Virginia Department of
Health Professions
Board of Psychology

Regulatory Committee Meeting
August 30, 2021
1:00 pm.
9960 Mayland Dr., 2nd Floor
Richmond, VA 23233

Call to Order – J.D. Ball, Ph.D, Committee Chair
- Welcome and Introductions/Roll Call
- Mission of the Board   Page 2
- Emergency Egress Procedures

Approval of Minutes
- Regulatory Committee Meeting – April 12, 2021*   Page 3
- Stakeholder Meeting (For Informational Purposes Only)   Page 6

Ordering 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.

Chair Report – Dr. Ball

Legislative and Regulatory Report – Ms. Yeatts
- Chart of Regulatory Actions   Page 8

Unfinished Business

- Report on Stakeholder Meeting - Dr. Ball   Page 9
  - PCSAS Accreditation
  - EPPP Part 2 Requirements
  - Creation of Workgroup to consider designation for master's level supervissees
- Discussion of proposed Social Media Guidance Document – Dr. Ball   Page 15

Next Meeting – December 13, 2021

*Requires a Committee Vote

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.

VIRGINIA BOARD OF PSYCHOLOGY
REGULATORY COMMITTEE
DRAFT MEETING MINUTES
April 12, 2021

TIME AND PLACE:	Consistent with Amendment 28 to HB29 (the Budget Bill for 2018-2020) and the applicable provisions of § 2.2-3708.2 in the Freedom of Information Act, the Committee convened the meeting virtually to consider such regulatory and business matters as are presented on the agenda necessary for the committee to discharge its lawful purposes, duties, and responsibilities.
PRESIDING OFFICER:	J.D. Ball, Ph.D., ABPP, Regulatory Committee Chair
MEMBERS PRESENT:	Christine Payne, BSN, MBA Herbert Stewart, Ph.D. James Werth, Jr. Ph.D., ABPP
STAFF PRESENT:	Deborah Harris, Licensing Manager Jaime Hoyle, JD, Executive Director Jennifer Lang, Deputy Executive Director Charlotte Lenart, Deputy Executive Director – Licensing Jared McDonough, Administrative Assistant Elaine Yeatts, DHP Senior Policy Analyst
CALL TO ORDER:	Dr. Ball called the meeting to order at 1:04 p.m. After completing a roll call of Board members and staff, Ms. Hoyle indicated that a quorum was established.
. **APPROVAL OF MINUTES:**	Dr. Stewart made a motion, which was properly seconded, to approve the October 26, 2020 Regulatory Committee Meeting minutes with minor edits. The motion carried unanimously.
ORDERING OF AGENDA:	Dr. Ball proceeded with the Agenda with no changes.
PUBLIC COMMENT PERIOD:	There was no public comment.
CHAIR REPORT:	Dr. Ball thanked staff for all their help and assistance to the Board.
UNFINISHED BUSINESS:	**Guidance Document on Psychologists' Use of Social Media** Dr. Ball created a rough draft guidance document for the Committee members to review. After a lengthy discussion, the Committee agreed that a taskforce or workgroup should be established to receive feedback from other Board members, professional psychology organizations, and psychologists on this issue.

Planning for a Stakeholder Meeting to Include Discussion on EPPP and Accreditation Issues

Dr. Ball discussed the need for a virtual stakeholders' meeting to discuss the possible requirement of the EPPP (Part-2 Skills) examination and an accrediting discussion, which would include APA master's level accreditation and additional accrediting bodies. Dr. Stewart will contact representatives from ASPPB to present at the meeting. Dr. Ball will talk to Dr. Sheras about the accreditation components during the April 13 Board meeting. The Committee suggested a mid-summer (mid-July) meeting. Board staff will send out a Doodle poll to establish a date.

Adopt Proposed Regulations for the Psychology Interjurisdictional Compact (PSYPACT) - Elaine Yeatts

Ms. Yeatts provided background information on the proposed regulations. The proposed regulations for PSYPACT simply replace the Emergency Regulations that are currently in effect.

