

MARYLAND BOARD OF EXAMINERS OF PSYCHOLOGISTS

SPRING/SUMMER 2010

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From The Chair...



Robert A. Brown, Ph.D., ABPP

It appears there is confusion, at best, regarding the new statute and regulations specifying the amount of supervised experience required to apply for licensure as a psychologist in Maryland. At worst, some students feel that the issue of experiential requirements for licensure has been settled, that all of their pre-doctoral practica should qualify as supervised experience, and that they do not need the post-doctoral experience to apply. *That is a dangerous assumption.* We hope that the information below will help clarify the issues.

1. All of the details will be posted on the Board website for applicants to begin submitting their hours of experience under the new regulations on Sept. 1, 2010. The regulations have been published in the *Maryland Register*, and we have received several comments to which we must respond before proceeding. Then we must decide the format under which the experiences are to be documented and submitted so that all of the regulatory requirements are met. **Until then, applicants for licensure must follow the current requirements.** Students who are near graduation, particularly those who are already post-internship, may not be able to sufficiently document their pre-doctoral supervised experience to be able to meet the new requirements without a post-doc experience. (see #4 below).
2. Applicants from practice-oriented programs, defined as clinical, counseling, or school psychology programs, will have different requirements than those from, for example, social, I/O, or developmental programs. All applicants will need 3,250 hours, but the types of activities to be credited will be different for the two types of programs. For example, for those from

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2010 Board Meeting Dates

September 10
October 8
November 5
December 10

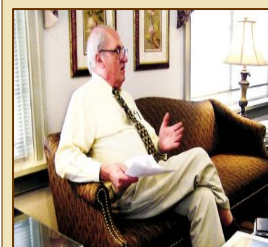
Jurisprudence Exam Dates

The Maryland Jurisprudence Licensure exam is administered monthly.

The remaining 2010 dates are:
Aug. 20, Sept. 17, Oct. 15, Nov. 19, &
Dec. 17

For more information contact Ms. Dorothy Kutcherman, Licensing Coordinator at 410-764-4703.

ANNOUNCEMENTS



The psychological community, friends and family mourn the unexpected passing of Dr. Ted Grant, on July 10, 2010 from a heart condition. He was 80.

Photo by Susan Craton, courtesy of [The Enterprise](#)

Ted was tirelessly involved in professional endeavors across a variety of settings and cultures, academically, clinically and socially. He was in clinical practice in Southern Maryland for more than 4 decades, taught at The College of Southern Maryland, developed the MPA Federal Advocacy Program, trained psychologists to communicate with legislators, facilitated therapy groups, coordinated services for the Dept. of Aging, participated in international professional conferences with the European Association for Transcultural Group Analysis, and organized mental health associations in Southern Maryland. Ted lived what he taught, *activism* leads to positive change and he made a difference!

Disciplinary Actions



January 2010–July 2010

This summary delineates the number and disposition of complaints the Board received. Informal actions do not reveal identifying data and typically involve meeting with the Board prior to the determination of final agreements. Formal disciplinary actions are a matter of public record.

Total Number of Cases Received = 16

Public Orders/Formal Actions = 0

Informal Actions = 1

Referred to another jurisdiction = 0

Cease and Desist = 1

No investigation warranted = 13

No action warranted = 3

Letter of Education = 0

Letter of Admonishment = 1

Referred to the Office of Attorney General for Possible Charging = 1

The *Maryland Public Information Act* was developed to ensure access to information about governmental affairs while protecting legitimate privacy interests. The wording of all informal actions avoids identification of confidential data. (Adapted from Ch. 13 of the *Maryland Public Information Act*, pub., Office of Attorney General). ◇

From The Chair...

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practice-oriented programs, an internship is now required, even though under the old generic licensing requirements this was not necessary.

