



**VIRTUAL/TELECONFERENCE
PSYCHOLOGY EXAMINING BOARD
Virtual, 4822 Madison Yards Way, Madison
Contact: Brad Wojciechowski (608) 266-2112
November 17, 2021**

The following agenda describes the issues that the Board plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. Please consult the meeting minutes for a record of the actions of the Board.

AGENDA

9:00 A.M.

OPEN SESSION – CALL TO ORDER – ROLL CALL

- A. Adoption of Agenda (1-4)**
- B. Approval of Minutes of September 22, 2021 (5-7)**
- C. Reminders: Conflicts of Interest, Scheduling Concerns
- D. 9:00 A.M. Public Hearing: CR 21-080, Permanent and Emergency Rule 2127: Psy 1, 2, and 4, Relating to Legislative Update (8-30)**
 - 1) Review and Respond to Clearinghouse Report and Public Hearing Comments
- E. Administrative Matters**
 - 1) Department, Staff and Board Updates
 - 2) Delegation of Authorities
 - 3) Board Members – Term Expiration Dates
 - a. Desmonde, Marcus P. – 7/1/2021
 - b. Greene, John N. – 7/1/2023
 - c. Jinkins, Mark A. – 7/1/2022
 - d. Schroeder, Daniel A. – 7/1/2019
 - e. Sorce, Peter I. – 7/1/2020
 - f. Thompson, David W. – 7/1/2022
- F. Legislative and Policy Matters – Discussion and Consideration**
- G. Administrative Rule Matters – Discussion and Consideration (31)**
 - 1) Adoption Order: CR 21-003 (Psy 2), Relating to Discrimination Based on Arrest or Conviction Record **(32-35)**
 - 2) Pending or Possible Rulemaking Projects **(36)**
- H. Credentialing Matters – Discussion and Consideration**
 - 1) Licenses Issued Between Meetings **(37-39)**

2) Interim Psychologist Credential

I. Association of State and Provincial Psychology Boards (ASPPB) Update – Discussion and Consideration

- 1) Psychology Interjurisdictional Compact (PSYPACT)
- 2) Examination for Professional Practice in Psychology (EPPP) Part 2 **(40-58)**

J. Speaking Engagements, Travel, or Public Relation Requests, and Reports – Discussion and Consideration

- 1) Travel Report: Association of State and Provincial Psychology Boards (ASPPB) Annual Meeting, Virtual, October 15-16, 2021 – Daniel Schroeder and Peter Sorce

K. COVID-19 – Discussion and Consideration

L. Deliberation on Items Added After Preparation of Agenda:

- 1) Introductions, Announcements and Recognition
- 2) Nominations, Elections, and Appointments
- 3) Administrative Matters
- 4) Election of Officers
- 5) Appointment of Liaisons and Alternates
- 6) Delegation of Authorities
- 7) Education and Examination Matters
- 8) Credentialing Matters
- 9) Practice Matters
- 10) Legislative and Administrative Rule Matters
- 11) Liaison Reports
- 12) Board Liaison Training and Appointment of Mentors
- 13) Informational Items
- 14) Division of Legal Services and Compliance (DLSC) Matters
- 15) Presentations of Petitions for Summary Suspension
- 16) Petitions for Designation of Hearing Examiner
- 17) Presentation of Stipulations, Final Decisions and Orders
- 18) Presentation of Proposed Final Decisions and Orders
- 19) Presentation of Interim Orders
- 20) Petitions for Re-Hearing
- 21) Petitions for Assessments
- 22) Petitions to Vacate Orders
- 23) Requests for Disciplinary Proceeding Presentations
- 24) Motions
- 25) Petitions
- 26) Appearances from Requests Received or Renewed
- 27) Speaking Engagements, Travel, or Public Relation Requests, and Reports

M. Public Comments

CONVENE TO CLOSED SESSION to deliberate on cases following hearing (s. 19.85(1)(a), Stats.); to consider licensure or certification of individuals (s. 19.85(1)(b), Stats.); to consider closing disciplinary investigations with administrative warnings (ss. 19.85(1)(b), and 440.205, Stats.); to consider individual histories or disciplinary data (s. 19.85(1)(f), Stats.); and to confer with legal counsel (s. 19.85(1)(g), Stats.).