Dr. Stewart made a motion, which was properly seconded, to recommend the proposed PYPACT regulations as presented to the full Board. The motion passed unanimously.

Regulatory Update

Ms. Yeatts gave a brief update on the proposed Regulations resulting from the Periodic Review. Ms. Yeatts informed the Committee that the regulations are in the final stages and have been in the Governor's office for 300 days.

Ms. Yeatts advised that the Regulations Governing the Certification of Sex Offender Treatment Providers were proposed as a fast-track action and are currently awaiting the Secretary's approval.

Ms. Yeatts advised that the Regulations related to Conversion Therapy are awaiting approval by the Governor.

Ms. Yeatts indicated that the guidance document for closing a practice is posted on Virginia Regulatory Town hall and open for public comment. Dr. Ball requested that the title of the guidance document be amended and Ms. Yeatts stated that she should be able to make the changes to the title without Board action.

PSYPACT Update

Dr. Stewart advised that there are currently 35 states that either have current regulations adopting PSYPACT or have pending legislation. Ms. Hoyle indicated that she was appointed to the PSYPACT Finance Committee. She looks forward to representing the Board in her new role.

NEXT MEETING: The next Regulatory Committee meeting is scheduled for August 30, 2021.

ADJOURNMENT: The meeting adjourned at 2:25 p.m.

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J.D. Ball, Ph.D., ABPP, Chair   Date

_____   _____

Jaime Hoyle, J.D., Executive Director   Date

VIRGINIA BOARD OF PSYCHOLOGY
STAKEHOLDER MEETING
DRAFT MEETING MINUTES
July 29, 2021

TIME AND PLACE:	The Virginia Board of Psychology ("Board") convened for a Stakeholder meeting on Thursday, July 29, 2021, at the Department of Health Professions (DHP), 9960 Mayland Drive, 2nd Floor, Henrico, Virginia 23233.
PRESIDING OFFICER:	John D. Ball., Ph.D., ABPP, Regulatory Committee Chair
MEMBERS PRESENT:	Peter Sheras, Ph.D., ABPP, Board Member Herbert Stewart, Ph.D., Board Member Susan Wallace, Ph.D., Board Member
STAFF PRESENT:	Deborah Harris, Licensing Manager Jaime Hoyle, JD, Executive Director Elaine Yeatts, DHP Senior Policy Analyst/Agency Regulatory Coordinator Jennifer Lang, Deputy Executive Director Charlotte Lenart, Deputy Executive Director Jared McDonough, Administrative Assistant Elaine Yeatts, DHP Senior Policy Analyst/Agency Regulatory Coordinator
OTHERS PRESENT:	Lee Cooper, Ph. D., Virginia Tech University Jason Downer, Ph.D., University of Virginia Dr. William Hathaway, Ph.D., Regent University Jacqueline Horn, Ph.D, ASPPB Director of Educational Affairs (via WebEx) Alexandra Miniera, Ph.D., George Mason University Anna Ord, Psy.D, Regent University Ed Tiller, Ph.D., Virginia Academy of Clinical Psychologist (VACP) Matthew Turner, ASPPB Senior Director of Examination Services (via WebEx) Matt Yoder, Ph.D., University of Virginia
CALL TO ORDER:	Dr. Ball, Chair, called the meeting to order at 1:03 p.m. and read the mission statement and emergency egress procedure.

Dr. Ball presented Dr. Stewart with a plaque recognizing his years of service with the Virginia Board of Psychology.

The Association of State and Provincial Psychology Boards (ASPPB) Examination for the Professional Practice of Psychology (EPPP) – Part 1 and Part 2

Dr. Stewart gave an overview and background information on the EPPP examinations. Dr. Horn gave a presentation on this subject and answered questions from Board members and the public.

Licensing Masters' Level Psychologists

The public members in attendance provide their favorable comments on the possibility of the Board licensing masters' level psychologist.

Accrediting Bodies other than APA accredited training programs for education of Psychologists in Virginia

Board members and the public discussed whether accrediting bodies such as the Psychological Clinical Science Accreditation System (PCSAC) should be approved by the Board.

