



The Association of State and Provincial Psychology Boards

Supervision Guidelines – Mandated Supervision

February 2018

Introduction

In August 2015, the Association of State and Provincial Psychology Boards (ASPPB) published its Supervision Guidelines for Education and Training leading to Licensure as a Health Service Provider (ASPPB, 2015). Those guidelines were intended as a resource, to assist member jurisdictions in developing supervision requirements for students pursuing licensure as Health Service Psychologists (HSP). At the same time, it was known that this would be the first in a series of supervision guideline documents, given the multiple reasons that psychologists (or students of psychology) might enter into a supervisory relationship. Apart from supervision for licensure as an HSP, supervision may be required for (a) licensed non-doctoral psychology service providers, (b) trainees pursuing licensure as a general applied psychologist (GAP), and (c) non-licensed persons providing psychological services, e.g., psychometrists. A fourth reason a psychologist might enter into a supervisory relationship, and the focus of this document, is when a psychologist finds him/herself in violation of a state/provincial law or national ethical code. In addition to common regulatory authority sanctions such as reprimands, probation, and/or license suspensions or revocations, psychologists and his/her practice may be placed under mandated monitoring or supervision. For our purposes, mandated supervision is defined as “supervision that is prescribed for psychologists [or other mental health professionals] following a determination by a regulatory authority that the professional has violated ethical or practice standards or relevant laws. The primary objectives of such supervision include the

rehabilitation of the professional and the protection of the supervisee’s clients and the public” (Thomas, 2014). This document is intended to assist member boards in creating supervision and monitoring guidelines for such circumstances. It is important to recognize that these guidelines are presented as recommendations to assist regulatory authorities, but in all cases local laws and regulations must be followed as they will take precedence over these recommendations.

Following a similar format to that of the 2015 ASPPB Training Supervision Guidelines document, this set of guidelines will provide information and recommendations in a set of broad areas including:

- Overview of Supervision for Discipline
- Supervisor Competencies in Case Supervision
- Supervisor Competencies in Monitoring
- Disciplinary Supervision Contracts
- Responsibilities of Regulatory Authorities in Disciplinary Supervision/Monitoring
- Unique Challenges in Mandated Supervision

Each of these areas will be more fully developed in this document, with specific examples and sample documents provided in the appendices.

Definitions

This section provides the meanings of terms as used in this document.

Client (also known as patient):

1. A direct recipient of psychological services within the context of a professional relationship including a child, adolescent, adult, couple, family, group, organization, community, or other populations, or other entities receiving psychological services.
2. The individual or entity requesting the psychological services and not necessarily the recipient of those services (e.g., an evaluation that is court-ordered, requested by an attorney, an agency, administrative body or an organization).

3. An organization such as a business corporation entity, community or government that receives services directed primarily to the organization, rather than to the individual associated with the organization; or
4. In the case of individuals with legal guardians, including minors and legally incompetent adults, the legal guardian shall be the client for decision making purposes, but the individual receiving services shall be the client for:
 - A) Issues directly affecting the physical or emotional safety of the individual, such as sexual or other exploitative dual relationships, or
 - B) Issues specifically reserved to the individual, and agreed to by the guardian prior to rendering of services, such as confidential communication in a therapy relationship.

Competence: The integrated use of knowledge, skills, attitudes, and values that are necessary to ensure the protection of the public in the professional practice of psychology.

Cross-disciplinary Supervision: Supervision occurring between practitioners from different professions (O'Donoghue, 2004).

Delegated Supervisor: A licensed health psychologist whom the primary supervisor may choose to delegate certain supervisory responsibilities.

Disciplinary Action: Any action taken by a regulatory authority which finds a violation of a statute or regulation that is a matter of public record.

Disciplined Practitioner: A psychologist under supervision that is mandated following a determination by a regulatory authority that the psychologist has violated ethical or practice standards or relevant laws.

Immunity: Legal protection from liability, obligation, or penalty.

In-person: Interactions in which the supervisor and supervisee are in the same physical space and does not include interactions that may occur through the use of technologies.

Liability: Responsibility for the consequences of one's acts or omissions, enforceable by disciplinary sanction, civil remedy (damages), or criminal punishment.

Licensed: Licensed denotes having a license issued by a board of psychology which grants the authority to engage in the practice of psychology as permitted by the act and the rules and regulations of that board. The terms registered, chartered, or any other term chosen by a jurisdiction used in the same capacity as licensed are considered equivalent terms.

Licensee: The psychologist (or other psychological practitioner) who is the subject of mandated supervision or monitoring. Terms such as registrant are interchangeable with licensee.

Mandated Supervision: Supervision that is prescribed by the regulatory authority as a result of a finding that a psychologist has violated relevant laws or ethic codes (Thomas, 2014).

Monitored Practice: The practice of a psychologist that is being monitored following an order from a regulatory authority.

Monitored Practitioner: Any psychological psychologist that is having his/her practice monitored, following an order from a regulatory authority.

Monitoring: Mandated oversight of professional practices by a monitor, in various daily activities (e.g., record keeping, billing, substance use).

Primary Supervisor: A licensed psychologist who has professional responsibility for the services provided by supervisees and the quality of the supervised experiences as described in these guidelines.

Regulatory Authority: The jurisdictional psychology licensing board (United States) or college of psychologists (Canada).

Supervised Practice: The practice of a psychologist that is being supervised following an order from a regulatory authority.

Supervised Practitioner: Any psychological psychologist that is having his/her practice supervised, following an order from a regulatory authority.

Telepsychology Supervision: A method of providing supervision using telecommunication technologies. Telecommunications is the preparation, transmission, communication, or related processing of information by electrical, electromagnetic, electromechanical, electro-optical, or electronic means (Committee on National Security Systems, 2010). Telecommunication technologies include but are not limited to telephone, mobile devices, interactive videoconferencing, e-mail, chat, text, and Internet (e.g., self-help websites, blogs, and social media). The information that is transmitted may be in writing or include images, sounds, or other data. These communications may be synchronous, with multiple parties communicating in real time (e.g., interactive videoconferencing, telephone), or asynchronous (e.g., e-mail, online bulletin boards, storing and forwarding of information) (APA, ASPPB and APAIT Telepsychology Guidelines 2013).

Mandated Supervision for Discipline

Mandated supervision for discipline is a subset of supervision in general and refers to those times when supervision is part of a disciplinary order for a professional usually given by his/her regulatory authority. Supervision, a distinct, competency-based professional practice, is usually thought of as a collaborative relationship between supervisor and supervisee that is facilitative, evaluative, and extends over time. It has the goal of developing and enhancing the professional competence of the supervisee through observation, review of case files, feedback and guidance for advancing the quality of services provided to the client, and providing a gatekeeping function for independent professional practice (Bernard & Goodyear, 2014; Falender and Shafranske 2004). However, in contrast, objectives for mandated supervision for discipline “include the rehabilitation of the professional and the protection of the supervisee’s clients and the public” (Thomas, 2014, p. 1105). Thus, the goals of mandated supervision are comparable to those of any clinical supervision, however may focus more on remediation of deficits in competence, that is, helping the professional bring competence back to previously acquired acceptable levels, and less on developing, enhancing or improving competence beyond minimal standards. Additionally, the primary focus of mandated supervision is on maintaining public protection by ensuring that the quality of services offered to individual clients are within an acceptable range.

The ultimate effectiveness of supervision depends on a broad range of factors, including the competence of the supervisor, the nature and quality of the relationship between the supervisor and supervisee (ensuring that the mandated supervisee has not been a previous supervisee, supervisor, or client of the individual providing mandated supervision), and the readiness of the supervisee (Falender & Shafranske, 2007) to accept and benefit from the supervision. It is important to differentiate supervision from psychotherapy and consultation (Falender and Shafranske 2004), and in the case of mandated supervision, important to recognize that the client of the supervisor is not the supervisee, but the regulatory authority that has mandated the supervision. The supervisee is the recipient of the professional service of supervision, but the supervisor ultimately is accountable to the regulatory

authority. The supervisor has ethical and professional responsibilities to multiple parties in the context of mandated supervision. Although the supervisor is responsible to the regulatory authority, they also retain ethical and professional duties to the psychologist who is being disciplined, to the profession at large, and, as in professional supervision in training and education, to the clients of that psychologist.