N. Deliberation on Department of Legal Services and Compliance Matters

- 1) **Stipulations, Final Decisions and Orders**
 - a. 21 PSY 010 – Michael L. Kula, Psy.D. **(59-64)**
- 2) **Administrative Warnings**
 - a. 19 PSY 014 – J.R.H. **(65-66)**
- 3) **Case Closings**
 - a. 21 PSY 016 – K.M.L. **(67-70)**

O. Deliberation on Matters Relating to Orders Fixing Costs

- 1) Kathryn L. LaPierre, Psy.D. – DHA Case Number SPS-19-0053/DLSC Case Number 17 PSY 032 **(71-95)**

P. Deliberation of Items Added After Preparation of the Agenda

- 1) Education and Examination Matters
- 2) Credentialing Matters
- 3) DLSC Matters
- 4) Monitoring Matters
- 5) Professional Assistance Procedure (PAP) Matters
- 6) Petitions for Summary Suspensions
- 7) Petitions for Designation of Hearing Examiner
- 8) Proposed Stipulations, Final Decisions and Orders
- 9) Proposed Interim Orders
- 10) Administrative Warnings
- 11) Review of Administrative Warnings
- 12) Proposed Final Decisions and Orders
- 13) Matters Relating to Costs/Orders Fixing Costs
- 14) Case Closings
- 15) Board Liaison Training
- 16) Petitions for Assessments and Evaluations
- 17) Petitions to Vacate Orders
- 18) Remedial Education Cases
- 19) Motions
- 20) Petitions for Re-Hearing
- 21) Appearances from Requests Received or Renewed

Q. Consulting with Legal Counsel

RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

R. Vote on Items Considered or Deliberated Upon in Closed Session, if Voting is Appropriate

S. Open Session Items Noticed Above Not Completed in the Initial Open Session

ADJOURNMENT

NEXT DATE: JANUARY 12, 2022

 MEETINGS AND HEARINGS ARE OPEN TO THE PUBLIC, AND MAY BE CANCELLED WITHOUT NOTICE.

Times listed for meeting items are approximate and depend on the length of discussion and voting. All meetings are held at 4822 Madison Yards Way, Madison, Wisconsin, unless otherwise noted. In order to confirm a meeting or to request a complete copy of the board’s agenda, please call the listed contact person.

The board may also consider materials or items filed after the transmission of this notice. Times listed for the commencement of disciplinary hearings may be changed by the examiner for the convenience of the parties. Requests for interpreters for the deaf or hard of hearing, or other accommodations, are considered upon request by contacting the Affirmative Action Officer, 608-266-2112, or the Meeting Staff at 608-266-5439.

**VIRTUAL/TELECONFERENCE
PSYCHOLOGY EXAMINING BOARD
MEETING MINUTES
SEPTEMBER 22, 2021**

PRESENT: Marcus Desmonde, Psy.D., John Greene, Ph.D. (*arrived at 9:04 a.m.*); Mark Jinkins; Daniel Schroeder, Ph.D.; Peter Sorce; David Thompson, Ph.D.

STAFF: Brad Wojciechowski, Executive Director; Jon Derenne, Legal Counsel; Sofia Anderson, Administrative Rules Coordinator; Megan Glaeser, Bureau Assistant; and other Department Staff

CALL TO ORDER

Daniel Schroeder, Chairperson, called the meeting to order at 9:02 a.m. A quorum was confirmed with five (5) board members present.

ADOPTION OF AGENDA

MOTION: Mark Jinkins moved, seconded by Peter Sorce, to adopt the Agenda as published. Motion carried unanimously.

APPROVAL OF MINUTES OF JULY 14, 2021

MOTION: David Thompson moved, seconded by Peter Sorce, to approve the Minutes of July 14, 2021 as published. Motion carried unanimously.

(John Greene arrived at 9:04 a.m.)

ADMINISTRATIVE MATTERS

Delegation of Authorities

Delegated Authority for Reciprocity Reviews

MOTION: David Thompson moved, seconded by Mark Jinkins, to delegate authority to the Department Attorneys to review and approve reciprocity applications in which the out of state license requirements for a psychologist are substantially equivalent to the Board's requirements and like reciprocity is extended to holders of licenses issued by this state. Motion carried unanimously.