Dr. Ball stated that the information received from today's meeting will help the Board as they consider future changes to the laws and regulations.

Dr. Ball thanked all the staff, members, presenters and public for attending the meeting

Adjournment: Stakeholder meeting adjourned at 4:08 pm.

_____   _____

John D. Ball, Ph.D., ABPP, Chair   Date

_____   _____

Jaime Hoyle, J.D., Executive Director   Date

Agenda Item: Regulatory Actions - Chart of Regulatory Actions
As of August 20, 2021

Board of Psychology

Chapter		Action / Stage Information
[18 VAC 125 - 20]	Regulations Governing the Practice of Psychology	Implementation of Psychology Interstate Compact [Action 5567] Proposed - *At Secretary's Office for 14 days*
[18 VAC 125 - 20]	Regulations Governing the Practice of Psychology	Unprofessional conduct/conversion therapy [Action 5218] Final - *Register Date: 7/19/21 Effective: 8/18/21*
[18 VAC 125 - 30]	Regulations Governing the Certification of Sex Offender Treatment Providers	Amendments resulting from a periodic review [Action 5660] Fast-Track - *Register Date: 6/7/21 Effective: 7/22/21*

Virginia Board of Psychology

Stakeholders' Meeting with Psychology Training Directors on Licensure Matters

July 29, 2021
1-4 PM

Attendees:

- Jason Downer, Ph.D., UVA Combined Clinical / School Psychology Program
- Matt Yoder, Ph.D., UVA Combined Clinical / School Psychology Program
- William Hathaway, Ph.D., Executive Director, Academic Affairs, Regent University
- Ammett Ward, Ph.D., Dean, School Psychology and Counseling; Director of Masters Program in Psychology, Regent University
- Lee Cooper, Ph.D., Director of Training, Virginia Tech
- Ed Tiller, Ph.D., President, Virginia Academy of Clinical Psychology
- Jackie Horn, Ph.D., ASPPB
- Matt Turner, Ph.D., ASPPB
- J.D. Ball, Ph.D., Vice-Chair & Chair Regulatory Committee, Virginia Board of Psychology
- Herb Stewart, Ph.D., Member Virginia Board of Psychology; President Elect, ASPPB
- Susan Brown, Ph.D., Member, Virginia Board of Psychology
- Peter Sheras, Ph.D., Member, Virginia Board of Psychology
- Jaime Hoyle, J.D., Executive Director, Virginia Board of Psychology
- Charlotte Lenert, Staff, Virginia Board of Psychology
- Elaine Yeatts, Policy Analyst for Virginia Board of Psychology
- Deborah Harris, Staff, Virginia Board of Psychology

J.D. Ball opened this stakeholder's meeting just after 1 PM by presenting an award to Herb Stewart for his service to the Virginia Board of Psychology, especially including his productive role as Chair of the Board in past years.

J.D. Ball read the Board's Mission Statement, reminded everyone that the Board's role is to protect the public and sought this meeting to gather input from stakeholders around licensure requirements with a plan to divide topics for this meeting into   a discussion of the EPPP- Part 2 /Skills in the first half of the meeting and program training in the second half of the meeting.

ASPPB Development of the EPPP – Part 2 / Skills

1. J.D. Ball introduced this topic by noting that the Board has the option to adopt a licensure requirement for passing the EPPP – Part 2 and that it has the option of permitting applicants to obtain a passing score on the entire exam (whether one part or two) within two years of licensure, meaning that both parts could be given during training with EPPP Part I given at the end of the graduate program and prior to clinical

internship training (possibly representing comprehensive exams)and Part 2 could be given later.