Immunity and Liability

Supervision may involve direct and vicarious legal and professional liability (Barnett et al., 2007; Disney & Stephens, 1994; Saccuzzo, 2002; Thomas, 2010). Legal liability (in this context referring to potential malpractice or civil lawsuits) is determined by the judicial system. However, professional liability (in this context referring to ethical or licensing complaints) is within the domain of the profession and in this case, the regulatory authority. Thus, the supervisor must be approved by the regulatory authority and may need to answer various questions regarding (a) his/her supervision competence, (b) expertise in the clinical services that will be supervised, and (c) previous relationship (if any) with the supervisee, among others. The supervisor also must follow directions from the regulatory authority on such matters as frequency of supervision meetings, overall length of time of the supervision, the precise nature of what is discussed (e.g. record keeping, boundaries), progress notes for the supervision sessions, and reporting requirements. If the supervisor concludes that changes need to be made in the directions received from the regulatory board, the supervisor should provide an opinion regarding the necessary changes and request board approval.

Potential supervisors are often and rightfully concerned about the possibility of professional and personal liability arising from their supervision of disciplined practitioner. As in the case of supervision for education and training, supervisors of disciplined practitioners may be subject to liability for their actions towards their supervisee, and from actions that their supervisee takes toward the supervisee's clients (often called vicarious liability). It would be wise for psychologists to check with their malpractice carriers to determine the level of coverage they

may have for these activities, prior to accepting the role of mandated supervisor. It is also recommended that prior to ordering mandated supervision of a licensee, the regulatory authority ensure that there are supervisors who are qualified, available, and willing to serve in such a capacity.

Generally, supervisors functioning on behalf of a regulatory authority should be considered as qualifying for similar jurisdictional provisions for immunity that are offered to regulatory authority members themselves. As mandated supervision is by definition not a voluntary endeavor on the part of the supervisee, and is the result of some kind of misconduct by the supervisee, there is the possibility that the supervisee will be discontented with the supervisor at some point in time. Some jurisdictions provide for such immunity. For example, the statutes in Georgia have the following:

“43-39-20. Immunity from civil and criminal liability for certain good faith actions

Any psychologist licensed under this chapter who testifies in good faith without fraud or malice in any proceeding relating to a licensee's or applicant's fitness to practice psychology, or who in good faith and without fraud or malice makes a report or recommendation to the board in the nature of peer review, shall be immune from civil and criminal liability for such actions. No psychologist licensed under this chapter who serves as a supervising or monitoring psychologist pursuant to a public or private order of the board shall be liable for any damages in an action brought by the supervised or monitored psychologist, provided that the supervising or monitoring psychologist was acting in good faith without fraud or malice.”

It is recommended that jurisdictions adopt a law or rule to this effect where possible. This level of immunity may make it more likely that qualified psychologists would be willing to serve as mandated supervisors. This kind of immunity does not negate the possibility of complaints being made, however, assuming that the supervisor has acted in good faith and within ethical

and legal guidelines, the supervising or monitoring psychologist who is the subject of such complaints to licensing boards (or to the courts in terms of civil suits) has statutory protection.

Risk Analysis

Usually, regulatory authorities will order supervision for a disciplined practitioner after a determination had been made of the practitioner's amenability to supervision and to determine if the nature of the offense is appropriate for this type of intervention. Typically, it is wise for the supervisor to have access to that evaluation in order to help formulate the content of the supervision sessions. However, it is not wise and in fact contraindicated for the evaluating psychologist (if there was one) and the supervisor to be the same person.

There is little research data available to assist in determining the characteristics of practitioners who would be likely to benefit from mandated supervision, or the kind of infractions that are amenable to mandated supervision. Plaut (2001) suggested that jurisdictions establish panels of potential supervisors that would be utilized when needed. Cobia and Pipes (2002) offer theoretical support for mandated supervision through an analysis of developmental models of supervision, interpersonal and social learning theory. Schoener (1995) describes a system of determining when to do an assessment for professionals with boundary violations in order to recommend rehabilitation. This system includes an analysis of the following factors: "1) the practitioner admits wrongdoing and understands that there was harm to a client; 2) the practitioner believes that he/she has a problem that requires rehabilitation; 3) the practitioner is willing to agree to the assessment and realizes that the outcome may not be favorable; or 4) there is general agreement as to the essential facts of the case" (p. 97). Others (Thomas, 2013) have identified practitioner characteristics such as serious character pathology which may make supervision ineffective.

Case Supervision versus Monitoring

There are two types of mandated supervision that these guidelines will address: mandated case supervision (or clinical supervision) and mandated monitoring (or administrative

supervision). Many authors have distinguished between case supervision and monitoring (Kress, et al., 2015; Schoener, 2008; Cobia and Pipes, 2002). For these guidelines, mandated case supervision refers to situations where the supervisee meets regularly with a supervisor to discuss case related material in order to remediate competence deficits, increase insight, and promote behavior change for the ultimate purpose of assisting the supervisee to provide ethical and competent services to clients. This type of supervision may also include a review of records or reports, discussions of informed consent or confidentiality, and other case specific material. On the other hand, mandated monitoring refers to oversight of professional practices by a supervisor (who may or may not be a psychologist) in areas such as record keeping, billing, or other professional practices. While behavior change (e.g. keeping better records, or more accurate billing) is often a goal of mandated monitoring, it does not involve a discussion or review of clinical case material. At times, mandated monitoring is utilized for cases involving substance misuse as well.

Mandated Case Supervision

Competencies

Once a regulatory authority has determined that mandated case supervision will be utilized as a rehabilitation mechanism for a practitioner, the next task is to determine the availability of a supervisor. Some regulatory authorities select the supervisor:

1. From a prequalified list of possible supervisors;
2. From contacts members of the regulatory authority have acquired through professional experience;
3. From names, to include letters and vitas highlighting relevant credentials, the disciplined psychologist submits; and
4. By requiring the disciplined psychologist to arrange his/her own supervisor.

Selection methods one (1) and two (2) above are the recommended methods for selection of

the supervisor. The supervisor must be competent in both supervision, and in the types of clinical cases that will be supervised. While the goals of this supervision are two-fold (protection of the public and rehabilitation of the practitioners), the objectives of the supervision according to Thomas (2014) are to help the practitioners to accomplish the following:

“Formulate a realistic and comprehensive conceptualization of the personal and professional factors that set the stage for errors (Thomas, p. 187),

Examine both the actual and potential impacts of their ethical violations on clients, students, supervisees, and others,

Generalize what they are learning in supervision to current cases, recognizing thematic similarities to the complaint case,

Recognize events, circumstances, and subjective experiences signaling that they may be at risk for impaired objectivity and effectiveness (Thomas, p. 188).

Another objective of disciplinary supervision is to help supervisees develop and implement a plan to minimize the likelihood of further violations.”

The competencies needed to most effectively and ideally meet these objectives include:

1. Competence in the process of supervision as indicated by knowledge of supervision methods and theory and experience in providing supervision;
2. Competence in the kind of cases and practice areas that will be supervised as indicated by education, training and experience;
3. Competence in a variety of ethical and legal aspects of professional practice as indicated by education, training and experience (supervisors should not themselves have been disciplined by a board or ethic committee for violations of

rules for example); and

4. An appreciation for the special challenges that come with providing mandated supervision including the challenges that disciplined psychologist faces (emotional, professional, legal, financial), as well as the potential challenges that the supervision process faces (boundary issues, role confusion, transference and countertransference) (Thomas, 2014). The regulatory authority may want to speak directly with a potential supervisor to determine if he/she has such an appreciation.

