

Range of scores on the EPPP in the past attempts (500 to pass)

3.2

Average attempts at passing the examination (Range: 1-9)

Of the 20 qualified applicants supported

- 15 provide services in a Mental Health Provider shortage area
- 16 work primarily with medically underserved populations
- 5 can/do conduct therapy in a language other than English
- 5 have refugee or immigrant status
- 4 work in Greater Minnesota

Initial Results

- The Program has been a success so far:
 - 12 people have taken the exam
 - 6 people have passed
 - Average score increase of 60 points
 - Several more are in preparing to take the exam
- Program looks promising for continuation or expansion
- Other Minnesota Health Licensing Boards are looking to incorporate this program
- Other state psychology boards are also looking to adopt this program



Initial Results

- Challenges
 - Applicants still put off the exam
 - have anxiety about the exam
 - Keep pushing exam back
 - Life happens
 - Two have decided to leave the field
 - Board hoped to complete this phase in 2024, but it will be mid-2025

**EVEN WITH THESE CHALLENGES, IT'S AN
UNEQUIVICAL SUCCESS FOR THE BOARD!**



Thank you! + Contact information

Sam Sands, Executive Director
Samuel.Sands@state.mn.us



EPPP EXAM PREP PACKAGE



LIVE ONLINE

Our comprehensive EPPP Exam Prep Package gives you all the essential study materials needed to pass the EPPP, plus unlimited access to 32 hours of live online instruction and 8 coaching sessions. All of our EPPP packages include the AATBS Pass Guarantee, so your students can go into exam day feeling confident and prepared.

- 32 hours of live online exam strategy and content review
- 8 live online coaching sessions
- 9 months of access to TestMaster practice tests and questions
- 6 Comprehensive Study Volumes
- Assessment Exam
- 8 Full-length Practice Exams
- Final Exam
- Section Quizzes
- Domain Quizzes
- Audio Library
- Video Library
- 600+ Flashcards
- DSM-5-TR Self-Paced Video
- AATBS Pass Guarantee

Packages available with 6 or 9-month access.

GET IN TOUCH WITH US

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The Minnesota Board of Psychology recognizes the need to support and increase the number of licensed psychologists who belong to under-represented groups and/or provide psychological services to underserved populations – particularly those applicants who have taken but not yet passed the Examination for Professional Practice of Psychology (EPPP). The Board is giving select applicants the opportunity to attend a six- or nine-month AATBS EPPP Exam Prep live instruction course (see the attached flyer).

Please fill out the application below by November 13, 2023 to be considered at our next meeting. Decisions and notifications will be made on November 17, 2023. All the numbered questions below will be considered to determine who receives the exam-prep course. If you are not selected, your application will remain active and be automatically rolled forward for consideration in future cycles (so there is no need to reapply).

Your name: [Click or tap here to enter text.](#)

Your email: [Click or tap here to enter text.](#)

Application number with the Board (only applicants qualify): [Click or tap here to enter text.](#)

Name of the doctoral program where you earned your degree: [Click or tap here to enter text.](#)

Please enter the city and state of your doctoral institution: [Click or tap here to enter text.](#)

In what year did you earn your doctoral degree? [Click or tap here to enter text.](#)

Do you plan to take or re-take the EPPP in 2024? (Currently the committee is looking for applicants taking the EPPP in 2024.) Yes No

1. Have you taken the EPPP before? Yes No

If you have taken the EPPP before, how many times have you taken it? (If you don't remember, Board staff will input the number of attempts the Board has approved.) [Click or tap here to enter text.](#)

If you have taken the EPPP before, what is the highest score you received? (If you don't remember, Board staff will input the highest score on file.) [Click or tap here to enter text.](#)

2. Your race (select all that apply):

American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian or Other Pacific Islander

White

Choose not to report



3. Do you identify as Hispanic or Latino/a/x?
- Yes
- No
- Choose not to report
4. Were you a first-generation college student (i.e., your parent(s) did not complete a four-year college or university degree)?
- Yes, I was a first-generation college student
- No
5. Are you from an economically disadvantaged background as indicated by any of the following (check all that apply):
- Current or past Pell grant recipient.
- Current or past McNair Scholar.
- Family of origin received public assistance (e.g., food stamps, housing assistance, heating assistance, etc.).
- Qualified for reduced or free lunch programs during childhood (regardless of whether such programs were used).
- Experienced foster care placement as a child.
- Experienced homelessness.
- Experienced migrant status or are a refugee or immigrant.
- Family of origin was/is a low-income family/household (i.e., income no more than 200% of poverty level as defined by the Federal register:
<https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines/prior-hhs-poverty-guidelines-federal-register-references>).
- Other indicator of economically disadvantaged background: [Click or tap here to enter text.](#)
6. Are you an English Language Learner (i.e., is your primary or first language something other than English)? Yes No
7. Can you provide psychological services in a language other than English? Yes No
8. Do you provide psychological services to a medically underserved population? (Federal definition: <https://bhw.hrsa.gov/workforce-shortage-areas/shortage-designation#mups>)
- Yes
- No



9. Do you provide psychological services in an area that is considered a Mental Health Provider Shortage Area? (Use [the https://data.hrsa.gov/tools/shortage-area/by-address](https://data.hrsa.gov/tools/shortage-area/by-address) to determine. Input the address where you provide psychological services and see if it flags as a Mental Health HPSA).

Yes

No

Other: describe the primary population(s) you serve. [Click or tap here to enter text.](#)

10. What is your primary discipline?

Clinical Psychology

Counseling Psychology

School Psychology

11. Do you have or have you had a qualified disability under the Americans with Disabilities Act? Yes No

12. What is your gender identity?

Male

Female

Transgender

Nonbinary

Another Gender

Choose not to report

13. Other information: The Board is seeking to support and increase the number of providers coming from and/or serving under-represented groups. If we missed asking something on this form, please include what we missed here and how you would answer that question.