2. Herb Stewart broadly summarized the ASPPB Development of the EPPP – Part 2 / Skills exam, and introduced Jackie Horn who presented a PowerPoint to discuss the exam in greater detail, filling in for Matt Turner who called into the meeting later.   Essential points made:
   - Criticisms of Part I have been that it does not measure what we <u>do</u>
   - Most professions have embraced a move to competency assessment
   - Current methods of assessing skills are flawed (e.g., oral exams, hours of supervision, letters of recommendation)
   - This is a legally defensible test to demonstrate a universal level of competence
   - Questions are based on a 2016 job task analysis conducted with 2,736 psychologists from 95% of ASPPB's jurisdictions (84% U.S.; 16% Canada)
   - Exam content is:
       o 6% Scientific
       o 33% Assessment/Intervention
       o 16% Relational competence
       o 11% Professionalism
       o 17% Ethics
       o 17% Collaboration/Consultation/Supervision
   - The exam is a traditional multiple choice with some multiple sections and/or inclusive of video vignettes
   - Research has shown that the closer someone is to finishing coursework, the higher the likelihood of passing
   - As of November, 2020 states have had the option to adopt the EPPP with 2 parts
   - During a period of early adoption (scheduled to end in 2022) there are $ incentives through reduced fees for taking the exam: $300 now; $450 later
   - 8 states have been early adopters

Q & A

Q. Ed Tiller **–** Good content and face validity, what of predictive validity?

A. Jacki Horn- content validity is current competency exam practice in all licensure areas. By what criteria might we determine predictive validity? Fewer Board complaints for people who pass? (Actual complaints are too few, especially those with probable cause. Most subjects of complaints are mid-career or later.)

Q. Bill Hathaway – Virginia developed a complex exam to replace orals; it involved text vignettes and then latent image answer selections with branching options. It was very expensive to develop and apply and no one was ever denied a license on its basis. Will the EPPP – Part 2 have discriminating power?

A. Jacki Horn – ASPBB says yes, on the basis of discriminating between masters' level and doctoral level trainees. Once there are 150 candidates, ASPPB will release pass points.

Q. Jason Downer – Much of this is about how people think. It would be interesting to base concurrent validity on whether test answers correlate with how people actually behave in clinical situations.

A. Jacki Horn – Regarding observation of what people do, we could absolutely look at that. There are costs associated with that type of validity research. Those costs would have been prohibitive at this state. Candidates would have had to pay those costs. This would be analogous to medical boards where candidates pay travel costs to be examined.

Q. Lee Cooper – How do we know this protects the public? How do you define protecting the public?

A. Jacki Horn - The need is to know, "Can this person practice safely. So we develop tests to assess knowledge and basic skills.

APA Accreditation of Masters Level Psychology Programs and Implications for Practice

Q. J.D. Ball – Given recent movement from APA to accredit masters level psychology training programs, questions arise regarding the independent practice of psychologists with masters degrees. Does ASPPB have a position on independent practice of Masters level psychologists?

A. Jacki Horn – This is a complex issue. 16-17 states license psychologists at the Masters level and most are with a restricted scope under supervision. Only one state calls these people psychologists. Other Boards license other masters level clinicians.

Comment. Ed Tiller (speaking only for himself). In my practice, I manage four psychologists and two licensed professional counselors. There are addiction specialists and other therapists with lesser degrees. I know from practitioners in my area that **every** practice has a waiting list. We are **not** meeting the demand, and we must examine what we do and how we do it. There should be opportunities for masters level psychologists to practice under supervision. This must be driven by public need. My group is turning away 3,4, 5 people per day. We should move carefully in this direction, or we will be a very small profession.

Comment. Bill Hathaway – APA's accreditation of programs does not address scope of practice. It is hard to write accreditation standards when we don't know where Boards will go. The Board should think through the tiered models that are being proposed. We need the Board

to address this. Virginia was the first state to license psychologists and should be pioneers in this effort.

     Comment. Ammett Ward – I'd like to echo this sentiment as someone who was initially trained as a masters level counselor. Evidence-based practice was weak in this training. Psychology is not present in the training of masters level mental health providers. In fact, counseling accreditors exclude psychologists. We need a seat at the table. Our masters level students are getting more science than are others. The Board should engage with stakeholders to outline scope of practice.

     Comment. Lee Cooper – Virginia Tech was in favor of this 15-20 years ago, but the Board was not. The Board should take this problem seriously. Va Tech has a preliminary outline for it.