Qualifications

Supervisors shall:

1. Be licensed at the doctoral level for the independent practice of health service psychology by a jurisdictional regulatory board that is a member of ASPPB and is responsible for the licensing of psychologists regardless of setting; Preferably the supervisor and the supervisee should be licensed by the same regulatory authority, however, there may be circumstances where an appropriate supervisor cannot be found within the same jurisdiction;
2. Abide by the ethical principles, codes of conduct, and jurisdictional statutes and regulations pertaining to the practice of psychology;
3. Have the knowledge of relevant theory and scientific literature related to supervision;
4. Have training, knowledge, skill, and experience to competently render any psychological service undertaken by his/her supervisees;
5. Have current training, knowledge, and skill in providing competent supervision. This is typically met by a graduate level academic course (at least one credit hour) from a regionally accredited institution of higher learning of a least one

- quarter/semester, or supervised experience in providing supervision of at least two hours a month of supervision over at least a six-month period of time; or at least nine hours of sponsor approved (e.g., APA) continuing education;
6. Not ever have been under regulatory authority discipline, or found to have been in violation of ethical codes from a regional or national ethics committee. In the event that disciplinary action is taken against the supervisor during the supervisory period, the supervisor shall immediately notify the regulatory authority and the regulatory authority will evaluate the need for the supervisor to be replaced; and
 7. Disclose to the regulatory authority the nature and extent of any previous relationship with the supervisee.

Responsibilities of Supervisors

Supervisors shall:

1. Assume professional responsibility for the work of the supervisee;
2. Enter into a supervision contract with the regulatory authority and the disciplined psychologist which details all of the relevant parameters, including the length of time for the supervision, the exact nature of the supervision (frequency, record review, live observation, informed consent to clients, record keeping, reporting requirements...) and co-signing reports;
3. Ensure that the supervisee's duties and services are consistent with his/her level of competence, and meets the specific requirements of the regulatory authority's disciplinary order or agreement;
4. Ensure that the supervisee informs his/her clients of the supervision and obtains the appropriate informed consent to that effect;
5. Intervene in or terminate the supervisee's activities (with corresponding notification to the regulatory authority) whenever necessary to protect the client from harm and to ensure the protection of the public;

6. Abide by the reporting requirements as mandated by the regulatory authority in a timely manner;
7. Subject to regulatory authority approval and appropriate consent, delegate supervision to another licensed health professional whose competence in the delegated areas has been demonstrated by previous education, training, and experience when
 - A) The service needs of the client are beyond the area of expertise of the supervisor, or
 - B) It becomes necessary to provide for a qualified supervisor in case of interruption of supervision;
8. Review and approve supervisee's progress notes and assessment reports as indicated by the requirements of the regulatory authority order;
9. Personally observe recorded (which includes both video and audio content), or live client sessions as indicated by the regulatory authority disciplinary order;
10. Ensure the supervisee has knowledge of relevant theory, scientific literature and cultural or contextual factors related to the area of supervised practice;
11. Be available to the supervisee in person or electronically be reasonably available when the supervisee is rendering professional services, or arrange the availability of a qualified supervisor;
12. Maintain professional boundaries by managing multiple relationships and not enter into sexual or exploitative relationships, or other relationships with the supervisee that would interfere (or potentially to be seen to interfere) with the supervisor's objectivity and ability to provide effective supervision; and
13. Generate and maintain records regarding dates, times and duration of scheduled supervision as well as an accurate summary of the supervision and the supervisee's competence as indicated in the regulatory authority disciplinary order.

Monitoring

In addition to the more traditional supervisory relationship that may arise out of disciplinary actions, some cases call for a different approach to oversight of a disciplined practitioner's behavior and practice. In mandated case *supervision*, the goals include the establishment of a supervisory relationship within which the disciplined psychologist can reflect upon new information and gain insight into her/his behavior, attitudes, and beliefs to result in a change in behavior and practice. On the other hand, *monitoring* (sometimes called *administrative supervision*) involves the observation and evaluation of specific operational facets of a psychologist's practice, to prevent further violations (Walzer & Miltimore, 1993; Kress, et al., 2015). Walzer & Miltimore (1993) distinguish supervision from monitoring by operationalizing monitoring's tasks as including "a review or proctoring of ... aspects of someone's practice (records, appointment books, case inventory), and in the case of substance abuse, it may even involve collecting random blood or urine samples". Monitoring's importance and benefit lie in the vigilant oversight provided by the monitor, to ensure additional violations are not being committed. Although monitors may provide feedback to the disciplined psychologist, unlike supervision, the goal of monitoring is not to foster insight, but to ensure additional violations are not being committed (Kress, et al., 2015). Given the relatively unique mandates of these two (2) disciplinary outcomes, the competencies/responsibilities required of each may also differ.

Competencies and Qualifications of a Monitor

Monitors are not charged with enhancing insight by a disciplined psychologist. As such, it is less important that he/she be a licensed mental health care provider. However, licensing in an alternative discipline may be required, depending on the tasks or behaviors being monitored (e.g., collection of urine samples may require an appropriate medical professional). Regardless, it is crucial that he/she possess specific competencies and qualifications unique to the mandated tasks. Little empirical research has been done on this matter, and therefore the

following qualifications, competencies, and responsibilities are offered as guidelines (and potentially stimuli for research) into what constitutes an effective monitor.

It is perhaps obvious, but bears stating, that a competent monitor will be conversant in the issues/matters under scrutiny. This is to ensure fidelity to the task at hand and (if necessary) to ensure findings can withstand external/judicial scrutiny. As an example, if deficient record keeping is a focus of monitoring, the monitor should have a demonstrated history of competence in this skill. Alternatively, concerns over improper billing could argue for a monitor competent in matters related to bookkeeping or accounting. In this regard, the competencies demanded of a monitor are akin to those of a supervisor for education and training, who must be competent in the knowledge area and skills being developed by the trainee.

A competent monitor must be an individual who is well organized, attentive to detail, and thorough in record keeping. Clear communication skills are important, as a monitor will have the duty of regularly communicating findings to a regulatory authority (see below).

Interpersonally, a competent monitor must be able to hold firm to the assignment, in the face of what might prove to be resistance from a disciplined psychologist. For example, this resistance may come from fear of further discoveries or resentment over what might be perceived to be an intrusion into his/her professional life and practice. Accordingly, skills in effectively communicating empathy/understanding of the challenges posed to the monitored psychologist and defusing conflict may also be useful. As well, given the nature of the duties assigned to a monitor, he/she must be willing and able to travel to the disciplined psychologist's office as often as required, to monitor records.

In addition to the competencies required for effective and vigilant record keeping, additional and specialized competencies may be required, that are case-specific. For example, in the case of substance misuse, the knowledge and ability to acquire valid and reliable blood and urine samples may be necessary. Specialized credentialing and/or licensing may be necessary in such cases, and regulatory authorities are encouraged to ensure these requirements are met, to address potential efforts to challenge or invalidate findings. Alternatively, a clear understanding

of a regulatory authority's regulations and rules may be required, in matters involving (for example) improper advertising.

To summarize, an effective monitor will have the following qualifications:

1. Possess a body of knowledge relevant to the activities being monitored;
2. Possess the knowledge and skill required to gather required data from what might be record stores of varying degrees of organization, accuracy, and completeness;
3. Know when to seek additional input/consultation;
4. Be capable of maintaining a balance between gathering the data required, while respecting the requirements of client confidentiality and psychologist autonomy.
5. Possess the flexibility and ability to travel to the Psychologist's office as often as required, to carry out the monitoring tasks.

Responsibilities

The responsibilities of a monitor will, in some cases, overlap with those of a mandated case supervisor, however in other instances are stand alone and unique to the task of monitoring. When a psychologist's activities are being monitored, it is essential that clients are notified that there may be some limits to confidentiality and that any and all records may be the subject of such monitoring and that informed consent is sought for this activity. A record of this discussion and release should be contained within each client file. Depending on the activity being monitored, either specific clients will need to be notified of the monitor's activities, or a broader notification may need to be circulated to all clients of the monitored psychologist. While the monitor is not responsible for notifying clients of these arrangements, he/she should ensure such notification has been provided.

Whatever activities are being monitored, a clear record of these must be maintained by the monitor, bearing in mind that the record may become part of the evidence used at a future

disciplinary hearing. Whether these reports are shared with the monitored psychologist will be a case-specific decision. Writing in these reports must be clear, unambiguous, and legible. If reports are rewritten, the monitor is advised to either retain the original or make detailed notes as to why it was rewritten and the disposition of any previous versions.

As is the case for supervisors, monitors will need to be available, on a reasonable basis, to the monitored psychologist. However, unlike the supervisory relationship formed between a psychologist and his/her supervisor, the connection between a psychologist and his/her monitor is less personal and in depth, suggesting less of a need for frequent or urgent availability. If contacted outside of regular monitoring visits, a monitor is encouraged to accurately and completely document the reason for the contact, the outcome of the contact (including any advice provided), and whether any further action (e.g., contacting the regulatory authority) was taken.