ADMINISTRATIVE RULE MATTERS

Preliminary and Emergency Rule Draft: Psy 1, 2, and 4, Relating to Comprehensive Review

MOTION: Mark Jinkins moved, seconded by David Thompson, to delegate authority to the Chairperson to approve the revised emergency rule draft on Psy 1,

2, and 4 relating to definitions, interim psychologist license, reciprocity requirements, and reciprocal credentials for service members, for submission to the governor, and publication in the official newsletter; and to delegate authority to the Chairperson to approve the revised permanent rule draft for posting for economic impact comments and submission to the Clearinghouse. Motion carried unanimously.

Expedited Repeal: Psy 2, 3, 4, and 5, Relating to Obsolete References

MOTION: Mark Jenkins moved, seconded by Peter Sorce, to approve the revised expedited repeal letter and proposed order for Psy 2.013 (3), 2.018, 3, and 4.025 (4) relating to private practice school psychologist licensure, requirements for reciprocal candidates, ABPP diploma exemption, for submission to the Co-Chairpersons of the Joint Committee for Review of Administrative Rules and Legislative Reference Bureau for publication in the administrative register. Motion carried unanimously.

MOTION: David Thompson moved, seconded by Peter Sorce, to delegate authority to the Chairperson to approve the revised expedited repeal letter and proposed order for Psy 5 relating to conduct for psychologists, for submission to the Co-Chairpersons of the Joint Committee for Review of Administrative Rules and Legislative Reference Bureau for publication in the administrative register. Motion carried unanimously.

SPEAKING ENGAGEMENTS, TRAVEL, OR PUBLIC RELATION REQUESTS, AND REPORTS

Association of State and Provincial Psychology Boards (ASPPB) Annual Meeting, Virtual, October 15-16, 2021

MOTION: David Thompson moved, seconded by Mark Jenkins, to designate Daniel Schroeder, as the Board's delegate, and Peter Sorce to attend the Association of State and Provincial Psychology Boards (ASPPB) Annual Virtual Meeting on October 15-16, 2021 and to authorize attendance. Motion carried unanimously.

CLOSED SESSION

MOTION: David Thompson moved seconded by Peter Sorce, to convene to closed session to deliberate on cases following hearing (s. 19.85(1)(a), Stats.); to consider licensure or certification of individuals (s. 19.85(1)(b), Stats.); to consider closing disciplinary investigations with administrative warnings (ss. 19.85 (1)(b), and 440.205, Stats.); to consider individual histories or disciplinary data (s. 19.85 (1)(f), Stats.); and to confer with legal counsel (s. 19.85(1)(g), Stats.). Daniel Schroeder, Chairperson, read the language of the motion. The vote of each member was ascertained by voice vote. Roll Call Vote: Marcus Desmond-yes; John Greene-yes; Mark Jenkins-

yes; Daniel Schroeder-yes; Peter Sorce-yes; and David Thompson-yes.
Motion carried unanimously.

The Board convened into Closed Session at 10:52 a.m.

**DELIBERATION ON DEPARTMENT OF LEGAL SERVICES AND COMPLIANCE
MATTERS**

Stipulations, Final Decisions and Orders

17 PSY 030 – Jon S. Matthew, Ph.D.

MOTION: Peter Sorce moved, seconded by David Thompson, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Jon S. Matthew, Ph.D., DLSC Case Number 17 PSY 030. Motion carried unanimously.

RECONVENE TO OPEN SESSION

MOTION: David Thompson moved, seconded by Mark Jenkins, to reconvene into open session. Motion carried unanimously.

The Board reconvened into Open Session at 11:08 a.m.

VOTING ON ITEMS CONSIDERED OR DELIBERATED ON IN CLOSED SESSION

MOTION: Peter Sorce moved, seconded by John Greene, to affirm all motions made and votes taken in closed session. Motion carried unanimously.

(Be advised that any recusals or abstentions reflected in the closed session motions stand for the purposes of the affirmation vote.)