[Click or tap here to enter text.](#)

Thank you! We review all applications that are submitted. After the Nov. 17th determination, applications will be reviewed on a rolling basis until funds are depleted. **Please contact the Board's Executive Director, Sam Sands, with questions and be sure to add Samuel.Sands@state.mn.us as a "safe sender" in your email to ensure our messages reach you.**

Boost! Making Mental Health Happen

Board of Psychology
February 24, 2025



About the Virginia Health Care Foundation

ATTACHMENT: B

VHCF is a statewide public/private partnership initiated 33 years ago by the Virginia General Assembly and its Joint Commission on Health Care.

VHCF's **mission** is to increase access to primary health care, including behavioral health services, for uninsured and medically underserved Virginians.

One critical component of access is a sufficient health workforce with adequate distribution throughout the state.



Significant Shortages in All BH Professions

ATTACHMENT: B

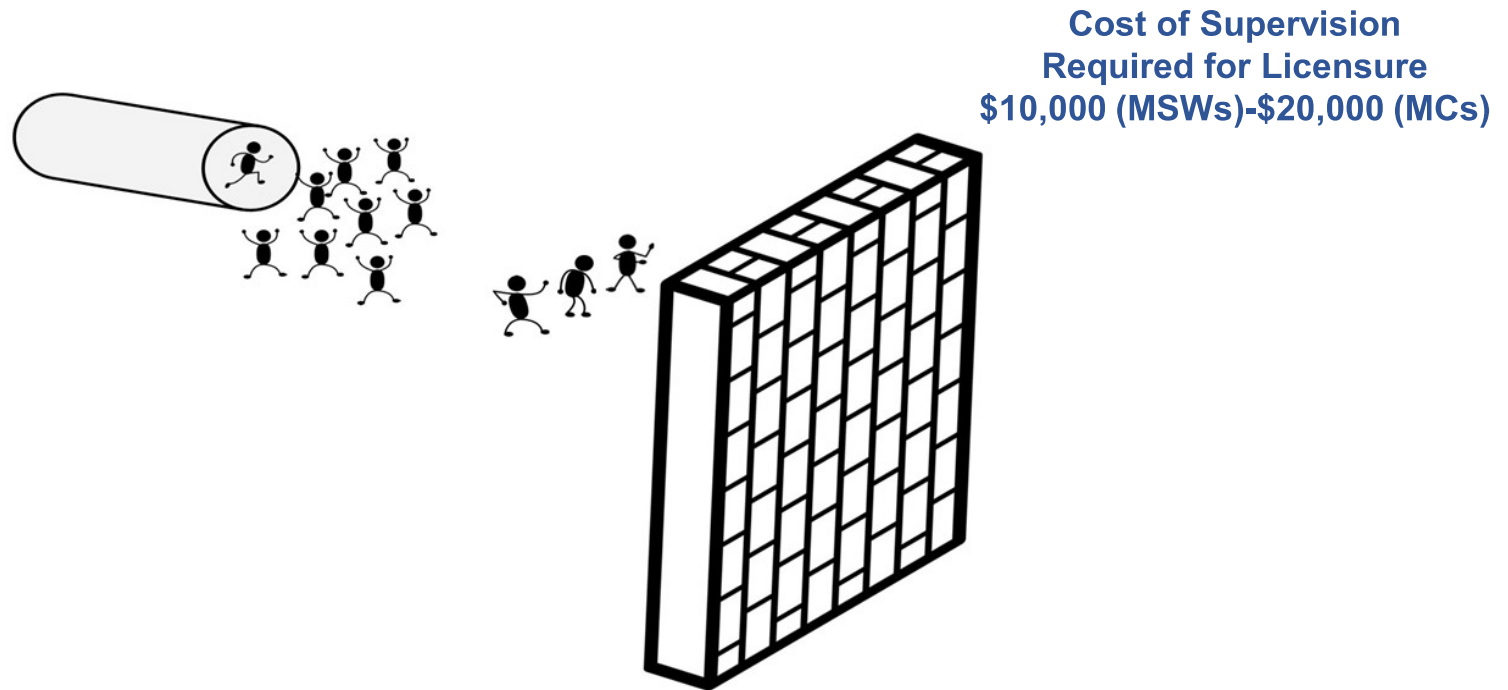
Key Findings

1. Aging Workforce
2. Insufficient Diversity
3. Inadequate Pipeline
4. Cost of Supervision to become a Licensed Therapist

VHCF Assessment of the Capacity of Virginia's Licensed Behavioral Health Workforce



Barrier to Licensure of Counselors and Social Workers



Boost!