As is the case when disciplined psychologists are being supervised, monitors must ensure that appropriate boundaries are maintained between themselves and those being monitored. Accordingly, as highlighted in the ASPPB Supervision Guidelines for Education and Training leading to licensure as a Health Service Provider (ASPPB, 2015), monitors should maintain professional boundaries by managing multiple relationships and not enter into sexual or exploitative relationships, or other relationships with the supervisees, that would interfere (or potentially be seen to interfere) with the supervisor's objectivity and ability to provide effective supervision.

Summarizing then, the responsibilities of a monitor will include the following:

1. When indicated, ensure appropriate and case-specific notification of monitored activities is provided to clients;
2. Maintain accurate, legible, and complete records of monitored activities;
3. Report findings to the regulatory authority;
4. Be reasonably available to the monitored psychologist;

5. Maintain professional boundaries by managing multiple relationships and not enter into sexual or exploitative relationships, or other relationships with the monitored psychologist that would interfere with the monitor's objectivity and ability to provide effective monitoring; and
6. Comply with tasks as prescribed by the regulatory authority's disciplinary order.

Regulatory Authority Responsibilities

A regulatory authority's mandate is to protect the public through the proper regulation of the practice of psychology. This is achieved through evaluating an applicant's education and training credentials as well as continued enforcement of established rules and regulations. If a licensed psychologist is found to be in violation of those rules and regulations, a disciplinary case may be filed. If the case is found actionable, supervision may be recommended as a form of remediation.

To allow all parties involved to reach a full understanding of the requirements and needs of a particular supervisory arrangement, a regulatory authority must present a disciplinary order (or consent agreement) that will inform all parties of the expectations of the supervision. This disciplinary order will be the official document, provided to both supervisee and the supervisor and will outline the regulatory authority's sanctions. Prior to the submission of the disciplinary order, a full assessment of the facts of the case, the disciplined psychologist's evaluation (if any completed during the disciplinary case) and work history should be reviewed by the regulatory authority to measure the scope and necessity of the required supervision. In addition, to the evaluation of the disciplined psychologist, there are additional factors that inform the development of the disciplinary order. The qualifications or specialties needed by the supervisor, as well as the specifics of the supervisory arrangement, should be reviewed by the regulatory authority and then become a part of the disciplinary order.

The goals of mandated supervision are the protection of the public, a return of the disciplined psychologist to full unrestricted practice as soon as possible, and to limit the likelihood of any

future violations. A minimum, but no maximum, supervision period should be set by the regulatory authority. The order should include among other items, the specific goals of the supervision as well as if any further evaluations would be required during this time (e.g., a final evaluation for fitness to practice). If the regulatory authority determines over the period of supervision that it is progressing well, there may be consideration of a gradually decreasing number of supervisory meetings and reporting requirements specified.

The selection of a supervisor can be a challenging task. As stated in the section regarding Case Supervision, there are various factors to be considered in selecting the supervisor. If a pool method is chosen, adding a question on the renewal form requesting a licensee to note his/her interest in providing mandated supervision along with his/her particular area of practice/expertise may be a way to generate qualified psychologists to provided mandated supervision. It is the role of the regulatory authority to ensure the best qualified supervisor is selected.

To implement the provisions of the mandated supervision or monitoring, a written contract should be entered into between the disciplined and supervising psychologists with the approval of the regulatory authority. More information about what should be included in that contract can be found in the Supervision Contract section of these guidelines. A clear and comprehensive contract will ensure that all parties involved understand the parameters of the supervisory relationship. If the facts of the disciplinary case are serious enough, the regulatory authority may need to consider the possibility of a temporary suspension while developing the disciplinary order and selecting the supervisor.

An added difficulty in finding qualified professionals to provide supervision in many cases is the added professional risk related to this type of supervision. Unless otherwise stated in a regulatory authority's law, the supervisor could be at risk of malpractice lawsuits or regulatory authority complaints. As stated in the section regarding Mandated Supervision for Discipline, it is recommended that a rule or regulation be developed, addressing the "immunity" of

professionals working within the purview of the regulatory authority. In some jurisdictions, a statement may also be added to the disciplinary order that allows for this immunity.

Reporting Requirements

Essential to the success of the supervision or monitoring is the requirement for submission of evaluator reports to the regulatory authority office by the supervisor or monitor. Regulators expect reports from both supervisors and monitors, with these reports coming at predetermined intervals as specified in the disciplinary order (Thomas, 2014). Whereas a supervisor's report will typically be broader in the issues it addresses, a monitor's report will be more task-specific and mirror the specific items and issues under scrutiny. In most cases, this will allow the monitor's report to be briefer than that of a supervisor. For example, a monitor may be asked to count the number of clients seen by a psychologist in any given time frame. Alternatively, ensuring follow-up letters are sent to a client's physician may be the object of monitoring. In both cases, simple counts/tallies of these activities will likely suffice. Some jurisdictions have already developed forms for this purpose and Appendix II contains one such form provided by the California Dept. of Consumer Affairs Board of Psychology. Review of this form highlights its specificity and reporting requirements. Regulators are encouraged to develop forms incorporating clear instructions to the monitor as to the tasks being required. This will help to ensure uniformity and consistency across monitored psychologists and avoid having findings challenged based upon claims of bias or inconsistent application of monitoring techniques across practitioners. Disciplinary orders should clearly identify the types of reports required of the monitor, including:

1. The frequency of reporting required;
2. The duration of monitoring;
3. The information to be included in each report;
4. Whether the report may be shared with the monitored psychologist, and

5. Limits on legal liability of the monitor, along with appropriate releases from liability.

Monitors are responsible for the timely submission of these reports to the regulatory authority.

The reports from the supervisor to the regulatory authority should be submitted on an established time frame (e.g., monthly, bi-monthly, quarterly, etc.) This will allow the regulatory authority to evaluate progress, and if any changes to the supervision need to be made. If there are any issues of concern that appear during the supervision, the regulatory authority will need to be notified promptly, to allow for evaluation and amendments to the parameters of supervision, to allow for possible suspension of supervision or to require some form of treatment of the disciplined psychologist if necessary. Reports submitted on the requested due date should be submitted to the regulatory authority office or designated official for review. The designated official should be available to review the information in a timely manner. The review should verify that the report meets the requirements outlined in the disciplinary order as agreed to by the supervisor and the regulatory authority, as well as document the progress of the disciplined psychologist. If the report does not meet these requirements, deficiencies should be identified and addressed as soon as possible.

Reports should include the following:

1. A review of the supervision process including dates and times of supervision;
2. A review of the status of the goals of the supervision and how they are being met; and
3. At times, a recommendation on continued supervision. If the minimum time period has passed and the supervisor concludes the supervision is no longer required for rehabilitation or public protection, a recommendation for the cessation of supervision should be made to the regulatory authority through the report.

A template of such a report can be found in Appendix II. If the recommendation to cease supervision has been made, the regulatory authority can evaluate the reports as a whole to determine if sufficient rehabilitation has occurred. Any change of supervision should be accomplished through a public order and brought to the regulatory authority at a meeting. It is through an open and fair process that the regulatory authority will be able to protect the public and fully regulate the profession. In addition to rehabilitation, the supervision conducted by the licensee's peers could allow for a growth in competence practice and knowledge. By inclusion of immunity rules, a professional is allowed to provide supervision to troubled colleagues without fear of regulatory or legal action from the supervisee. It also opens opportunities to the regulatory authority for the highest qualified professionals to supervise the disciplined psychologist. Continued communication with the regulatory authority, supervisor/monitor and disciplined psychologist throughout the supervision period, through scheduled reports and feedback, will provide all parties the greatest chance of success.