     Comment. Jacki Horn – There was a 2017 study in California on ethnicity, diversity and multicultural geographic distribution of California's mental health professionals showing that 21,000 licensed psychologists and 60,000 MFTs, LPCs, and SWs. Doctoral level clinicals practiced overwhelmingly in urban areas – predominantly in upper middle class white neighborhoods. Regarding finances, doctoral level education is expensive, and people often stop at the masters level if they can be licensed to practice independently and meet the needs of a diverse population. Counseling psychologists are said to be losing jobs because counseling programs license counselors rather than counseling psychologists.

     Comment. Elaine Yeatts – A different profession for masters level psychologists other than clinical psychologists would require a new title. This would require amending the code of Virginia through the General Assembly. At this time, a person with a masters in psychology would have no place in Virginia. The Board would have to write regulations permitting these people to take the EPPP and would need to determine what this license might look like. There could be a Board representative on a VACP work group to address this concern – otherwise, there is no avenue for a masters level psychologist. There needs to be clarity as to what this title conveys to the average person. Since, this needs to begin somewhere, the Board is a good to address it and is already behind in addressing it.

     Comment. Ed Tiller – VACP is creating study groups to examine this issue. It needs to contain training directors. I'm concerned about access to care. I'll be happy to meet by Zoom. My email is jetiller145@gmail.com.

     Comment. Ammet Ward – I would volunteer to help.

     Comment. J.D. Ball – I am interested as well.

BREAK

PSYCHOLOGICAL CLINICAL SCIENCE ACCREDITATION SYSTEM – PCSAS

J.D. Ball introduced the next session in the meeting by noting that the Board's new regulations, approved in the Governor's office just six days earlier, now require licensure applicants to come from training programs whose accrediting bodies have been approved by the Board (currently APA and CPA). This is a change from earlier requirements that applicants come from programs that were APA-equivalent. Determining whether programs were APA-equivalent proved to be impractical if not impossible, given the Board's resources. There is an allowance in the new regulations for the Board to name other accrediting bodies that might evaluate training programs, and, of course, this opens the way for new discussions. Also, of note however, until these newer regulations were put into effect, the Board has had no allowance to officially authorize a new accrediting body.

Lee Cooper from Virginia Tech spoke on his school's advocacy for having the Board designate PCSAS as another accrediting body for programs training psychologists toward licensure in Virginia. He spoke to having been frustrated previously on a technicality (i.e., he was then a petitioner, having written a letter the Board was considering). Not anticipating this limitation, he had invited a guest to help him communicate his concerns. As he listened then to the Board's deliberations, he believed some Board statements to have been in error, but he was unable to correct them. Essentially, the Board's concerns were whether graduates of PCSAS programs were sufficiently trained as practicing clinicians. His answer is, yes.

The rate of PCSAS graduates' acceptance into internships and passing EPPP are quite high. The need for this accreditation system is due to the APA accreditation system not capturing all appropriate training needs for those psychologists who want to consume and produce science. APA restrictiveness requires a lot of programs that aspire to these science objectives.

Peter Sheras noted that there are PCSAS accreditation efforts underway for some 42 programs, almost all of which are currently APA-accredited, making this a very appropriate discussion for the Board. PCSAS brings a certain perspective within psychology, and we do not want to make training in these areas so difficult that no one wants to engage in it.

Herb Stewart noted that there appears to be a process by which these programs are essentially self-rated in having set their own standards for measurement. Additionally, there has been a Board concern about a proliferation of accrediting bodies, meaning that weak training programs might evolve their own accreditation standards and name new accrediting bodies of their own. The development of multiple accrediting bodies contributes to divisive factions of clinicians and scientists.

Lee Cooper responded that multiple accrediting bodies, especially for weaker programs, was a legitimate concern that he shares. The earlier fear, however, that a psychological science organization would replace APA never actually occurred. Similarly, it is not the intent of PCSAS to replace APA-accreditation of training programs. On the other hand, for a program to maintain two accreditations is exceptionally difficult. This takes an incredible effort from just a few people responsible for meeting lofty accreditation standards (training directors). The Board should understand that PCSAS makes programs demonstrate *production* of science, and 75% of the graduates of these programs practice clinically and contribute to patient care.