3. Developing the format for submitting hours is difficult. For example, Ohio has 7 different forms. We need ways for applicants from practice and non-practice-oriented programs to record and document their hours. For graduates from non-practice-oriented programs, the documentation needs to be broken down further into pre- and post-doctoral experiences. For graduates from practice-oriented programs, the documentation needs to be distributed among pre-internship, internship, pre-doctoral/post-internship, and post-doctoral activities. All of this will need to be documented through a combination of applicants' recording their hours, and

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Congratulations Newly Licensed Psychologists!

February 2010

Shira Benhorin, Ph.D.
Ted C. Bonar, Psy.D.
Abena N. Brown-Elhillali, Ph.D.
Marcy Burstein, Ph.D.
Angela Fadely, Psy.D.
Jessica K. Floyd, Psy.D.
Myrna L. Frank, Ph.D.
Brian S. Konik, Ph.D.
Christie O. Simpson-McKenzie, Ph.D.
Alison K. Thir, Psy.D.

March 2010

Adrianna Amari, Ph.D.
Gregory Samuel Chasson, Ph.D.
Sarah Chisholm-Stockard, Ph.D.
Marsha V. Hahn, Ph.D.
Jaclyn Beth Halpern, Psy.D.
Christina M. Jensema, Psy.D.
Carola M. Jobe, Psy.D.
Mary Joy Kolb, Ph.D.
Tena Malone, Ph.D.
Tamara J. Michaelidis
Carrie L. Mills, Ph.D.
Karen Wittmann, Ph.D.

April 2010

Carly B. Blackstone, Psy.D.
Chriselda Nathene Fleming, Psy.D.
Natasha Nelson, Psy.D.
Lorrie Ann Ness, Ph.D.
Nicole L. Nieset, Ph.D.
Emily Hall Ray, Ph.D.
Michael Joseph Reiter, Ph.D.
Richard E.Y. Sechrest, Psy.D.
Brooke A. Stipelman, Ph.D.
Benjamin E. Yerys, Ph.D.

July 2010

Charles Curtis II, Ph.D.
Deborah D. Gambles, Psy.D.
Melinda Beth Goodman, Ph.D.
Sarah E. Johnson, Psy.D.
Shayne L. Power, Psy.D.
Jennifer H. Reesman, Ph.D.
Grace M. Riley, Psy.D.
Kritin A. Sagun, Ph.D.
Sarah M. Towne, Psy.D.
Binal Ward, Psy.D.
Kristen S. Weinstein, Ph.D.
Carolyn T. Wells, Ph.D.

May 2010

Adam Castleberry, Psy.D.
Neda F. Gould, Ph.D.
Melissa C. Hendricks, Ph.D.
Peter Musser, Ph.D.
Laurie K. Pumphrey, Psy.D.

June 2010

Karin M. Cleary, Ph.D.
Steven C. Della Vecchia, Psy.D.
Ozge Gurel Kirgiz, Ph.D.
Maureen Monaghan, Ph.D.
Laura V. Newton, Ph.D.
Patricia Robison, Ph.D.
Adam Scheller, Ph.D.
Daphne Washington, Ph.D.

Custody Evaluation Regulation Workgroup

The Board established a workgroup that met 4 times over the winter and spring to explore the rationale for and against developing regulations to define the process of conducting child custody evaluations. The workgroup was comprised of 3 board members, 3 psychologists with expertise in custody evaluation related work, a judge, and 3 attorneys experienced in various aspects of family law.

The workgroup explored potential risks and benefits of regulating the specific practice of custody evaluation within the context of Maryland law and the history of allegations the Board receives. Numerous resources were utilized, including the combined expertise and varied perspectives of the workgroup participants, the Guidelines for Child Custody Evaluations in Divorce Proceedings (1994, APA), the Guidelines for Psychological Evaluations in Child Protection Matters (1999, APA), the Criteria for Practice Guideline Development and Evaluation (2002, APA), the Criteria for Evaluating Treatment Guidelines (2002, APA), the Association for Family and Conciliation Courts (AFCC) Model Standards of Practice for Child Custody Evaluation (2006, AFCC), and the Task Force on Parenting Coordination Guidelines for Parenting Coordination (2005 AFCC).