Supervision/Monitoring Contract

A written contract should be entered into and signed by the disciplined psychologist and the supervisor. Please see Appendix V for an example of the supervision contract. Prior to the initiation of supervision/monitoring, the contract should be reviewed, approved, and signed by an appropriate regulatory authority representative and include (but not be limited to) the following elements:

1. General:

- A) Statement of the supervisor's legal liability and immunity;
- B) Anticipated duration of the contract;
- C) Length and frequency of supervision sessions;
- D) Details of payment for supervision/monitoring:
 - i. The disciplined psychologist is responsible for payment;
 - ii. Amount;
 - iii. Method of payment;

- iv. Due date(s) for payment;
- v. Failure of the disciplined psychologist to pay the supervisor is considered a violation of the regulatory authority disciplinary order for which additional sanctions may be assessed.

E) Goals and objectives of the supervision/monitoring:

- i. Protection of the welfare of the disciplined practitioner's clients;
- ii. Assessment of the disciplined practitioner's readiness for unsupervised/unmonitored practice;
- iii. Professional development of the disciplined practitioner;
- iv. Remediation of areas in which the disciplined psychologist is not meeting criteria for competence or ethical standards;
- v. Preparation for unsupervised/unmonitored practice; and
- vi. Any specific goals and objectives specified in the regulatory authority disciplinary order.

2. Job duties and responsibilities of the disciplined practitioner:

- A) The psychological services to be offered;
- B) Maintenance of adequate records regarding services provided;
- C) Informing supervisor of all essential clinical and ethical elements of all cases being supervised/monitored, including disclosing all ethical, legal and professional problems; and
- D) Adhering to laws, regulations, ethical standards, and agency rules governing psychological practice, including:
 - i. Informing clients of disciplined practitioner's supervised/monitored status;
 - ii. Obtaining informed consent to share information about the psychological service with the supervisor.

3. Roles and responsibilities of supervisor:

- A) Assuming professional responsibility, and if applicable, legal responsibility, for services offered by the disciplined practitioner;

- B) Informing disciplined psychologist of supervisor's licensure status and qualifications;
- C) Discussing with the disciplined psychologist relevant ethical, legal and professional standards of conduct, particularly with regard to the issues that serve as the basis for mandated supervision/monitoring;
- D) Establishing the format of supervision to be provided;
- E) Ensuring that the disciplined psychologist informs his/her clients of the supervision and that clinical materials will be shared with mandated supervisor and obtains the appropriate informed consent to that effect;
- F) Writing and filing report(s) with the regulatory authority regarding the disciplined practitioner's progress and competence; and
- G) Documenting supervision.

Additional points to consider are found in the Roles and Responsibilities of the Supervisor in Case Supervision section above.

4. Contingency plans for dealing with unusual, difficult, or dangerous circumstances:

- A) Criteria about what constitutes an emergency and procedures to follow in an emergency;
- B) Availability of the supervisor for emergency supervision;
- C) Legal reporting requirements for both supervisor and disciplined practitioner; and
- D) Court involvement.

5. Resolving differences between supervisor and disciplined practitioner:

- A) How differences in opinion or approach should be handled; and
- B) How grievances can be managed or means of alternative resolution.

6. Informed consent regarding:

- A) Limits to confidentiality regarding the client including but not limited to clinical materials, billing practices, demographic data, etc;

- B) Limits to confidentiality regarding information provided by the disciplined practitioner;
- C) Financial arrangement for supervision; and
- D) Requirements of supervision, which may include observation and review of records.

7. Grounds for termination of supervision.

Unique Challenges in Mandated Supervision

As with supervision for training, supervision of disciplined practitioners has many unique challenges.

Unable to Identify Supervisor/Monitor

As stated in the section addressing Case Supervision, regulatory authorities utilize a variety of methods to select an appropriate supervisor and/or monitor when requiring mandated supervision. Even applying these variations during the selection process may not ensure that an appropriate supervisor/monitor can be located. Some examples of when other means may be needed to fulfill the requirement of mandated supervision are:

1. The need for a supervisor/monitor trained in a specialized area;
2. A small geographic pool of available supervisors due to size of the jurisdiction;
3. A well-known professional who is known to (and admired) by or has multiple relationships with most professionals in his/her area; and
4. No psychologist willing to provide supervision or monitoring of the disciplined practitioner.

If one of the above examples exists, there are several methods that can be employed to find appropriate, qualified supervisors/monitors. Three main options are: (a) utilizing a psychologist licensed outside the jurisdiction of the disciplined practitioner, (b) utilizing a licensed professional from an allied mental health field, or (c) employing an outside monitor/company.

When reviewing the use of a psychologist licensed outside the jurisdiction, it is important to consider why this need exists and whether the supervisor/monitor will need to obtain a temporary license prior to beginning the supervision/monitoring. In smaller jurisdictions, all potential supervisors may be known by the disciplined psychologist or may not possess the required expertise or competency needed to provide this type of supervision (Thomas, 2010) so employing a psychologist from outside the jurisdiction may be needed to ensure proper remediation of the issues addressed in the disciplinary order.

If utilizing a psychologist outside of the jurisdiction is not an option, use of a professional in an allied mental health profession may be the best alternative. Although little research exists to demonstrate the success rate of cross-disciplinary supervision, the research that does exist highlights factors that may provide a challenge to cross-disciplinary supervision. Those factors are:

1. Professional role or training differences;
2. Lack of shared theories and/or language;
3. Organizational differences; and
4. Exposure of weakness outside the profession (Townend, 2005).

To remediate the factors identified above, it is important to have a clear, concise supervisory contract (Hutchings, Cooper, & O'Donoghue, 2014) in place that addresses:

1. Scope of the supervision;
2. Inclusion of and requirement to be familiar with all ethics codes for pertinent professions;
3. Regulatory authority requirements regarding type of supervision and reporting requirements; and

4. Experiences of past supervisions by all individuals involved (O'Donoghue, 2004).

The final option, employing an outside company, may prove useful for mandated monitoring rather than mandated supervision. Some infractions where an outside monitoring company has been used are insurance fraud, record-keeping deficiencies, and drug and alcohol impairment. An outside monitor/company must have an in-depth knowledge of the regulatory process and its role to ensure protection of the public. The monitor/company employed provides oversight to ensure compliance with components of the disciplinary order and to reduce the risk for further misconduct (DiCianni, 2008). When employing an outside monitoring company, it is important to specify the company and the monitoring and reporting requirements in the disciplinary order.

Telepsychology Supervision

Another unique challenge regarding mandated supervision comes from the use of telepsychology supervision. Several factors contribute to the need to consider telepsychology supervision as an option for mandated supervision. Time, resources, and location have been identified as reasons to consider telepsychology supervision (Deane, et al., 2015). Research shows that rural practitioners may benefit from being matched with other rural practitioners who understand the unique challenges facing rural practitioners (Xavier, Shephard, & Goldstein, 2007). Before utilizing telepsychology supervision, the following should be considered:

1. When telepsychology supervision is appropriate;
2. When telepsychology supervision is not appropriate; and
3. What type of technology is appropriate and how to manage technology failures.

Before telepsychology supervision can be considered, the regulatory authority needs to acknowledge when this type of supervision could be employed for mandated supervision. It is important that both the supervisor and the disciplined psychologist are adept in this mode of delivery of supervision and feel that the supervision provided via tele-means will meet the same objectives as that of face-to-face supervision. Once telepsychology supervision has been

deemed a viable option for providing mandated supervision, the merits of the specific case must be reviewed by the regulatory authority to ascertain whether this particular case lends itself to telepsychology supervision. Since practice monitoring may involve such activities as physical review of records, cases requiring that type of monitoring may not be well suited to telepsychology supervision.

As stated above, it is of the utmost importance that the regulatory authority reviews each case prior to authorizing telepsychology supervision. If the case review shows that telepsychology supervision can be utilized for mandated supervision, the regulatory authority needs to consider the following when setting up the supervision requirements:

1. The supervisor must be licensed;
2. The supervisory practice must be in compliance with statutes and regulations of the jurisdiction of the disciplined psychologist;
3. Both parties must be competent to use the technology being utilized;
4. Both parties must have access to acceptable and secure technology
5. No limitations for telepsychology supervision pertaining to the specific case (e.g., record reviews); and
6. No issues surrounding confidentiality, privacy and/or security.

The regulatory authority must specify in the disciplinary order what technologies it deems acceptable for telepsychology supervision. There are many web-based programs that make this type of supervision easier while still maintaining as much of the face-to-face benefits as possible. Although these web-based programs overall provide a viable option, it is important to note that some nuances of face-to-face supervision may be lost, such as details due to poor connection quality and body position and posture due to screen and camera locations. Also, telepsychology supervision may allow for multitasking during the scheduled supervision time, such as reviewing of emails, and web browsing (Deane, et al, 2015).