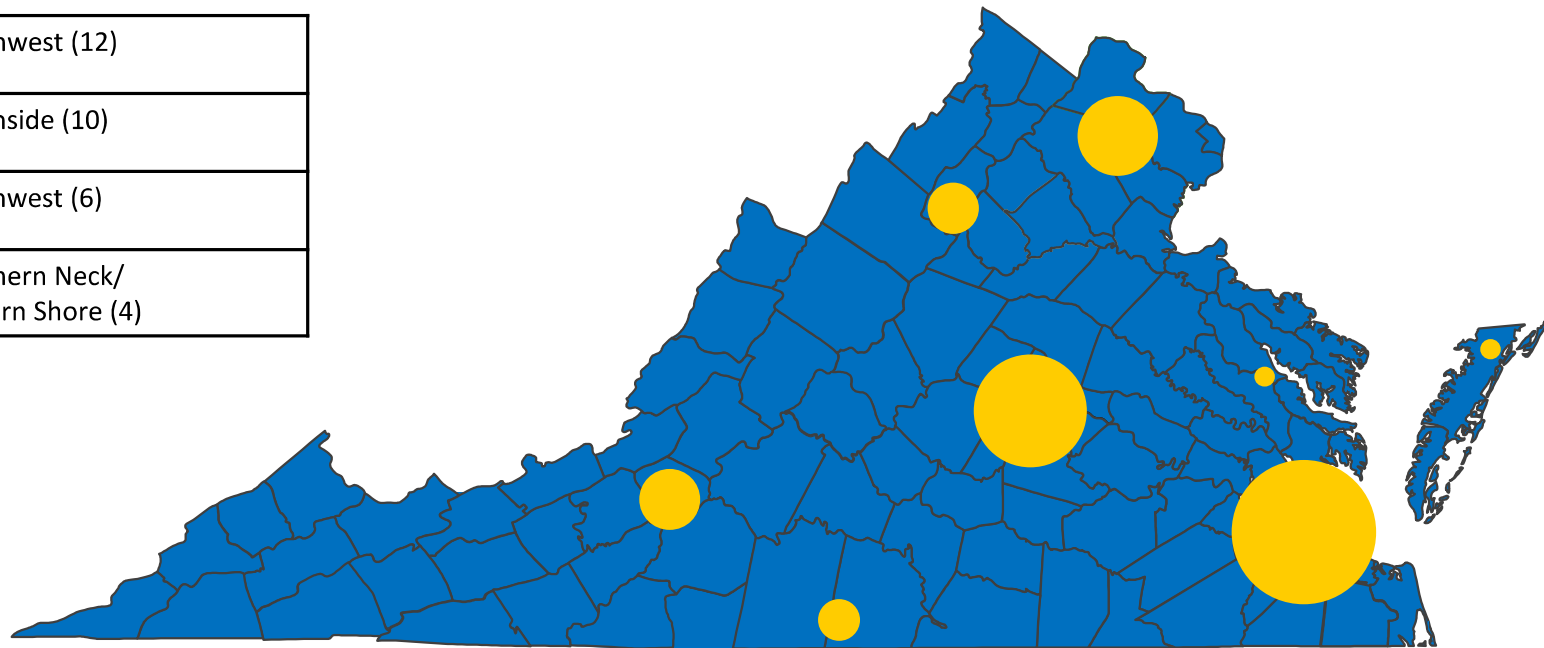
ATTACHMENT: B

- **Pays for supervision required for licensure** of MCs, MSWs and provides licensure exam prep.
- In return, *Boost!* enrollees commit to practice in Virginia for 2 years, once licensed.
- Prioritizes therapists who are persons of color, fluently bilingual, or practice in a mental health professional shortage area.
- Launched in September 2022 and **103 are already licensed** with more coming soon!



336 Enrollees by Region

Hampton Roads (133)	Northwest (12)
Central (106)	Southside (10)
Northern (44)	Southwest (6)
Roanoke Valley (21)	Northern Neck/ Eastern Shore (4)



Profile of *Boost!* Enrollees

- **71% are people of color; 11% are bilingual**
- **50% are first-generation graduates (*parents did not complete a 4-year college program*)**
- **35 years old (*average*)**
- **Majority female (86%)**
- **Average salary of \$52,700**
- **86% carry student loan debt with an average debt load of \$111,000**
- **100% paid out of pocket or would have had to for their supervision prior to *Boost!***



Licensure is the Goal

ATTACHMENT: B

Licensure requirements

	Counselors	Social Workers
Clinical hours	3400	3000
Supervision hours	200	100
Passing Exam	✓	✓

Different rules apply to the timing of licensure exams for counselors and social workers.

- **Counselors** can take the licensure exam at any point after they graduate with their Masters of Counseling degree, including during their residency.
- **Social workers** are only allowed to take their exam after their required supervision and clinical hours have been completed.



Counselors

- To date, 108 *Boost!* counselors have passed the National Clinical Mental Health Counseling Examination or the National Counselor Examination.
- Counselors are strongly encouraged to take the licensure exam while *Boost!* is paying for their supervision, if they have not passed it already.
- This will enable these counselors to become licensed immediately after completing their supervision hours.
- Licensure exam prep resources are offered to those who have not already passed exam. (*Many thanks to United Healthcare*)



Social Workers

- *Boost!* social workers have expressed anxiety over testing
- Glaring disparities in licensure exam pass rates among racial groups (*ASWB 2022 report*). The greatest was between white test takers (84% pass rate) and black test takers (45%).
- 41% of *Boost!* Social Work Enrollees are first generation graduates and 72% are black
- These factors led VHCF to focus its TA efforts on helping *Boost!* enrollees prepare for their exams. Researched test prep services and their success rates.



Lessons Learned

- All *Boost!* enrollees have needed help with understanding the pathway to licensure
- Licensure exam prep should be given to all *Boost!* enrollees
- Obtaining applications from rural areas requires targeted marketing
- Some enrollees experience life changes that impact their participation
- Program is not a fit for everyone---requires a steady pace to finish in a timely manner



Feedback from *Boost!* Counselor Enrollees

ATTACHMENT B

- “*Boost* has supported me throughout my entire journey to licensure and even provided an amazing licensure exam prep course that assisted me in passing my exam.” -**A. Goss, LPC**
- “My supervision costs are the amount of a car payment! I had to choose which I would pay each month. I am thankful that *Boost* can help with this financial burden!” - **K. Grace, LPC**
- “*Boost 200* eliminated my need to work two jobs, which enabled me to fully invest in my professional growth and personal well-being.” -**B. Thompson, LCSW**
- “This program is a Godsend...without it, I would not have been able to complete my supervision.” - **M. Johnson, LCSW**