Regarding the Board's concern that there would be a proliferation of accrediting bodies, even accrediting bodies of weaker programs, Jason Downer wondered whether it was not the Board's role to prevent that by carefully overseeing the accrediting bodies. J.D. Ball acknowledged that this was the Board's role and pointed out that precedence of accepting accrediting bodies beyond APA sets a precedent that that can make this work more difficult. That said, he expressed an interest in the Board continuing to hear more from programs interested in PCSAS accreditation, including being given an opportunity to review the specific written accreditation guidelines of PCSAS. In the spirit of honoring all attendees' time commitments, J.D. Ball adjourned this stakeholders' meeting at 4 PM.

VIRGINIA BOARD OF PSYCHOLOGY

GUIDANCE DOCUMENT ON PSYCHOLOGISTS' USE OF SOCIAL MEDIA

This document was developed to guide Virginia's licensed psychologists with respect to their use of social media for personal and professional purposes. Please also see the Board's Guidance Document on Electronic Communication and Telepsychology wherein specific guidance may be found regarding telephone text messaging, email, and other direct electronic communications between providers and patients, including direct service delivery via internet communications.

Definition and Characteristics of Social Media

For the purposes of this document, social media refer to digitally mediated technologies that facilitate creating and exchanging information between people via virtual communities or networks, typically on interactive web-based platforms. The nature of content shared through social media may include one's own or others' text, photos, audio and/or video material, and such various other informational formats as graphic and tabular data displays. Social media content is user posted, but it is not necessarily generated by the user who posts it; and because it can be modified or selectively edited by the user who posts it, or by another user earlier, content accuracy and content authorship is never fully certain.

Through social media, users both generate and access content through digital connections to the web, typically through popular apps that connect individuals or groups. Typically, individual users create a social media profile to be shared with others widely or more narrowly. Of note, social media platforms have changing policies and methods for users to indicate their privacy preferences in this regard. In addition, content that is intended for a narrow audience can be shared by the users with other users who may or may not be within the narrow audience. This wider sharing may be intentional or unintentional and may include the full or only the partial context of the original post, opening and altering the originally shared content for a larger audience. Through indirect or direct transfers of information of this kind, it is possible for content posted to a given internet site to be picked up by and posted on other internet sites. Once shared, content may remain available on the internet for later viewing.

Many popular, corporate-owned social media apps target advertising and other content toward users, based on the corporation's ability to view and learn, through artificial intelligence, a user's social media activities. They may also rely upon computer-based algorithms for re-posting various content through "news feeds." These algorithms may be based not only on what interests a particular end user has shown, but also on whether another user's post has attained some threshold popularity through frequent user "visits," "hits," or "clicks." This automated re-posting process has the effect of giving the most news feed exposure to content that is most interesting to users broadly or to specific user groups. These most interesting posts are often posts with emotional appeal that may be said to have "gone

viral," meaning they are often the most sensational posts, increasing the likelihood that they are not accurate.

Professional and Personal Use of Social Media

Social media apps make no requirements for users to separate professional and personal activities on social media. However, the Board recommends that psychologists clearly separate any professional and personal use of social media with distinctly different user profiles and email addresses. This separation is important for minimizing dual relationships and avoiding complicating self-disclosures that can interfere with the delivery of psychological services.

Professional activities involve direct attempts to exchange information with current or prospective clients, students, research participants, referral sources, colleagues, and other professional contacts, perhaps including the general public for various educational activities, marketing efforts, and on-line file exchanges. Psychologists should be aware of the risk that friends or family might make personal posts on a social media page intended for professional activities, blurring an attempted distinction.

Personal activities involve shared exchanges of various information with family, friends, social contacts, and personal interest groups. While users can establish different privacy preferences for their professional and personal social media profiles, personal profiles with a recognizable profile or user designation may be of interest to one's professional contacts, and current, past, or prospective clients may find their way to personal social media profiles in search of personal information posted there, despite a psychologist's efforts to separate professional and personal social media accounts. Psychologists may wish to caution friends or family about the possibility of social media requests from unknown people.