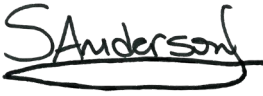
ADJOURNMENT

MOTION: John Greene moved, seconded by Mark Jenkins, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 11:09 a.m.

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Sofia Anderson, Administrative Rules Coordinator		2) Date when request submitted: November 5, 2021 Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting	
3) Name of Board, Committee, Council, Sections: Psychology Examining Board			
4) Meeting Date: November 17, 2021	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? 9:00 A.M. Public Hearing on CR 21-080 Permanent Rule and EmR 2127 Psy 1, 2, and 4, relating to Legislative Update	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? <i>(If yes, please complete Appearance Request for Non-DSPS Staff)</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed: The Board will hold a Public Hearing on this rule as required by the rulemaking process.			
11) Authorization <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;">  <hr/> Signature of person making this request </div> <div style="text-align: right;"> 11/05/2021 <hr/> Date </div> </div> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 10px;"> <div style="width: 60%;">Supervisor (if required)</div> <div style="width: 35%;">Date</div> </div> <hr/> Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			



Wisconsin Legislative Council

RULES CLEARINGHOUSE

Scott Grosz
Clearinghouse Director

Anne Sappenfield
Legislative Council Director

Margit Kelley
Clearinghouse Assistant Director

CLEARINGHOUSE RULE 21-080

Comments

[NOTE: All citations to “Manual” in the comments below are to the Administrative Rules Procedures Manual, prepared by the Legislative Council Staff and the Legislative Reference Bureau, dated November 2020.]

1. Statutory Authority

The agency’s plain language analysis for the proposed rule mentions 2019 Wisconsin Act 143, but the rule should also include s. 440.09 (5), Stats., created in that act, as a source of statutory authority.

2. Form, Style and Placement in Administrative Code

a. In the caption for the proposed rule, the listing of the treated provisions should be grouped in the following order: to amend; to repeal and recreate; and to create. [s. 1.01 (1) (b), Manual.]

b. In s. Psy 1.02 (6m), the period after the word “welfare” that is shown with a strike-through should be removed.

c. In s. Psy 2.01 (3) (a), the period after the word “located” that is shown with a strike-through should be removed, and the final period should be shown without underscoring.

d. In s. Psy 2.14 (1), the old text should be removed and the text of the repealed and recreated language should be shown without underscoring. [s. 1.04 (5) (b), Manual.]

e. In s. Psy 4.017, subsection titles should be inserted for subs. (5) and (7), for consistency. Also, in sub. (6), the format of the title should be small capital letters, rather than all capital letters. [s. 1.10 (2) (a) 2. and (b) 3., Manual.]

4. Adequacy of References to Related Statutes, Rules and Forms

a. In s. Psy 1.02 (11), the cross-reference to the definition of “Practice of psychology” should be to s. 455.01 (5), Stats., instead of s. 445.01 (5), Stats.

b. Should the material in s. Psy 2.10 (intro.) specify that the licensure is for “licensure as a psychologist” so it is clear the requirements do not apply to licensure as an interim psychologist?

5. Clarity, Grammar, Punctuation and Use of Plain Language

a. In s. Psy 2.013 (5), the plural reference to “applicants” and the grammatical structure of the sentence should be changed to the singular form, for consistency with other singular references to an “applicant” in that chapter, and to conform to current drafting conventions. [s. 1.05 (1) (c), Manual.]

b. The definition of “day” created in s. Psy 2.14 (1) is confusing, and could be read to mean that distinct parts of a day in which psychological services are rendered count as multiple days for the purposes of s. Psy 2.14, even though those distinct parts took place during a single calendar day. Consider retaining the current definition of “working days”.

c. The material in s. Psy 4.017 (7) should include a comma after “2019 Stats.”. Also, the word “and” could be removed for clarity, or a cross-reference to s. 455.04 (4), Stats., could be included.