The workgroup developed recommendations that were presented to the Board at the open meeting in June. The Board took comments and questions from the public and psychologists who had written in to MPA. Following discussion and review, final recommendations went to the Board. The Board will render and publish draft regulations for public comment prior to submission.

Announcements

(continued from pg. 1)

The loss of **Scott E. Borrelli, EdD, MP, ABPP**, will be felt near and far. Dr. Borrelli, 60, passed away following a long battle with cancer.



Licensed in several states in the US and Britain, he practiced and taught at the University of Maryland, European Division for 2 decades in various parts of Europe. He was board certified in psychopharmacology, clinical and counseling psychology. With expertise in areas of ethical issues in distance counseling, medical psychology, trauma and multi-cultural populations, Dr. Borelli was a strong advocate for prescriptive authority and Chief Editor of the online European journal, *The EMDR Practitioner*.

Technology, Telehealth & Healthcare

The Board held a retreat in December 2009 that featured a discussion on the topic of telehealth by guest speaker, Dr. Lynn F. Bufka of the APA Practice Directorate. Dr. Bufka presented data on telehealth trends across the country. Nine states have integrated an aspect of telehealth service provision in state statutes. While telehealth practices engender controversy regarding such concerns as standards of practice across state lines, Boards representing various professions are attempting to address this thorny issue. For example, the Board of Physicians in Maryland has published telehealth regulations that went into effect the end of 2009, and 26 states allow psychologists temporary practice approval. More than 2 dozen states require advance notification and approval for temporary practice while 10 states allow no form of temporary practice. Considerations regarding the regulation of telehealth practice are relevant to temporary practice regulations in the states that have them as rapid technological advances necessitate that Boards determine how and what aspects of telehealth practices pertain to which state licensing and disciplinary laws and regulations. Because state Boards are in early stages of exploring these issues, psychologists rendering services other than in-person across state lines should examine the state laws on a case by case basis so as to be clear whether the state in which he/she is licensed, the state in which the client/patient receives the service, or both are regulating the practices he/she is providing.

Please notify the Board of any changes to your contact information. On-line at www.dhmh.state.md.us/psych or by contacting Sally Mitchell at 410-764-4787 or mitchellsj@dhmh.state.md.us

From The Chair...

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through directors of graduate and internship training and post-doctoral supervisors attesting to the accuracy of the hours submitted. This will be clear on the new applications.

4. Applicants are going to need a detailed breakdown of professional activities at all levels, particularly those from practice-oriented programs, in order for the activities to be credited as professional supervised experiences. For these applicants, a good rule of thumb is to record the same level of detail at the post-internship/pre-doctoral level that is now recorded for the APPIC application. Moreover, the requirements for all pre-doctoral experience under the new regulations are much more carefully constructed to include formal integration with the doctoral program, even at the post-internship/pre-doctoral level. So after the internship, before receiving the doctorate, students are going to need to be in close contact with their graduate program and coordinate with their pre-doctoral training if the hours are to be credited.

5. A word of caution: many students graduating from Maryland programs will move out of state to begin their careers. To date, only a very few states do not require post-doctoral hours. So even if applicants may qualify to apply for licensure in Maryland on the basis of two years of pre-doctoral experience, they may not qualify for licensure in the vast majority of jurisdictions that still require a post-doctoral experience. If students have even a remote expectation of moving out of state, it would behoove them to have supervised post-doctoral experience.

6. We are going to ask for feedback from Maryland, DC and Northern Virginia training directors on the details of the requirements and means of documentation. Until then, it is important that applicants ask the Board staff for the details of the requirements before proceeding on the assumption that they do not need a supervised post-doctoral experience.

7. We strongly encourage potential applicants to carefully read the regulations that are posted on the Board's website. The address is www.dhmh.maryland.gov/psych under COMAR new regulations.

"Memory" Molecule?