Future Focus for *Boost!*

ATTACHMENT: B

- Seek funding for more *Boost!* slots in the FY26 state budget and from private funders
- Collaborate with key partners to promote *Boost!* to potential applicants from rural areas
- Educate all licensed *Boost!* therapists on Virginia's Behavioral Health Loan Repayment Program
- Continue to track, monitor and support the timely progress of *Boost!* enrollees' clinical and supervision hours
- Track *Boost!* graduates to ensure they meet their 2-year service commitment



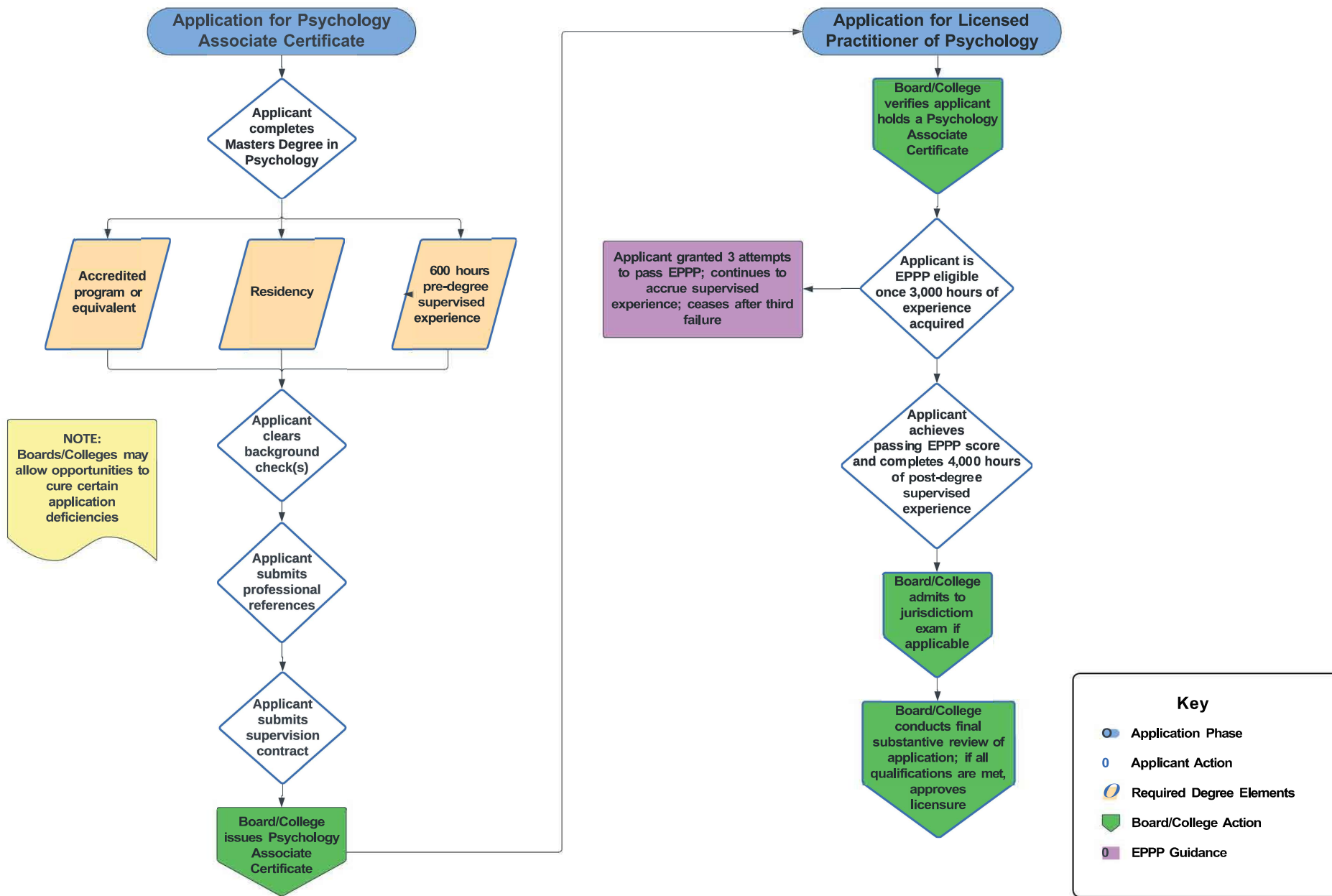
Questions?

ATTACHMENT: B

Trinette Randolph
Boost! Program Manager
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804.773.8037



Association of State and Provincial Psychology Boards Masters-Level Licensed Practitioner of Psychology Process





Supporting member jurisdictions in fulfilling their responsibility of public protection

The purposes of the Potential Regulatory Implications of Licensing Masters trained individuals Task Force (PRI-LM) include:

- Surveying the regulatory community specific to licensing of individuals with master's-level education and training in psychology; and
- Using the information gathered to develop, define, and propose to the Association of State and Provincial Psychology Boards (ASPPB) Board of Directors an appropriate title and scope of practice for people with master's training in psychology.

Informed by both the data and information collected from the regulatory community, and with consideration of the work of the Master's Accreditation Work Group of the American Psychological Association (APA), the members of PRI-LM prepared draft proposed statute and regulation/rule language. That draft was shared with an extensive list of stakeholders in order to gather public comments and feedback. This yielded 179 comments from various individuals and organized groups. The PRI-LM Task Force reviewed and discussed the comments and feedback received which compelled the group to make several modifications to the draft that are summarized in the bulleted statements below.

During this time, the ASPPB Board of Directors made the decision to move forward with the EPPP as one examination that comprises both knowledge and skills. As a result, the Task Force updated the examination requirements to be consistent with current ASPPB policy.