STATE OF WISCONSIN
PSYCHOLOGY EXAMINING BOARD

IN THE MATTER OF RULEMAKING : PROPOSED ORDER OF THE
PROCEEDINGS BEFORE THE : PSYCHOLOGY EXAMINING BOARD
PSYCHOLOGY EXAMINING BOARD : ADOPTING RULES
: (CLEARINGHOUSE RULE)

PROPOSED ORDER

An order of the Psychology Examining Board to amend Psy 1.02 (2) (Note), (6m), 2.01 (3) (a) and (b), (4), 2.013 (intro), 2.14 (2), and (3), 4.017 (title), and 4.025 (1); to create Psy 1.02 (6g), (9m), 2.012, 2.013 (5), 2.014, and 4.017 (5), (6), and (7); to repeal and recreate Psy 2.10 (intro) and (1), and 2.14 (1), relating to definitions, interim psychologist licensure requirements, reciprocity requirements, reciprocal credentials for service members, former service members, and their spouses, supervised psychological experience, temporary practice for out of state providers, and renewal requirements.

Analysis prepared by the Department of Safety and Professional Services.

ANALYSIS

Statutes interpreted:

Sections 455.01 (5) and (6), 455.03, 455.04, 455.06, 455.09 (3), Stats.

Statutory authority:

Sections 15.08 (5) (b), 227.11 (2) (a), and 455.06 (1) (b).

Explanation of agency authority:

Section 15.08 (5) (b), Stats. provides “[e]ach examining board...Shall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains and define and enforce professional conduct and unethical practices not inconsistent with the law relating to the particular trade or profession.”

Section 227.11 (2) (a), Stats. provides “[e]ach agency may promulgate rules interpreting the provisions of any statute enforced or administered by the agency, if the agency considers it necessary to effectuate the purpose of the statute.”

Section 455.06 (1) (b), Stats. provides “the examining board may promulgate rules specifying circumstances in which the examining board, in cases of hardship, may allow an individual to renew a license issued under s. 455.04 (2).”

Related statute or rule:

None.

Plain language analysis:

The Psychology Examining Board is updating the rules governing the practice of psychology based upon passage of 2021 Wisconsin Act 22. Act 22 creates requirements for a new interim psychologist license; modifies the conditions for the supervised psychological experience requirement; and clarifies the terms of the temporary practice for out of state providers. This revision also includes a comprehensive review that updates and creates several definitions to chapter Psy 1 in order to comply with current standards of practice; and implements the reciprocal credential requirements for service members, former service members, and their spouses in accordance to 2019 Wisconsin Act 143.

Summary of, and comparison with, existing or proposed federal regulation:

None.

Summary of public comments received on statement of scope and a description of how and to what extent those comments and feedback were taken into account in drafting the proposed rule:

N/A

Comparison with rules in adjacent states:

Illinois:

The Illinois Department of Financial and Professional Regulation licenses clinical psychologists and prescribing psychologists. In order to be licensed as a clinical psychologist, an applicant has to be a graduate of a doctoral program in clinical, school or counseling psychology accredited by the American Psychological Association or approved by the National Register of Health Service Psychologists; or be a graduate of a doctoral program whose content is found equivalent by the board. Additionally, applicants have to complete two years of supervised clinical, school or counseling psychology experience, which has to be divided between one year of no less than 1,750 hours in an internship, and one year of postdoctoral supervision. [225 ILCS 15/10] Illinois does not have interim or training psychologist licenses.

Iowa:

The Iowa Board of Psychology is in the Bureau of Professional Licensure in the Department of Public Health. Iowa licenses permanent, provisional, and health service provider psychologists. The requirements for permanent psychologist include evidence of graduation from a doctorate level psychology program or its equivalent and a minimum of 1,500 hours of supervised professional experience in no less than ten months. [645 IAC 240.3] [645 IAC 240.6]

The requirements for provisional psychologist licensure include evidence of graduation from a doctorate level psychology program and a supervised plan signed by the potential supervisor. This license is effective for two years and may be renewed one time for an additional two years. [645 IAC 240.12]

Michigan:

The Michigan Board of Psychology is in the Department of Licensing and Regulatory Affairs. Michigan licenses master’s limited permanent and temporary psychologists; doctoral educational limited permanent and temporary psychologists; and psychologists. In order to obtain a psychologist license, an applicant needs to have been granted a doctoral degree in psychology or its equivalent and have no less than one year of postdoctoral experience in the practice of psychology. The Board may grant a temporary license for the purpose of completing the one year of supervised experience. These temporary licenses are only valid for 24 months and can only be renewed once for an additional 24 months. [MCL 333.18223]