Scientist, Inna Stlutsky, Ph.D., at Tel Aviv University in Israel has clarified the importance of the role of GABA or gaba-aminobutyric acid, as a main regulating neurochemical to the process of permanently storing new memories. Highly complex and variable synaptic connections are necessary for memory storage and retrieval. High concentrations of GABA near relevant synapses appear to induce stronger activation of receptors than lower concentrations which aids the process of effectively laying down new memory.

(Science News in United Press International, Inc. 2010. www.upi.com)

is dedicated to protecting the citizens of Maryland and promoting quality health care in the field of psychology

APA 2010 Employment Workforce Study

APA conducts periodic employment surveys to assess the work-related activities of psychologist members. More than 14000 APA members responded to the on-line survey which addressed workforce trends such as work with underserved populations, work in rural areas, with children, minorities, military members and veterans. Data regarding psychologist involvement in pro bono, volunteer and research activities were also collected. Below is a synopsis of some of the findings.

Respondents reported a rate of 67% employment in one work related job. Twenty-six percent reported having two positions and 8% worked in 3 or more psychology related positions. Of those who responded to the survey, 51% provided health/mental health services free of charge within the last 3 years, 34% provided health/mental health services through a managed care provider panel, 40% served as a paid consultant to an institution, business, government agency, school or organization excluding clinical service and supervision, 27% served as PI or co-PI on a research grant or contract, 27% worked in an integrated health setting such as a community health center or primary care practice, and 22% appeared on TV, radio or teleconference. Volunteer activities were cited by 40% of psychologist respondents as being a regular part off their community involvement. Thirty-four percent taught graduate psychology courses, 32% taught undergraduate courses, 19% participated in legislative or lobbying activities, and 15% assisted with emergency or disaster response situations. With regard to populations served, 74% of survey respondents work with minorities, 66% said they work with clients from lower SES, 55% work with children, 49% work with members of the LGBT clients, 53% with disabled individuals, 47% with the seriously mentally ill, 45% with elderly individuals, 36% with members of the military or veterans, 36% in rural areas, 32% with immigrants, 24% of respondents' clients are homeless, 22% are affiliated with corrections or law enforcement, and 21% work with individuals with HIV/AIDS. More information about the APA workforce study can be found at www.apa.org

Composition of The Board

Nine members comprise the Board. Seven psychologists & two consumer members are appointed by the Governor to serve 4 years on the Board.

Members:

Robert A. Brown, Ph.D., ABPP—Chair

Steven A. Sobelman, Ph.D.—Vice Chair

Myra A. Waters, Ph.D.

Laurie Friedman Donze, Ph.D.

Joann V. Altiero, Ph.D.

Alan Marcus, Ph.D.

Jeffrey E. Barnett, Psy.D, ABPP

Lydia McCargo-Redd, Consumer Member

Staff:

Lorraine Smith, MPH, Executive Director

Dorothy Kutcherman, Licensing Coordinator

Sally Mitchell, Admin. Assistant.

Patricia Morris English, MS, Board Investigator

Sangeeta Sarkar, MS, Data Base Programmer Analyst

The History of Establishing Regulatory Boards

Virginia set the precedent in 1639 as the first US state or territory to establish a board for the purpose of regulating occupations. It was more than 100 years later, in the 1770s in New Jersey, before the first comprehensive medical practice act was passed. Texas, in 1861 passed the first modern US medical practice act, and by 1912 all US states had begun to regulate the practice of medicine. By the early 1900s, most jurisdictions in the US also regulated attorneys, teachers, pharmacists, and dentists, but not until 1960, did most states and provinces regulate 20 or so other occupations such as realtors, accountants, barbers, funeral directors, chiropractors, and nurses.

**In December 2010
Renew Your License On-Line
www.dhmd.state.md.us/psych**

The online license renewal process began in the Spring of 2008 and has been received positively. The system is user friendly and is open only during the renewal period on the Board's website. Credit cards payments are accepted online. For those who prefer to pay by check, you can complete the renewal application online and mail both to the Board.