

**Virginia Board of Psychology  
Quarterly Board Meeting  
Minutes  
May 16, 2017**

The Virginia Board of Psychology (“Board”) meeting convened at 10:15 a.m. on Tuesday, May 16, 2017 in Board Room 1 at the Department of Health Professions (“DHP”), 9960 Mayland Drive, Richmond, Virginia. Dr. Herbert Stewart, Ph.D., Board Chair, called the meeting to order. The Board approved a motion to move Dr. Siegel’s PSYPACT presentation after the Licensing Manager’s report on the Agenda.

**Board Members Present:**

Herbert Stewart, Ph.D., Chair  
J.D. Ball, Ph.D., ABPP  
James Werth, Ph.D., ABPP  
Peter L. Sheras, Ph.D., ABPP  
Rebecca Vauter, Ph.D., ABPP  
Jennifer Little, Citizen Member

**Board Members Absent:**

Susan Brown Wallace, Ph.D.  
Deja Lee, Citizen Member

**DHP Staff Present:**

David Brown, DC, Director of DHP  
Elaine Yeatts, DHP Senior Policy Analyst  
Jaime Hoyle, JD, Executive Director  
Jennifer Lang, Deputy Executive Director  
Deborah Harris, Licensing Manager

**Board Counsel:**

Jim Rutkowski, Assistant Attorney General

**Call to Order:**

Dr. Stewart called the meeting to order.

**Approval of Minutes**

The minutes of the January 24, 2017 meeting were approved as presented.

**Public Comment**

Jennifer Morgan, Virginia Academy of Clinical Psychologists (VACP), thanked Jim Werth, Susan Wallace, and J.D. Ball for their attendance and participation in the “Conversation Hour with the Board” held in Norfolk on April 28<sup>th</sup>, 2017, during the VACP Spring Conference.

### **Director's Report**

Dr. Brown reported that the Opioid epidemic in the Commonwealth is still on the rise. Although prescription drug overdose deaths have plateaued in recent years, heroin and fentanyl deaths have increased, and their use most likely can be traced back to a legal prescription for opioids. Medical provider shopping to get more prescriptions has become more difficult and has led to the use of more powerful, less expensive, and often more accessible drugs, such as heroin and fentanyl. Dr. Brown stated that even though Virginia is one of the states where Medicaid was not expanded, the Commonwealth still has resources to combat the opioid epidemic through the Addiction and Recovery Treatment Services (ARTS) program. ARTS allows the Virginia Department of Medical Assistance Services (DMAS) to expand treatment programs, increase reimbursement rates, and reimburse for the services provided by additional providers, such as Peer Recovery Specialists.

Dr. Brown also reported that Narcan and Naloxone are now being used by emergency response personnel to aid in this crisis. Additionally, a recent bill that passed the General Assembly required the Secretary of Health and Human Services to create a workgroup to review medical curricula regarding prescribing safely. The Secretary will reach out to prescribers and non-prescribers, such as the behavioral science licensees who treat persons with addiction, to participate in the workgroup.

### **Executive Director's Report**

Jaime Hoyle reported that the Board is running smoothly thanks to Board Members and Board staff to address the backlog of discipline cases and conduct probable cause reviews. Ms. Hoyle stated the Board will be getting a new intern this summer who will rotate around each of the Boards to help with projects. Also, she reminded the Board members they will hold elections at the next Board meeting in August.

### **Discipline Report:**

Jennifer Lang reported the following information:

- At the past meeting there were 70 open cases, with 50 of the 70 needing probable cause review and the oldest case awaiting probable cause review was two years old.
- Currently, the Board has 20 open cases with 15 needing probable cause review. Board members are currently reviewing six of those 15. The Board received the oldest case currently awaiting probable cause review on 01/05/2017.
- Administrative Processing Division (APD) is processing two cases.
- One case has been scheduled for an upcoming Informal Conference (IFC).
- We are negotiating a Consent Order on one case, and another case is waiting for additional information from the investigator.

Ms. Lang provided this handout for the Board regarding cases:

# BEHAVIORAL SCIENCE BOARDS

## *COUNSELING, PSYCHOLOGY, AND SOCIAL WORK*

### Case Totals (1/20/17 – 5/11/17)

	COUNSELING	PSYCHOLOGY	SOCIAL WORK	BSU TOTAL
Cases Received	55	25	36	116
Cases Closed	87	74	69	230
Cases waiting for Probable Cause Review (as of 5/11/17)	4	15	15	34

### Probable Cause Review Details (1/20/17 – 5/11/17)

	COUNSELING	PSYCHOLOGY	SOCIAL WORK	BSU TOTAL
Closed – No Violation	50	65	59	174
Closed – Undetermined	20	7	8	35
Closed – Violation	11	2	2	15
Credentials Appeal – Denied	5	0	0	5
Credentials Appeal – Approved	1	0	0	1
Additional Investigation Requested	1	2	1	4
Determination of Probable Cause; processed for additional board action	21	4	5	30
Informal Conferences or Formal Hearings held	6	1	2	9
Consent Orders and Confidential Consent Agreements entered	8	1	0	9

### **Licensing Manager's Report**

Deborah Harris reported there were a total of 121 licenses issued for this quarter:

- Applied Psychologist 1
- Clinical Psychologist 78
- Resident in Training 20
- School Psychologist 1
- School Psychologist Limited 10
- Sex Offender Treatment Provider 11

Ms. Harris reported to the Board that she is grateful for being able to attend the Association of State and Provincial Psychology Boards (ASPPB) Mid-year Conference in April of this year. She stated the conference was very informative and she learned a lot about ASPPB and the similarities between Virginia and the other boards and jurisdictions. She stated she thinks the Board would benefit from using the Psychology Licensing Universal System ("PLUS" – see below).