Once the language is ultimately finalized by ASPPB for consideration and possible implementation by U.S. and Canadian regulatory boards and colleges, it will reflect a competency-based model recognizing that competencies may evolve with changes to the science and body of evidence comprising the practice of health service psychology. Intentionally, the model regulatory language does not address school psychology practice at the master's level as that scope of practice is established by the National Association of School Psychologists.

The PRI-LM Task Force hopes this document will constitute a model for licensing those with master's degrees in health service psychology and will provide a set of regulations that Boards/Colleges will find useful. We hope this will assist psychology regulatory bodies should they choose to license at the master's level and will also help with mobility and portability of licensure for those jurisdictions that license master's-level practitioners of psychology

- Eliminated the tracks
 - All Master's level trainees in health service psychology will be exposed to both assessment and intervention
 - Increased required supervised experience hours from 3,000 to 4,000
- Modified the title
 - Provisional licensure removed
 - Provisionally Licensed Practitioner is now Psychology Associate
 - Licensed Psychology Practitioner is now Licensed Practitioner of Psychology
- Addressed DEI with language regarding equitable treatment of trainees

- Consistent with ASPPB policy, the EPPP will be one exam that is competency based, includes both knowledge and skills, and uses the recommended passing score for master's level practice. The EPPP will be taken upon completion of education, training, and supervised experience.
- Clarified scope and boundaries of practice
- Addressed grandparenting/legacy considerations by incorporating language for jurisdictions to consider
- Clarified exemptions to licensure (e.g. school psychologists, technical support staff)
- Addressed regulators' concerns with respect to the burdens associated with evaluating requirements and qualifications for licensure
 - Clarified education and training requirements
 - Clarified supervision requirements
 - Created sample forms for boards/colleges
- Increased number of days from 14 to 30 to cease practice after third failure to pass the EPPP to better ensure continuity of care.

- Clarified in more detail the scope of practice for Testing and Assessment



Supporting member jurisdictions in fulfilling their responsibility of public protection

Part Two

Model Statutory Language

I. Definitions

- A. Psychology Associate: An individual who is authorized to practice psychology under the supervision of a Licensed Psychologist while attaining further requirements for licensure, as described further in the rules of this Board/College.
- B. Licensed Practitioner of Psychology: An individual licensed under this Act and thereby authorized to independently practice psychology at the master's level of education.

II. Practice of Psychology at the Master's Level

- A. Intervention:
 - 1. The following provisions regarding scope of practice apply to intervention activities performed by those individuals authorized to practice with a master's degree, regardless of application or licensure status, and regardless of the requirement of supervision.
 - 2. Intervention includes observation, description, diagnosis, interpretation, prediction, and modification of human behavior by the application of psychological principles, methods, and procedures, for the purposes of:
 - a. preventing, eliminating, or predicting symptomatic, maladaptive, or undesired behaviors
 - b. facilitating the enhancement of individuals or groups of individuals including personal effectiveness, adaptive behavior, interpersonal relationships, and work and life adjustment.
 - 3. Scope of Practice for Intervention:
 - a. An initial assessment intake shall be conducted on individuals, couples, families, or individual members of a group for treatment planning. It includes assessments for clients of the psychology practitioner or for a group practice or organization to which the psychology practitioner belongs. Referrals for

assessments for other purposes, or under other referral circumstances, are included in Testing and Assessment.

- b. An initial assessment intake includes interviewing and screening methods for the purpose of case formulation, diagnosis, and treatment planning. An initial assessment intake does not include personality measures, neuropsychological assessment, or forensic assessment measures.
- c. Continuing assessment for treatment planning includes the use of screening measures for patient status within the scope of a continuing therapeutic relationship.

B. Testing and Assessment:

1. The following provisions regarding scope of practice apply to all Testing and Assessment activities performed by those individuals authorized to practice with a master's degree, regardless of application or licensure status, and regardless of the requirement of supervision.
2. Scope of practice in Testing and Assessment includes and is limited to those practices which inform:
 - a. mental health treatment planning for treatment planning for patients/clients of other mental health professionals.
 - b. educational planning and placement.
3. Scope of practice is both determined by, and limited by, three types of considerations:
 - a. The purpose of the referral or request for assessment.
 - b. The source of the referral.
 - c. The types of measures that may be utilized to respond to the referral.
4. Scope of practice does not include indirectly related purposes, such as determining liability and extent of damages in litigation, appropriateness of medical and surgical interventions, or determining fitness for duty. These types of assessments do not directly serve the purposes of treatment planning or occupational planning and placement.
5. The scope of practice includes assessments of individuals only, and does not include evaluations of families, groups, or organizations.
6. Nothing in this Act is intended to undermine or contradict standards of practice which have been established for specialty or sub-specialty areas of practice. For example:
 - a. individuals authorized to practice psychology with a master's degree shall not identify themselves as neuropsychologists, accept referrals for neuropsychological evaluations, or perform neuropsychological evaluations.

- b. Individuals authorized to practice psychology with a master’s degree in psychology shall not identify themselves as forensic psychologists, accept referrals for forensic evaluations, or perform forensic evaluations. Psychological specialties are defined at the doctoral degree.
 - c. Individuals authorized to practice psychology with a master’s degree in psychology shall not identify themselves as specialists in other specialty areas of psychology which are defined at the doctoral level.
7. Nothing in this Act is meant to preclude individuals authorized to practice psychology with a master’s degree from utilizing screening instruments, questionnaires, rating scales, or interview guides, which are generally available to all mental health professionals. Examples include brief screening instruments of orientation and current mental status, repeated measures of symptoms related to depression and anxiety, and general measures of aptitude and interest.
8. Regardless of the nature or source of a referral for psychological testing or assessment, individuals authorized to practice psychology with a master’s degree shall not engage in the interpretation of personality assessment or projective measures. This Act does not preclude the administration or scoring of such measures, where the psychology practitioner serves on a team of, or under the supervision of, a licensed professional who is authorized to interpret such measures.