Data security must also be addressed in the disciplinary order. Research shows that even with security mechanisms in place, the weakest link is the users themselves (Deane, et al, 2015). The disciplinary order should specify what is acceptable regarding passwords, data storage, informed consent and record retention. Finally, telepsychology supervision should be provided in compliance with the supervision requirements of face-to-face supervision. All ethical and professional components of face-to-face supervision apply to telepsychology supervision as well.

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APPENDIX I

Sample Language for Disciplinary Orders regarding Selection of Approved Vetted Potential Supervisors/Monitors

Names provided by the Regulatory Authority

Respondent shall select a supervising psychologist from a list provided by the Board Chair. The supervising psychologist will be responsible for assisting and for advising Respondent.

Respondent shall present to the Board office a copy of the contract reflecting the supervision agreement entered by the Respondent and supervising psychologist no later than 30 days from the date the Board Chair provides the list of possible supervisors to the Respondent. After completion of the supervision, the supervising psychologist will submit a summary report to the Board.

Licensee Selects Supervisor

Licensee shall submit the curriculum vitae of his/her proposed professional consultant for preapproval by the Regulatory Authority within 30 days of the date this disciplinary order becomes effective. Licensee shall select a consultant with whom he/she has had no previous personal or professional relationship. The Regulatory Authority reserves the right to reject the consultant proposed by Licensee. If the Regulatory Authority rejects the consultant proposed by Licensee, the Regulatory Authority may require that Licensee submit additional names, or the Regulatory Authority may provide Licensee with the name of a consultant.

From Names, the Disciplined Psychologist Submits

Respondent will be required to meet with a Board-approved supervisor for at least one year. Respondent is to submit the names of three psychologists to the Board within 30 days of this disciplinary order. The psychologists submitted for approval should have competence in the same areas of practice and populations as the Respondent. The Regulatory Authority will then

choose one psychologist from this list or request additional names if none of those submitted meet with the Regulatory Authority's approval.

3rd quarter (July 1st – September 30th)

*Due on or before: October 7th

I certify, under penalty of perjury, that the foregoing information is true and correct and that I completed the above report. I understand that if I discover conduct, during record review, which indicates to me that the licensee is not safe to practice psychology, I must report it to the Board of Psychology. I understand and agree that copies of this Quarterly form, including copies of the signatures of the monitor may be used in lieu of original documents and signatures, and further, that such copies and signatures shall have the same force and effect as originals

Monitor's Name (please print)	Phone Number
Monitor's Signature	Date

To submit form: mail to address on the letterhead, or email to psychprobation@dca.ca.gov or fax to (916) 574-7321

Revised 8/2015

General Information

The monitor's role is to assist the Board in protecting the public. Equally important is the monitor's role in assisting the licensee, who may already be an experienced practitioner, to rehabilitate his/her skills by improving his/her techniques and by discontinuing the activities or behaviors that led to the discipline.

As a practice monitor, you must:

1. Have access to the licensee's client records by ensuring that the licensee has informed each of his/her clients that you may be reviewing their records and that a release is in the file,
2. Select, at random, the client files to be reviewed,
3. Review as many client files as possible in the time allowed,
4. Complete the quarterly reporting form and send it to the Board on a quarterly basis as indicated below, and
5. Notify the Board of any conduct you discover, during record review, which indicates to you that the licensee is not safe to practice psychology.

By completing the monitoring form and turning it in on time, you greatly assist the Board in its efforts to ensure consumer safety, and benefit the licensee by complying with his /her probationary order. You should know that it is ultimately the licensee's responsibility to ensure that your reports are submitted timely.

Your cooperation is sincerely appreciated. If you ever have any questions or need to report any concerns, please contact the Board's Probation Program at (916) 574-7235.

APPENDIX III

SAMPLES OF JURISDICTIONAL IMMUNITY LANGUAGE

Arizona

R4-26-310. Disciplinary Supervision; Practice Monitor

1. If the Board determines, after a hearing conducted under A.R.S. Title 41, Chapter 6, Article 10, after an informal interview under A.R.S. § 32-2081(K), or through an agreement with the Board, that to protect public health and safety and ensure a licensee's ability to engage safely in the practice of psychology, it is necessary to require that the licensee practice psychology for a specified term under another licensee who provides supervision or service as a practice monitor, the Board shall enter into an agreement with the licensee or issue an order regarding the disciplinary supervision or practice monitoring.

2. Payment between a licensee and supervisor or practice monitor.
 - A. A licensed psychologist who enters into an agreement with the Board or is ordered by the Board to practice psychology under the supervision of another licensee may pay the supervising licensee for the supervisory service;

 - B. A licensed psychologist who provides supervisory service to a licensed psychologist who has been ordered by the Board or entered into an agreement with the Board to practice psychology under supervision may accept payment for the supervisory service;

 - C. A licensed psychologist who enters into an agreement with the Board or is ordered by the Board to practice psychology under a practice monitor may pay the practice monitor for the service provided; and

- D. A licensed psychologist who provides practice monitoring to a licensed psychologist who has been ordered by the Board or entered into an agreement with the Board to practice psychology under a practice monitor may accept payment for the service provided.
3. A licensed psychologist who supervises or serves as a practice monitor for a licensed psychologist who has entered an agreement with the Board or been ordered by the Board to practice psychology under supervision or with a practice monitor is professionally responsible only for work specified in the agreement or order

Georgia

“43-39-20. Immunity from civil and criminal liability for certain good faith actions

Any psychologist licensed under this chapter who testifies in good faith without fraud or malice in any proceeding relating to a licensee's or applicant's fitness to practice psychology, or who in good faith and without fraud or malice makes a report or recommendation to the board in the nature of peer review, shall be immune from civil and criminal liability for such actions. No psychologist licensed under this chapter who serves as a supervising or monitoring psychologist pursuant to a public or private order of the board shall be liable for any damages in an action brought by the supervised or monitored psychologist, provided that the supervising or monitoring psychologist was acting in good faith without fraud or malice.”

Nevada

NRS 641.318 Immunity of certain persons from civil liability. In addition to any other immunity provided by the provisions of [chapter 622A](#) of NRS, the Board, a review panel of a hospital, an association of psychologists or any other person who or organization which initiates a complaint or assists in any lawful investigation or proceeding concerning the licensing of a psychologist or the discipline of a psychologist for gross malpractice, repeated malpractice,

professional incompetence or unprofessional conduct is immune from any civil action for that initiation or assistance or any consequential damages, if the person or organization acted without malicious intent.

NRS 622A.150 Immunity from civil liability.

1. A person who provides a governmental entity, officer or employee with any information relating to a contested case is immune from any civil liability for providing that information if the person acted in good faith and without malicious intent.
2. A governmental entity, officer or employee is immune from any civil liability for:
 - A) Any decision or action taken in good faith and without malicious intent in carrying out the provisions of this chapter or any law or regulation governing occupational licensing; or
 - B) Communicating or cooperating with or providing any documents or other information to any other governmental entity, officer or employee conducting an investigation, disciplinary proceeding or civil or criminal prosecution.

APPENDIX IV

EVALUATION TEMPLATES & PROCESSES

Sample Language for Psychologist Conducting Fitness for Practice Evaluation:

Thank you for agreeing to participate in the Board's process of assessing _____ in order to assist the Board in determining Dr. _____ fitness to practice psychology in (jurisdiction name). Enclosed for your information is a copy of Dr. _____ signed Release of Information as well as an Evaluation of Fitness for Practice Report template for you to use to provide information to the Board once your evaluation has been completed.

Please be advised that the final determination of the fitness to practice psychology is made by the Psychology Board. You, as the evaluator, have the responsibility to address the areas outlined in the enclosed report template. As such, you should not make recommendations in absolute terms with regard to such areas as periods of restriction, supervision, etc. If any questions arise in the process of evaluation, you may contact _____.