Social Media Policy

Apart from how psychologists manage their own social media profiles, the popularity of social media among prospective clients/recipients of psychological services creates a need for psychologists to prepare and disseminate to prospective and actual clients a written social media policy. The essential elements of this policy include a description of how the psychologist will conduct themself on the internet in a professional capacity and encouragement to clients to ask questions about matters that may remain unclear.   Such a policy is advisable even if only to describe how the psychologist intends to use email and texting (see the Board's Guidance Document on Electronic Communications and Telepsychology). Specific examples of topics covered in a social media policy may include:

- how the psychologist will handle requests to "friend" or "follow" others on social media (inadvisable in light of threats to boundary and confidentiality);

- the purpose, content and intended practices on any professional practice social media page maintained by the psychologist (accepting clients as "fans" of these pages is inadvisable as this fan list may be interpreted as a client list);
- the psychologist's personal intent to use internet searches to gather information on clients (inadvisable in light of threats to trust in the relationship with the client and the potential for gathering misinformation);
- the extent to which stringent efforts to protect client confidentiality prevent the psychologist from responding to posts from others, including even "like" responses to client posts;
- the specific privacy preferences the psychologist has selected on any of the psychologist's professional social media accounts;
- instructions to current or prospective clients as to how they are expected to interact with the psychologist through social media (e.g., avoid the use of insecure and untimely social media texting or messaging to contact the psychologist and similarly avoid "wall postings" to engage with the psychologist online); and
- a discussion of the turnaround times of various methods of communication with clients and emergency procedures to follow for contacting psychologist.

Maintain Adherence to Board's Regulations for Standards of Conduct

As also detailed in the Board's Guidance on Electronic Communications and Telepsychology, the Board of Psychology's Regulations for Standards of Conduct apply to the psychologist's social media behaviors. These include the following:

- Preservation of Confidentiality –
  - Be familiar with and use all available privacy settings on social media platforms'
  - Use trusted and secure networks to access social media accounts
  - Use encryption when sending protected and private information over social media
  - Carefully train all staff with any responsibility for assisting social media account
  - Let clients know they can turn off location tracking during appointments
  - Carefully consider client confidentiality in all aspects of internet usage and be aware of potential for enormously wide audience at all times
  - While it is best not to share personal devices, ensure that no family member can access any Personal Health Information (PHI) stored on your device
- Informed Consent –
  - Explain benefits (e.g., immediate, ever present, large audience, etc.) and risks (disguised identities, theft, misleading false appearance of psychologist's immediate emergency availability, etc.) of social media,

- o Procure informed consent from those legally entitled and competent to provide it
- Multiple Relationships
  - o Avoid conflicts of interest
  - o Manage responsibility for who may access accounts
  - o Keep personal and professional accounts separate
- Competence
  - o Familiarize self with legal requirements
  - o Be aware of multi-state presence and complex legal implications of social media use
  - o Maintain current knowledge of privacy preference settings
- Professional Representation
  - o Assure all information regarding credentials, published research findings, curriculum vitae, and personal professional representations are neither fraudulent nor misleading
  - o Clarify on social media sites the jurisdiction in which you are licensed to practice

General Considerations in the Use of Social Media

There is an extensive existing literature on the proper use of social media, and psychologists should consult the references at the end of this document and a great deal of other relevant professional information for more detail than it is practical to provide here. A concise distillation of key considerations from that some of that literature include the following:

- Use social media with an eye to protecting the reputation of the profession and the public opinion of psychologists with an awareness that any social media activity may reflect upon yourself as a professional and may affect the welfare of the public;
- Use only trusted and secure WiFi networks to access work websites
- Conduct a regularly scheduled risk analysis and ongoing evaluation of data and platform security, website information accuracy, strong password and data encryption updates, vetting of third part services, and assurance of client de-identifications
- Maintain adequate technology training for self and employees
- Take precautions to prevent damage, theft or loss of equipment that handles sensitive information
- Encrypt and frequently back up all stored sensitive information
- Use virus protection

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