III. Supervised Experience:

- A. Pre-degree supervised experience: As further described and limited by the rules of the Board/College, pre-degree supervised experience includes a minimum of 600 hours of supervised psychology practice which occurs while an individual is enrolled in a graduate course of study in a master’s degree psychology program.
- B. Post-degree supervised experience: As further described and limited by the rules of the Board/College, post-degree supervised experience consists of a minimum of 4,000 hours of supervised psychology practice pursuant to a supervision contract approved by the Board/College. Post-degree supervised experience must include an integrated course of didactic education.

IV. Examinations:

- A. The Examination for Professional Practice in Psychology (EPPP)
- B. Other examinations as determined by the Board or College

V. Requirements for Licensure:

- A. Application for Psychology Associate Certificate:

1. Education: An Initial Application must demonstrate that the applicant has received a master’s degree from a psychology training program.

- a. The Board/College shall adopt rules implementing and defining these provisions, including, but not limited to, such factors as residence in the program, internship and related field experiences, number of

course credits, course content, numbers and qualifications of faculty, and program identification and identity.

- b. Internationally Trained Graduates: Applicants trained in institutions outside the United States or Canada must show satisfactory evidence of training and degrees substantially equivalent to those required of applicants trained within the United States and/or Canada, pursuant to the rules of the Board/College.

2. Verification of pre-degree supervised experience
3. Professional references
4. Disciplinary and background checks and other requirements by Board/College
5. Post-degree supervised experience contract

B. Application for Licensed Psychology Practitioner

1. When an applicant has met the requirements in Paragraph A above and has accrued 3,000 of the total 4,000 hours of required post-degree supervised experience, the applicant may apply to the Board or College for admission to take the Examination for Professional Practice in Psychology (EPPP).
2. An applicant for Licensed Practitioner of Psychology must receive a passing score* on the EPPP within three attempts. The Board/College shall promulgate rules for the timing of admission to the examination.
 - a. If an applicant for Licensed Practitioner of Psychology does not receive a passing score on the initial attempt of the EPPP, the applicant must submit a supervisor's report of the applicant's status and progress during post-degree supervised experience.
 - b. When a Psychology Associate continues to accrue post-degree supervision hours while attempting to obtain a passing score on the EPPP, upon accrual of 4,000 hours, the applicant shall submit a new supervision contract to the Board/College for the accrual of further post-degree supervision hours.
 - c. The Board/College shall promulgate rules describing the requirements for items a. and b., above.
3. After three attempts at the EPPP without a passing score, or after four years since the initiation of post-degree supervised experience, whichever occurs first, a Psychology Associate must cease practice.

VI. Cessation of the Practice of Psychology

A. After three attempts at the EPPP without a passing score*, or after four years since the initiation of post-degree supervised experience, whichever occurs first, a Psychology Associate must cease practice within 30 days of the official receipt of the last EPPP score, consistent with further requirements set forth in the rules of the Board/College.

B. An applicant who was required to cease the practice of psychology may reapply for licensure after 12 months since the date the applicant was required to cease practice. All rules and regulations in effect at the time of re-application will apply to the reapplication process. An applicant who has been required to cease practice may not practice psychology, including under supervision, until authorized by the Board/College after reapplication. Cessation of practice under these terms does not constitute a disciplinary action.

VII. Representation

A. Psychology Associate: A person represents themselves to be a Psychology Associate if that person uses the title Psychology Associate in a description of services offered or provided, or in any description of services incorporating the practice of psychology. An individual practicing psychology as a Psychology Associate shall not use the term “independent” nor imply the status of independence regarding the offer or provision of psychological services.

B. Licensed Practitioner of Psychology: A person represents themselves to be a Licensed Practitioner of Psychology if that person uses the title Licensed Practitioner of Psychology in a description of services offered or provided, or in any description of services incorporating the practice of psychology. No person other than those authorized under this Act shall represent themselves to be a Licensed Practitioner of Psychology.

VIII. Exemptions

A. Other licensed professionals: Nothing in this Act shall be construed to prevent members of other recognized professions that are licensed, certified, or regulated under the laws of the jurisdiction from rendering services consistent with their professional training and code of ethics, if they do not represent themselves to be psychology associates, licensed practitioners of psychology, psychologists, or describe their services as including the practice of psychology.

B. Clergy: Nothing in this Act shall be construed to prevent duly recognized members of the clergy from functioning in their ministerial capacities, provided that they do not represent themselves to be psychology associates, licensed practitioners of psychology, psychologists, or describe their services as including the practice of psychology.

C. School Psychologists:

1. School psychologists who are appropriately credentialed by state/provincial education agencies or an appropriate regulatory body (“state/provincial education regulatory body”) shall be able to provide the range of school psychological services under the title described by the credentialing/regulatory body and within the practice settings authorized by the state/provincial education regulatory body. Such individuals may use the title “School Psychologist” or another title including the term “psychology” or “psychological,” but shall not use the titles “Psychology Associate,” “Licensed Practitioner of Psychology,” “Licensed Psychologist,” or any other equivalent term.
2. Nothing in this Act shall be construed to permit the practice of psychology outside the scope of practice or outside the settings described by the state/provincial education regulatory body by any individual who is not licensed under the provisions of this Act.
3. Nothing in this Act shall be construed to permit individuals who are not credentialed by the state education regulatory body to practice psychology within the scope of practice or within the settings described by the state/provincial education regulatory body.