EVALUATION OF FITNESS FOR PRACTICE

PSYCHOLOGICAL REPORT

Name:

Licensure status:

DOB:

Date(s) of assessment:

Reason for referral:

Brief statement of the events leading up to the evaluation related to the presenting problem;
any current disciplinary action

Identifying information:

Demographic information; licensure history; areas of practice

Current social/employment status:

Marital status/history; employment history; social supports, social/leisure activities, and/or other coping strategies

Mental status examination:

Appearance; demeanor; affect; speech; etc.

Psychiatric history:

Summary of previous psychiatric problems; previous inpatient and/or outpatient treatment; results of any previous evaluations if available

Substance use/abuse history:

Past and current use of alcohol and/or other substance use; collateral sources used; associated psychosocial stressors

Relevant medical history/medical assessment/laboratory results:

Past and current medical status; evaluator may decide to request further medical assessment prior to releasing results

Relevant psychological history and psychological assessment:

Past and current psychological status; evaluator may decide to conduct formal psychological assessment as part of evaluation

Clinical impressions:

Summary of the evaluation; diagnostic impression, if applicable, with emphasis on reason for referral

Rehabilitative efforts undertaken:

Personal; professional; results

Risk assessment:

Detailed review of factors determined to increase/decrease risk of harm to the public or to self, as applicable

Considerations for the Board:

1. Issues for the Board to consider regarding what action(s) to take—may include, but not be limited to
 - A) Practice restrictions (e.g., populations worked with, areas of practice);
 - B) Practice oversight (e.g., monitoring/supervision of practice);
 - C) Rehabilitative issues (e.g., tutorials, psychotherapy, drug/alcohol testing and/or treatment)
2. Relapse risk

SUBSTANCE USE/ABUSE EVALUATION

PSYCHOLOGICAL REPORT

Name:

Licensure status:

DOB:

Date(s) of assessment:

Reason for referral:

Brief statement of the events leading up to the evaluation related to the presenting problem; any current disciplinary action

Identifying information:

Demographic information, licensure history, areas of practice

Current social/employment status:

Marital status/history; employment history; social supports, social/leisure activities, and/or other coping strategies

Mental status examination:

Appearance; demeanor; affect; speech; etc.

Psychiatric history:

Summary of previous psychiatric problems; previous inpatient and/or outpatient treatment; results of any previous evaluations if available

Substance use/abuse history:

Past and current use of alcohol and/or other substance use; collateral sources used; associated psychosocial stressors

Relevant medical history/medical assessment/laboratory results:

Past and current medical status; evaluator may decide to request further medical assessment prior to releasing results

Relevant psychological history and psychological assessment:

Past and current psychological status; evaluator may decide to conduct formal psychological assessment as part of evaluation

Clinical impressions:

Summary of the substance use/abuse evaluation; diagnostic impression, if applicable, with emphasis on reason for referral

Rehabilitative efforts undertaken:

Personal; professional; results

Risk assessment:

Detailed review of factors determined to increase/decrease risk of harm to the public or to self particularly relative to the individual's substance use/abuse status, e.g., involvement in a treatment program, 12-step program, etc.

Considerations for the Board:

1. Issues for the Board to consider regarding what action(s) to take—may include, but not be limited to,
 - A) Practice restrictions (e.g., populations worked with, areas of practice);
 - B) Practice oversight (e.g., monitoring/supervision of practice);
 - C) Rehabilitative issues (e.g., tutorials, psychotherapy, drug/alcohol testing and/or treatment)
2. Relapse risk

APPENDIX V

Sample Contract for Mandated Supervision/Monitoring For Discipline

1. General

- A) Supervisor's legal liability and immunity, or lack thereof.
- B) Disciplined psychologists responsible for paying for supervision/monitoring as follows:
 - i. Rate: \$___ per session.
 - ii. Method: (e.g., cash, personal check or money order).
 - iii. Due date: (e.g., conclusion of each session).
 - iv. Failure of the disciplined psychologist to pay supervisor is considered a violation of the regulatory authority order for which additional sanctions may be assessed.
- C) Contingency plans for dealing with unusual, difficult, or dangerous circumstances.
- D) Resolving differences between supervisor and disciplined practitioner.
- E) Grounds for termination of supervision.

2. Goals of Supervision

- A) Ensure welfare and protection of clients of the disciplined practitioner.
- B) Prepare disciplined psychologist for unsupervised/unmonitored practice.
- C) Remediation in the areas of _____.
- D) Specific goals and objectives specified in the regulatory authority order.

3. Structure of Supervision

- A) The supervisor will be _____, who will provide _____ hours of supervision per _____ for a period not less than _____ (information stipulated in the regulatory authority order).

- B) Structure of the supervision session: supervisor and disciplined psychologist preparation for supervision, in-session structure and processes, live or video observation ___ times per ____ (time period).
- C) Limits of confidentiality exist for disciplined psychologist disclosures in supervision (e.g., supervisor reporting to regulatory authority, upholding legal and ethical standards).
- D) Supervision records are available to regulatory authority.

4. Duties and Responsibilities of Supervisor

- A) Assumes professional responsibility for services offered by the disciplined psychologist (if applicable, note that supervisor also assumes legal responsibility).
- B) Supervises/monitors disciplined practitioner's practice in accordance with requirements set forth by the regulatory authority in the disciplinary order (list specifics from order).
- C) Ensures availability to the disciplined practitioner.
- D) Develops and maintains a respectful and collaborative supervisory relationship within the power differential.
- E) Reviews and signs off on all reports, case notes, and communications (if required by the regulatory authority order or the supervisor).
- F) Practices effective supervision/monitoring to maintain a distinction between supervision/monitoring and psychotherapy.
- G) Assists the disciplined psychologist in setting and attaining goals and objectives to comply with the regulatory authority order.
- H) Informs disciplined psychologist when the disciplined psychologist is not meeting criteria for successful completion of the supervised/monitoring experience, and implements remedial steps to assist the disciplined practitioner's development.

- I) Reschedules sessions to adhere to the regulatory authority order if the supervisor must cancel or miss a supervision session.
- J) Maintains documentation of the supervision/monitoring and services provided, and provides such to the regulatory authority upon its request.
- K) Advises the regulatory authority if the supervisor has reason to believe that the disciplined psychologist is practicing in a manner that violates the terms of the contract and/or the regulatory authority order.
- L) Files report(s) in a timely manner at a frequency set by the regulatory authority (specify).

5. Duties and Responsibilities of the Disciplined Practitioner

- A) Understands the responsibility of the supervisor for all disciplined psychologist professional practice and behavior.
- B) Fully informs supervisor of clinically relevant information from client.
- C) Implements supervisor directives, and discloses clinical issues, concerns, and errors that arise.
- D) Integrates supervisor feedback into practice.
- E) Identifies to clients his/her status as a disciplined practitioner, the name of the supervisor, and describes the supervisory structure (including supervisor access to all aspects of case documentation and records).
- F) Obtains client's informed consent to discuss all aspects of the disciplined practitioner's work with the supervisor.
- G) Attends supervision/monitoring sessions prepared to discuss practice issues as directed by the supervisor.
- H) Seeks out and receives immediate supervision on emergent situations (include supervisor contact information).
- I) Reschedules sessions to adhere to the regulatory authority order if the disciplined psychologist must cancel or miss a supervision session.

A formal review of this contract will be conducted on or around _____ when a review of the specific goals described herein will be made.

We, _____ (disciplined practitioner) and _____ (supervisor) agree to follow the parameters described in this supervision contract and the regulatory authority disciplinary order dated _____, and to conduct ourselves in keeping with the American Psychological Association Ethical Principles and Code of Conduct or the Canadian Psychological Association Code of Ethical Conduct.