### **Psychology Interjurisdictional Compact (PSYPACT) and Psychology Licensure Universal System (PLUS) Presentations by Dr. Alex Seigel**

Dr. Seigel, JD, PhD, Director of Professional Affairs, ASPPB, gave an overview of his credentials and of ASPPB, which originated as a mobility service in 1961. ASPPB offers Certification of Professional Qualification ("CPQ") for fast track licensing, Board Member Trainings, PLUS services, and is creating the PSYPACT, which is a compact treaty between the states for licensed psychologists to be able to perform interjurisdictional telepsychology to clients in all states that are a member of the PSYPACT. It also offers a person a temporary license to practice in another state for up to 30 days. Once seven states enact PSYPACT, licensed psychologists will be able to apply for and use ASPPB certificates, which include the E.Passport to practice telepsychology and the Interjurisdictional Practice Certificate (IPC) to conduct temporary in-person, face-to-face practice in PSYPACT states.

Dr. Seigel stated that all application documents will be primary source verified. The cost to the Board to join the compact would range from three to five thousand dollars annually. The cost to the licensee would be two to three hundred dollars annually. Two states, Arizona and Utah, already have adopted PSYPACT and several more are considering doing so. The Board Members and Board staff discussed whether Virginia should move forward with exploring PSYPACT, given that some states license individuals who hold master's degrees as psychologists. Dr. Seigel said that the e-passport requires a doctoral degree, and the e-passport is required for practice under PSYPACT. He suggested that the Board may be able to add an amendment, or guidance, to the Compact clarifying that only persons with a doctorate degree could practice in Virginia through the PSYPACT if Board members or staff were concerned that the e-passport rules may be changed. The Board approved a motion to have the

Office of the Attorney General review PSYPACT and advise whether there is a possibility to add such guidance to the legislation needed to pass the compact.

Dr. Seigel also explained the “PLUS” benefit that ASPPB offers to applicants and boards. There are 14 jurisdictions already using the system, which is similar to a data bank. The applicant applies to the PLUS, and the ASPPB reviews all of the documents and sends the application to the jurisdiction for approval. There is a \$200 fee for the applicant to apply using PLUS. However, after all their documents are received and their EPPP score is banked, applicants will not have to pay a fee of \$75 to ASPPB to send out an EPPP score report to other jurisdictions. The applications are done electronically and all documents are primary source verified by ASPPB. The Board unanimously approved a motion for Board staff to contact ASPPB for further discussion on the process and report back to the Board at the next Board meeting.

Dr. Seigel gave an overview of the Examination of Professional Practice in Psychology (EPPP) and EPPP Step 2, which remains in the early stages of development. The EPPP Step 2 will focus on competency, whereas the EPPP Step 1 focuses on knowledge of the didactic coursework. ASPPB may suggest that Boards consider adding more flexibility to when the EPPP exam can be taken, so that students can take the exam as part of their doctoral program or while on internship. Then, the EPPP Step 2 would be taken after internship as the final step before licensure. They hope to have the beta-testing for the EPPP Step 2 to start in 2019.

### **Legislative & Regulatory Update**

No report.

### **Board Counsel Report**

No report.

### **Committee Reports**

#### *Board of Health Professions*

Dr. Stewart spoke about the Opioid crisis that was discussed at the Board of Health Professions (BHP) meeting. He added that even though the number of Opioid deaths are going up, the number of Opioid prescriptions are going down.

#### *Regulatory Report.*

Dr. Werth reported that during the Regulatory Committee meeting on May 15 there was continued discussion about the Standards of Practice, which included comparisons to the ASPPB Model Law and the Standards of Practice for the boards of Counseling and Social Work. The Board will revisit the Standards of Practice and may be able to review edits to the complete document at its August meeting. Dr. Werth also asked Board Members and Board staff to submit to the Executive Director any suggestions for additions or changes to the rest of the regulations by July 1.

In addition, Dr. Werth reported that the Committee continued to discuss the draft Guidance Document on Assessment Titles and Signatures and unanimously approved a motion to adopt the guidance document to allow use of the word “Licensed” in front of Clinical, School, or Applied Psychologists when signing assessments or use of only the titles, because the term “licensed” is in the definition of these professions. The Board agreed with editing the document as discussed and having it be reviewed by staff and the Attorney General’s office before coming being sent to the Board for another review.

**“Conversation with the Board” Report by J.D. Ball**

Dr. Ball stated that there were about 80 – 90 people that attended VACP’s “Conversation Hour with the Board” during its April meeting in Norfolk. Susan Brown Wallace and Jim Werth attended along with Dr. Ball. Dr. Ball said that Dr. Werth gave a demonstration on navigating Board of Psychology’s webpage, as well as finding DHP’s Workforce Data. The audience had questions regarding continuing education credits and also had questions regarding the new requirements for the Board of Counseling to register Qualified Mental Health Professionals (QMHPs).

**Amendments to Bylaws**

Discussion of the Bylaws were tabled to another meeting.

**Adjournment:**

The meeting adjourned at 3:55 p.m.

The minutes were approved during the August 15, 2017 Board of Psychology meeting, as written.

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Herbert Stewart, Chair

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*Jaime Hoyle*  
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Jaime Hoyle, Executive Director