4. It shall remain within the discretion of the state/provincial education regulatory body to establish requirements for credentialing by such body. For example, the education regulatory body's inclusion of independent contractors, whether local or interjurisdictionally, shall determine whether those individuals are exempt from licensure under this Act, to practice psychology within the scope of practice and within the settings described by the state/provincial education regulatory body.
5. Nothing in this Act shall be construed to affect the requirements or acceptability of psychological assessments for those uses described by the state/provincial education regulatory body within the settings described by the state education regulatory body. Nor shall this Act be construed to affect students' rights to independent evaluations described in state or federal regulations as specifically applicable to uses within public education settings.

D. Graduate Students and Interns: Nothing in this Act shall be construed to prevent persons from engaging in activities defined as the practice of psychology, provided that they are supervised in accordance with the rules and regulations of this Board/College. Such persons shall not represent themselves by the titles "Licensed Practitioner of Psychology" or "Psychologist." Individuals training to be psychologists or psychology practitioners may use the terms "psychological trainee," "psychological intern," "psychological resident," or other term denoting their training status, provided that such persons perform their activities under the supervision and responsibility of a licensed psychologist in accordance with the rules and regulations of this Board/College. This section applies to the following graduate students and interns:

1. A matriculated graduate student whose activities constitute a part of the course of study for a graduate degree in psychology at an institution of higher education.
2. An unlicensed individual pursuing postdoctoral training or experience in professional psychology, to fulfill the requirements for licensure under the provisions of this Act.
3. Individuals who hold a Psychology Associate certificate or a Licensed Practitioner of Psychology credential can use that title while working under the supervision of a licensed psychologist in areas of practice outside the scope of their credentials.

E. Business Consultants and Human Resource Professionals: This Act is for the regulation of the practice of psychology only and does not prevent human resource professionals, business consultants, and other such persons from providing advice and counseling in their organizations or affiliated groups, or to their companies or employees of their companies, or from engaging in activities performed in the course of their employment.

F. Master's-Level Practitioners in Psychology who are already licensed to practice psychology: Jurisdictions will need to address potential exemptions and/or other provisions for master's-level practitioners in psychology who are already licensed in their jurisdiction (i.e., grandparenting).

G. Nothing in this Act prevents a licensed Psychologist or a Licensed Practitioner of Psychology from employing unlicensed individuals, who are appropriately trained and qualified, to perform the following services under the supervision of the licensee:

1. transcribing psychological reports
2. inputting and/or transferring patient or client test responses or scores
3. administering and scoring standardized objective tests where the supervisor is immediately available

* The recommended passing score for the EPPP was determined by a sample of psychology practitioners working both independently and under supervision. The recommended passing score for Licensed Practitioner of Psychology is currently the passing score for supervised practice.

Board of Psychology
Legislative Report
February 24, 2025

SB 752 - Bd. of Psychology, et al., to study education, training, etc.
Chief Patron: Favola

SUMMARY AS PASSED SENATE:

Board of Psychology; prescriptive authority for clinical psychologists work group; report. Directs the Boards of Psychology and Medicine to jointly convene a work group with stakeholders to study the education, training, and qualifications of clinical psychologists licensed in the Commonwealth, and assess under what conditions it may be appropriate for clinical psychologists to be granted prescriptive authority. The bill requires the work group to report its findings to the Chairs of the House Committee on Health and Human Services and the Senate Committee on Education and Health by November 1, 2025.

Passed House: Y Passed Senate: Y

SB 786 - Nationally Certified School Psychologist Program; established.
Chief Patron: Mulchi

SUMMARY AS INTRODUCED:

Nationally Certified School Psychologist Program established; incorporation into National Teacher Certification Incentive Reward Program and Fund. Establishes the Nationally Certified School Psychologist Program and incorporates such program into the existing National Teacher Certification Incentive Reward Program, collectively referred to as the Programs. The bill also renames the National Teacher Certification Incentive Reward Program Fund as the National Teacher Certification Incentive Reward Program and Nationally Certified School Psychologist Program Fund (the Fund) and expands the purpose for which disbursements may be made from the Fund to include the award of incentive grants to school psychologists obtaining national certification from the National Association of School Psychologists consisting of an initial state-funded award of \$5,000 and a subsequent award of \$2,500 each year for the life of the certificate.

Failed: Y

01/28/2025 Senate: Reported from Education and Health and rereferred to Finance and Appropriations (15-Y 0-N)

02/05/2025 Senate: Left in Finance and Appropriations

HB 1861 - Department of Health Professions; health regulatory boards; regulations; licensure by endorsement.

Chief Patron: Price

Agency Bill

Companion: SB1438 (Durant) – also passed both chambers.

SUMMARY AS INTRODUCED:

Department of Health Professions; health regulatory boards; regulations; licensure by endorsement. Directs each health regulatory board regulated by the Department of Health Professions to enact regulations to provide a licensure by endorsement pathway for qualified applicants as practitioners of the particular profession or professions regulated by such board. The bill specifies that the Board of Medicine shall be the first health regulatory board to enact regulations to provide a licensure by endorsement pathway.

Passed House: Y Passed Senate: Y

SB 826 - Predetermination for licensing eligibility; prior convictions.

Chief Patron: Locke

SUMMARY AS PASSED SENATE:

Department of Professional and Occupational Regulation; Department of Health Professions; predetermination for licensing eligibility; prior convictions. Prohibits the use of vague or arbitrary terms by a regulatory board within the Department of Professional and Occupational Regulation or Department of Health when refusing a person a license, certificate, or registration to practice, pursue, or engage in any regulated occupation or profession. The bill requires such regulatory board denying a registration, license, or certificate based on information in the applicant's criminal history record to notify the applicant in writing of (i) the specific offense or offenses that contributed to such denial; (ii) how the criminal history directly relates to the occupation for which the registration, license, or certificate applies; and (iii) how the regulatory board weighed rehabilitation factors when making its decision.