Supervisor

Date

Disciplined Practitioner

Date

Dates contract is in effect: Start date: _____ End date: _____

Reviewed and approved by Board Representative:

Board Representative

Signature

Date

(Printed Name & Title)

APPENDIX VI

SAMPLE LANGUAGE FOR DISCIPLINARY ORDERS

Missouri

1. PSYCHOLOGICAL EVALUATION REQUIREMENTS

- A) At Licensee's expense, Licensee must undergo an evaluation to assess current functioning and effects of such functioning on Licensee's ability to practice, conducted by a licensed and/or board-certified psychologist trained in neuropsychology approved by the State Committee of Psychologists. Within twenty (20) business days of the effective date of this Order, Licensee shall submit a list of no less than five (5) proposed psychologists trained in neuropsychology to conduct the evaluation. The Committee may approve a psychologist trained in neuropsychology from this list, or may require a second list of five (5) proposed psychologists trained in neuropsychology which the Licensee shall submit within twenty (20) business days of the Committee's request. The Licensee must begin the evaluation within thirty (30) days of the Committee's approval. The Licensee must immediately notify the Committee, in writing, of the start date of the evaluation.
- B) The written evaluation must be submitted by the evaluating psychologist trained in neuropsychology to the State Committee of Psychologists within thirty (30) days of the evaluation being initiated. It shall be the Licensee's responsibility to ensure that the evaluation is submitted by the evaluating psychologist trained in neuropsychology to the State Committee of Psychologists.
- C) The evaluating psychologist trained in neuropsychology shall be released to discuss the purpose and methods of the evaluation with a representative of the State Committee of Psychologists prior to

performing the evaluation. The evaluation will be pursuant to consultation with the State Committee of Psychologists. While Licensee will pay for the evaluation, the evaluating psychologist trained in neuropsychology will work on behalf of the State Committee of Psychologists.

- D) Licensee shall abide by the recommendations of the evaluating psychologist trained in neuropsychology set forth in the psychologist trained in neuropsychology's evaluation. Licensee shall engage in all psychologist trained in neuropsychology testing evaluation, supervision, therapy or other treatment recommended. If therapy is deemed appropriate, the treating health care provider must be different from the professional performing the evaluation and must be approved by the State Committee of Psychologists. Licensee shall commence any recommended therapy or treatment within twenty (20) days of the evaluation completion date.
- E) If therapy is deemed appropriate, it must be continued according to the frequency of sessions recommended by the evaluating psychologist trained in neuropsychology. The treatment modality or plan shall reflect issues and themes recommended by the evaluating psychologist trained in neuropsychology as well as any additional treatment goals. Ongoing treatment and documentation should address the evaluating psychologist trained in neuropsychology's recommendation.
- F) In the event the treating psychologist trained in neuropsychology becomes unable or decides not to continue serving in his/her capacity as a treating psychologist trained in neuropsychology during the disciplinary period, then the Licensee shall:
 - i. Within three (3) business days of being notified of the treating psychologist trained in neuropsychology's inability or decision not to continue serving as the treating psychologist trained in

neuropsychology or otherwise learning of the need to secure a treating psychologist trained in neuropsychology, advise the State Committee of Psychology in writing that he/she is needing to secure a treating psychologist trained in neuropsychology and the reasons for such change; and

- ii. Within twenty (20) business days of being notified of the treating psychologist trained in neuropsychology's inability or decision not to continue serving as the treating psychologist trained in neuropsychology or otherwise learning of the need to secure a treating psychologist trained in neuropsychology, secure a treating psychologist trained in neuropsychology pursuant to and in accordance with the terms and conditions set forth in this Order.

- G) Licensee must give the State Committee of Psychologists, or its representative(s), permission to review Licensee's personal treatment and/or medical records.
- H) In any professional activity in which Licensee is involved, all individuals whom Licensee treats, evaluates, or provides service must allow his/her treatment records to be reviewed by the State Committee of Psychologists or its representative(s).
- I) Licensee's treating psychologist trained in neuropsychology must report at least once every three (3) months to the State Committee of Psychologists on Licensee's progress. Reports must be received before March 1, June 1, September 1 and December 1 of each year. It is Licensee's responsibility to ensure that these reports are provided in a timely manner.

2. SUPERVISION REQUIREMENTS

- A) Licensee's practice as a professional psychologist shall be supervised on a three (3) month basis by a psychologist approved by the State Committee of Psychologists. If Licensee has failed to secure a supervisor within twenty (20) days from the start of probation the Licensee shall cease practicing psychology until a supervisor is secured. Licensee shall be responsible for any payment associated with the supervision. Supervision includes, but is not limited to, on site face-to face review of cases and review (approval and co-signing) of written reports such as case notes, intake assessments, test reports, treatment plans and progress reports.
- B) In the event the supervising psychologist becomes unable or decides not to continue serving in his/her capacity as a supervising psychologist or otherwise ceases to serve as a supervising psychologist during the period of probation, then Licensee shall:
- i. Within three business days of being notified of the supervising psychologist's inability or decision not to continue serving as the supervising psychologist, or otherwise learning of the need to secure a supervising psychologist, advise the Committee in writing that he is needing to secure a supervising psychologist and the reasons for such change; and
 - ii. Within twenty business days of being notified of the supervising psychologist's inability or decision not to continue serving as the supervising psychologist, or otherwise learning of the need to secure a supervising psychologist, secure a supervising psychologist pursuant to and in accordance with the terms and conditions set forth in this Order. After twenty business days, Licensee shall not conduct psychological evaluations if he has not secured a supervisor.

- C) The supervising psychologist shall be vested with the administrative authority over all matters affecting the provision of psychological evaluations provided by Licensee so that the ultimate responsibility for the welfare of every client evaluated is maintained by the supervising psychologist.
- D) Licensee must give the State Committee of Psychologists or its representative(s) permission to review Licensee's personal treatment or medical records.
- E) In any professional activity in which Licensee is involved, all individuals whom Licensee treats, evaluates, or provides service must allow his/her treatment records to be reviewed by the State Committee of Psychologists or its representative(s).
- F) Licensee's supervisor must report at least once every three (3) months on Licensee's compliance with the terms of discipline in this Order until Licensee's satisfactory completion of the requirements of section I, paragraph A above. Reports must be received before March 1, June 1, September 1 and December 1 of each year. It is Licensee's responsibility to ensure that these reports are provided to the Committee in a timely manner.

3. GENERAL REQUIREMENTS

- A) Licensee shall not serve as a supervisor for any psychological trainee, psychological intern, psychological resident, psychological assistant, or any person undergoing supervision during the course of obtaining licensure as a psychologist, professional counselor or social worker.
- B) Licensee must inform Licensee's employers, and all hospitals, institutions and managed health care organizations within which Licensee is affiliated, that Licensee's work as a professional psychologist is under probation by the State Committee of Psychologists. Licensee must obtain

written verification that each client that Licensee treats, evaluates, or consults has been so informed.

- C) Licensee shall meet with the Committee or its representatives at such times and places as required by the Committee after notification of a required meeting.
- D) Licensee shall submit reports to the State Committee for Psychologists, P.O. Box 1335, Jefferson City, Missouri 65102, stating truthfully whether he has complied with all the terms and conditions of this Order by no later than March 1, June 1, September 1 and December 1 during each year of the disciplinary period.
- E) Licensee shall keep the Committee apprised of his/her current home and work addresses and telephone numbers. Licensee shall inform the Committee within ten days of any change of home or work address and home or work telephone number.
- F) Licensee shall comply with all provisions of sections 337.010 through 337.345, RSMo; all applicable federal and state drug laws, rules, and regulations; and all federal and state criminal laws. "State" here includes the state of Missouri and all other states and territories of the United States.
- G) During the disciplinary period, Licensee shall timely renew his license and timely pay all fees required for licensing and comply with all other Committee requirements necessary to maintain Licensee's license in a current and active state.
- H) If at any time during the disciplinary period, Licensee removes himself from the state of Missouri, ceases to be currently licensed under provisions of Sections 337.010 through 337.345, RSMo, or fails to advise the Committee of his/her current place of business and residence, the time of his/her absence, unlicensed status, or unknown whereabouts

shall not be deemed or taken as any part of the time of discipline so imposed in accordance with § 337.035, RSMo.

- I) During the disciplinary period, Licensee shall accept and comply with unannounced visits from the Committee's representatives to monitor his/her compliance with the terms and conditions of this Order.
- J) If Licensee fails to comply with the terms of this Order, in any respect, the Committee may impose such additional or other discipline that it deems appropriate, (including imposition of the revocation).
- K) This Order does not bind the Committee or restrict the remedies available to it concerning any other violation of Sections 337.010 through 337.345, RSMo, by Licensee not specifically mentioned in this document.
- L) Upon expiration of the disciplinary period, Licensee's license as a psychologist in Missouri shall be fully restore, provided all provisions of this Order and all other requirements of law have been satisfied.