Minnesota:

The Minnesota Board of Psychology licenses Master and Doctoral level psychologists. In order to become a doctoral level psychologist, applicants must earn a doctoral degree in psychology and complete at least one full year or the equivalent in part time of postdoctoral supervised psychological experience in no less than 12 months and no more than 60 months. [MN Stats. 148.907 Subd. 2]

Minnesota has a guest licensure option for applicants who are licensed in another state and would like to start practicing while their permanent license is in process. In order to obtain this license, an applicant must have an unencumbered license to practice psychology in another state, hold a doctoral degree, and pass a professional responsibility examination designated by the board. This license is valid for one year or until the board either issues or denies the permanent license. Guest licenses can be renewed annually until the board has made a determination about the applicant’s permanent licensure. [MN Stats. 148.916]

Summary of factual data and analytical methodologies:

The proposed rules were developed by reviewing the provisions of Psy 1, 2, and 4, as changed by 2021 Wisconsin Act 22. The provisions of Act 22 were reviewed in conjunction with current rules relating to psychological practice and 2019 Wisconsin Act 143. The Board provided input and feedback to determine any changes or updates needed in addition to those enacted by Act 22 and 143.

Analysis and supporting documents used to determine effect on small business or in preparation of economic impact analysis:

The proposed rules was posted for a period of 14 days to solicit public comment on economic impact, including how the proposed rules may affect businesses, local government units, and individuals. No comments were received.

Fiscal Estimate and Economic Impact Analysis:

The Fiscal Estimate and Economic Impact Analysis is attached.

Effect on small business:

These proposed rules do not have an economic impact on small businesses, as defined in s. 227.114 (1), Stats. The Department’s Regulatory Review Coordinator may be contacted by email at Daniel.Hereth@wisconsin.gov, or by calling (608) 267-2435.

Agency contact person:

Sofia Anderson, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 4822 Madison Yards Way, P.O. Box 8366, Madison, Wisconsin 53708; telephone 608-261-4463; email at DSPSAdminRules@wisconsin.gov.

Place where comments are to be submitted and deadline for submission:

Comments may be submitted to Sofia Anderson, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 4822 Madison Yards Way, P.O. Box 8366, Madison, WI 53708-8366, or by email to DSPSAdminRules@wisconsin.gov. Comments must be received on or before the public hearing, November 17, 2021, to be included in the record of rule-making proceedings.

TEXT OF RULE

SECTION 1. Psy 1.02 (2) (Note) is amended to read:

Psy 1.02 (2) (Note): The board office is located at ~~1400 East Washington Avenue~~ 4822 Madison Yards Way, Madison, WI 53705, P.O. Box ~~8935~~ 8366, Madison, WI 53708, telephone (608) ~~266-0070~~ 2112, dsps@wi.gov.

SECTION 2. Psy 1.02 (6g) is created to read:

Psy 1.02 (6g) “Interim psychologist” means a person licensed under s. 455.04 (2), Stats.

SECTION 3. Psy 1.02 (6m) is amended to read:

Psy 1.02 (6m) “Jurisprudence exam” means the board approved examination on the ~~elements of practice essential to the public health, safety, or welfare.~~ state law related to the practice of psychology.

SECTION 4. Psy 1.02 (9m) is created to read:

Psy 1.02 (9m) “Psychologist” means a person licensed under s. 455.04 (1) or (2), Stats.

SECTION 5. Psy 1.02 (11) and (12) are created to read:

Psy 1.02 (11) “Practice of psychology” has the meaning under s. 445.01 (5), Stats.

(12) “Psychotherapy” has the meaning under s. 455.01 (6), Stats.

SECTION 6. Psy 2.01 (3) (a) and (b) are amended to read:

Psy 2.01 (3) (a) Official transcript indicating a doctoral degree in psychology from a ~~college or university accredited by a regional accrediting agency approved by the state board of education in the state in which the college or university is located.~~ program accredited by an organization approved by the examining board.