The bill further allows an applicant to request a written predetermination from a regulatory board within the Department of Professional and Occupational Regulation concerning whether his criminal record would disqualify him from obtaining a license, certificate, registration, or other authority to engage in a particular occupation, trade, or profession in the Commonwealth.

Passed House: Y Passed Senate: Y

SB 1363 - Health Professions, Board of; transfer of powers and duties.
Chief Patron: Pillion

Agency Bill

SUMMARY AS INTRODUCED:

Elimination of Board of Health Professions; transfer of powers and duties. Eliminates the Board of Health Professions and transfers certain powers and duties from the Board to the Department of Health Professions.

Passed House: Y Passed Senate: Y

2025 SESSION

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ENROLLED
SB752ER

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VIRGINIA ACTS OF ASSEMBLY — CHAPTER

An Act to direct the Boards of Psychology and Medicine to jointly convene a work group to study the education, training, and qualifications of clinical psychologists licensed in the Commonwealth and assess under what conditions it may be appropriate for clinical psychologists to be granted prescriptive authority.

[S 752]

Approved

Be it enacted by the General Assembly of Virginia:

1. § 1. That the Boards of Psychology and Medicine shall jointly convene a work group to include two representatives of the Board of Psychology who are licensed clinical psychologists, two representatives of the Board of Medicine who are physicians, one representative of the Board of Pharmacy, two licensed clinical psychologists who are faculty at accredited institutions of higher education in the Commonwealth, two representatives from departments of psychiatry at schools of medicine located in the Commonwealth, a representative of the Virginia Academy of Clinical Psychologists, a representative of the Psychiatric Society of Virginia, and other stakeholders as deemed necessary to study the education, training, and qualifications of clinical psychologists licensed in the Commonwealth, including the level of education and training clinical psychologists receive in the area of pharmacology, and assess under what conditions it may be appropriate for clinical psychologists to be granted prescriptive authority. The work group shall report its findings to the Chairs of the House Committee on Health and Human Services and the Senate Committee on Education and Health by November 1, 2025.

Psychological Services in Public Schools Feb 2025

*(Presentation to the VA
Board of Psychology)*



VASP Critical Shortage Committee Purpose

- *To improve mental health services for children and their families through advocacy and support to local school divisions for the recruitment and retention of school psychologists*
- *To assist with the development of appropriate re-specialization programs geared to working professionals interested in becoming school psychologists*

Reasons for Shortage

- *Salaries, working conditions and a variety of work duties are more attractive in private settings. Many public schools are in poor condition and renovations and new schools may not have included offices for school psychologist*
- *Training programs alone cannot meet the demand*
- *School based jobs require too much time conducting assessment for special education eligibility to the exclusion of other needed mental health services*
- *School division recruitment efforts do not meet enough eligible candidates*

Regulations

Assessment and Eligibility Timelines
(federal and state)

Licensure requirements:

OSERS/VDOE

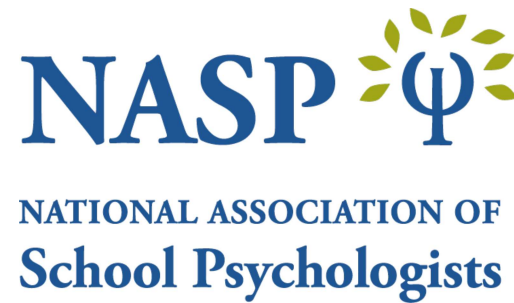
Board of Psychology

American Psychological Assoc

National Association of Sch Psych

Local job duty requirements

Ethics



Recruitment Recommendations

Advocate for increased staffing levels and include that need in your budget requests

Advertise across multiple sources and out of state

Offer mentoring from an experienced school psychologist first year

Recruitment Recommendations, cont.

Offer school based practicum and internship opportunities to the training programs

Gather job position documents from other school divisions in your area and compare/revise yours

Share a position with a neighboring school division

Retention Recommendations

Support VASP, VDOE and other appropriate professional development opportunities

*Pay for staff membership in VASP and NASP
(NASP=\$100 per year, VASP=\$70 yearly)*

*Support national certification
\$125 members (3 years), \$110 renewal fee*

Retention Recommendations, cont.

Ensure good working conditions for testing

Apply for a Mental Health Grant

Reduce travel time between schools

Reimburse work related travel

Retention Recommendations, cont.

If you have a large staff, allow psychologists to specialize (Autism, Interventions, etc.)

Ensure adequate budget for new tests with up-to date norms and on-line scoring

Provide supervision from an experience School Psychologist

Retention Recommendations, cont.

Conduct exit interviews and use that info for change and revising recruitment efforts

Provide other incentives:

- financial support for moving costs*
- subscriptions to Best Practices in School Psych and other resources*
- financial support for national certification*

Retention Recommendations, cont.

Expand school based duties to include a few areas of training and expertise beyond assessment (counseling, workshops on interpreting standardized testing info, classroom consultation)

Develop meaningful relationships with school psych staff and call on them to gather data for you, provide input about decisions impacting them and other discussions about how things are going

Establish a written agreement for a certain number of years of service if you are supporting university coursework

Re-specialization available through On-line Training Programs

Eastern Washington University
Accredited by NASP

Capella University

- *PhD in Behavioral Analysis*
- *EdS in School Psychology*
- *PsyD in School Psychology*

*The Chicago School of Professional
Psychology*

Purdue Global

National University

The University of Arizona

Southern New Hampshire University

THANK YOU

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ATTACHMENT: E