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**THE VIRGINIA BOARD OF PSYCHOLOGY  
REGULATORY COMMITTEE  
MINUTES  
DECEMBER 10, 2002**

The Regulatory Committee of the Board of Psychology met on Tuesday, December 10, 2002 at the Department of Health Professions, 6603 West Broad Street, Richmond, Virginia. Dr. Virginia Van de Water, Chair, called the meeting to order at 10:03 a.m.

**COMMITTEE MEMBERS PRESENT:** John Bruner, Ph.D.  
Jewell Cowan  
Clifford V. Hatt, Ed.D.  
David L. Niemeier, Ph.D.  
Jeanne E. Decker, Ph.D

**BOARD MEMBER PRESENT:** William L. Hathaway, Ph.D.

**STAFF PRESENT:** Evelyn B. Brown, Executive Director  
Benjamin Foster, Deputy Executive Director  
Arnice N. Covington, Administrative Asst.  
Howard Casway, Asst. Attorney General  
Elaine Yeatts, Regulatory Coordinator

**OTHERS PRESENT:** Sharon Patterson, Ph.D., VACP  
Mary Gregerson, Ph.D., VACP  
Dennis Carpenter, Ph.D., Westwood Group  
Linda Gonder-Frederick, Ph.D., UVA  
Mike Stutts, Ph.D., VACP, EVMS

**ORDERING OF AGENDA:**

Dr. Van de Water opened the floor to any changes in the agenda. The agenda was accepted as submitted.

**PUBLIC COMMENT:**

None

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### **FEE PROPOSAL:**

Mr. Foster provided the Committee with copies of the “Public Hearing Summary” and “Public Comments Summary.” Even though the Board received no comments it is still necessary to acknowledge the summaries for the record. Mr. Foster asked the Committee to recommend to the full Board that the necessary documentation for Final Regulations be submitted. Dr. Neimeier made a motion, properly seconded by Ms. Cowan to favorably recommend to the full Board that the summaries be adopted and that the necessary documentation for Final Regulations be adopted and submitted. The motion was unanimously approved.

### **RESIDENCY REQUIREMENT:**

Dr. Van de Water provided background on the residency requirement issue. She pointed out that this issue had been discussed at the September 10, 2002 Committee meeting and had been brought before the full Board at the October 8, 2002 meeting. After the Board consulted with Mr. Casway and Ms. Yeatts the matter was referred back to committee by the Chair, Dr. Decker.

Dr. Van de Water informed those present that anyone who wanted to speak on this issue would have the opportunity. She asked that anyone who wanted to speak but who had not designated so on the sign in sheet, do so at that time.

Dr. Dennis Carpenter stated that he questions the need for this change to regulation. He understands the billing question that has been raised however, from a practical standpoint a person must be in practice three to five years before Medicare or many insurance companies will include them on their rolls. Dr. Carpenter said that as a reviewer of psychology applications he finds that most applicants wait six months to several years post graduation to apply for licensure examination. Dr. Carpenter said that the requirements for licensure have been lessened with the removal of the oral examination and that he felt any actions that might further lessen licensure requirements would set a dangerous precedent.

Mr. Foster handed out copies of letters from Mr. Randy Reaves, J.D., Executive Director and General Counsel of the Association of State and Provincial Psychology Boards (ASPPB), and Dr. Kim R. Jonason, Ph.D. (CPQ committee). After the October 8, 2002 Board meeting Ms. Brown contacted Mr. Reaves and requested comment on this issue. Mr. Reaves responded and suggested that several other persons (including Dr. Jonason) be contacted for comments. Dr. Van de Water read each of the letters aloud to the Committee. Of particular interest were statements by Mr. Reaves that read: “While the intention in this initiative may be good, the result may be that Virginia’s future licensees may not be eligible for licensure in a large number of jurisdictions without repeating the year of post-doc supervision. I would urge Virginia to do some research on this matter given the very real possibility that an unintended outcome may result.” Likewise, Dr. Jonason wrote: In order for an individual to qualify for the CPQ they must have one year of post internship, postdoctoral supervision.”

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For the benefit of those unfamiliar with ASPPB [Dr. Bruner](#) and [Mr. Foster](#) gave an overview of the organization and several of its activities.

[Dr. Hathaway](#) recalled comments he had received during an ASPPB Convention in Mobile, Alabama in October of this year concerning this issue. It was suggested that no one is sure how many states have regulations requiring a post-doctoral residency. Further, and more importantly, no one is sure how any of the states would react to a Virginia licensed applicant should Virginia issue a license prior to completion of a post-doctoral residency.

[Dr. Patterson](#) stated that she shared the same concerns as earlier expressed by [Dr. Carpenter](#). She stated that the Board should be concerned with issues that addressed the needs of many not just a few.

[Dr. Stutts](#) said that he agrees there are valid concerns relating to this issue but that doesn't change or overshadow the positive aspect of this issue. He feels that the issue of reciprocity will only be a problem for a few persons who are mobile and chose to leave the state. [Dr. Stutts](#) also pointed out that Virginia has been a trendsetter over the years and that we should continue to do so with this residency issue.

[Dr. Gonder-Frederick](#) reiterated that she was present representing [Dr. Jeff Barth](#) of UVA. She said that although this discussion was new to her she was very familiar with the problems faced by residents who were "not licensed." [Dr. Gonder-Frederick](#) related how residents at UVA often "will not even sit in the room when paying patients are present." She contended that this is not really an issue of reimbursement but an issue of training people to function independently. Therefore, UVA would certainly support any actions that would provide a license to residents.

[Dr. Decker](#) stated that the UVA situation as explained sounds restrictive. "It doesn't sound like something we can fix."

[Ms. Yeatts](#) pointed out that the Board had three choices in regard to this issue: 1) Offer a provisional license; 2) Eliminate the residency requirement; or 3) License without residency but require it upon renewal. However, the third option would create a de facto new licensure category that would require statutory authority. Therefore, there are really only two choices.

[Dr. Neimeier](#) made a motion, properly seconded by [Ms. Cowen](#) to "Take off the table eliminating residency," the Board will continue to require residency at this time. The motion passed unanimously.

[Mr. Foster](#) reminded that Committee that the original request to review the residency requirement did not include a "temporary or conditional license" as an option. He went on to state that many of the participants who spoke at the last Committee meeting specifically said that temporary or conditional licensure would not meet the needs pushing this issue.

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Dr. Neimeier made a motion, properly seconded by Ms. Cowen to recommend to the full Board that it establish a residency license for clinical and school psychologists that will be temporary as authorized under the current regulations. This license has precedence with medical interns who have a one-year license. The license would be called, “Licensed Resident in Clinical Psychology.” The motion passed unanimously.

Mr. Casway cautioned that this must be a “temporary” license or certification.

**ADJOURNMENT:**

Dr. Van de Water thanked the participants for coming to the committee meeting and providing their input on this very important topic. She then adjourned the committee meeting at 11:49 p.m.

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Virginia Van de Water, Ed.D. Chair

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Benjamin Foster, Deputy Executive Director