(b) Academic training ~~or specialized experience which in the opinion of the board is that~~ the examining board determines to be substantially equivalent to a doctoral degree in psychology on the basis of standards established in s. Psy 2.09.

SECTION 7. Psy 2.01 (4) is amended to read:

Psy 2.01 (4) Documentation of ~~at least one year experience in~~ completion of psychological work meeting the requirements in s. Psy 2.10.

SECTION 8. Psy 2.012 is created to read:

Psy 2.012 Interim Psychologist. (1) Subject to s. 455.09, Stats., the examining board shall grant an interim psychologist license to an applicant who submits all of the following:

- (a) A properly completed and signed application form.
- (b) An application fee authorized by s. 440.05 (6), Stats.
- (c) Evidence of one of the following:
 - 1. An Official transcript indicating a doctoral degree in psychology from a program accredited by an organization approved by the examining board.
 - 2. Academic training that the examining board determines to be substantially equivalent to a doctoral degree in psychology based on the standards established in s. Psy 2.09.
- (d) Completion of at least 1,500 hours of supervised experience through a successfully completed internship, which shall be accrued after the completion of all doctoral level coursework.
- (e) For applicants who have a pending criminal charge or have been convicted of a crime, all related information necessary for the board to determine whether the

circumstances of the pending criminal charge or conviction are substantially related to the practice of psychology.

(f) Evidence of passing score on the jurisprudence exam.

(2) An interim psychologist license issued under s. 455.04 (2), Stats., is valid for 2 years or until the individual obtains a psychologist license under s. 455.04 (1), Stats, whichever is earlier. An individual holding an interim psychologist license is not required to complete continuing education.

SECTION 9. Psy 2.013 (intro) is amended to read:

Psy 2.013 Reciprocity. An applicant who holds an active license in another state, territory, foreign country or province whose license standards are deemed by the examining board to be substantially equivalent to the standards in this state may apply for license by submitting the following:

SECTION 10. Psy 2.013 (5) is created to read:

Psy 2.013 (5) For applicants who have a pending criminal charge or have been convicted of a crime, all related information necessary for the board to determine whether the circumstances of the pending criminal charge or conviction are substantially related to the practice of psychology.

SECTION 11. Psy 2.014 is created to read:

Psy 2.014 Reciprocal credentials for service members, former service members, and their spouses. A reciprocal license to practice psychology shall be granted to a service member, former service member, or the spouse of a service member or former service member who the board determines meets all of the requirements under s. 440.09 (2), Stats. Pursuant to s. 440.09 (2m), Stats., the board may request verification necessary to make a determination under this section.

SECTION 12. Psy 2.10 (intro) and (1) are repealed and recreated to read:

Psy 2.10 Supervised psychological experience. Except as provided in s. Psy 2.013, an applicant for licensure shall complete at least 3,000 hours of supervised graduate-level experience in the practice of psychology under conditions satisfactory to the examining board and shall include all of the following:

(1) Supervised hours shall consist of all of the following:

- (a) At least 1,500 hours of experience through a successfully completed internship, which shall be accrued after the completion of all doctoral level coursework.
- (b) At least 1,500 hours of experience consisting of any combination of the following:

1. Pre-internship hours that occur after the completion of the first year of the doctoral program or at any time while in a doctoral program after the completion of a master's degree in psychology or its equivalent.
2. Hours accrued in the internship as described in sub. a. that are in excess of the 1,500 hours required under sub. a.
3. Post-internship hours accrued under the internship as described in sub. a., but before the conferral of the doctoral degree.
4. Postdoctoral hours obtained after the conferral of the doctoral degree.

SECTION 13. Psy 2.14 (1) is repealed and recreated to read:

Psy 2.14 (1) ~~In this section, "working days" is defined as any day in which the psychologist provides services.~~ In this section, "day" means any part of a day during which psychological services are rendered.

SECTION 14. Psy 2.14 (2), and (3) are amended to read:

(2) A psychologist who is licensed by another state or territory of the United States or a foreign country or province whose standards, in the opinion of the board, are equivalent to or higher ~~than~~ than the requirements for licensure as a psychologist in s. 455.04 (1), Stats., may ~~offer~~ provide psychological services as a psychologist in this state for not more than 60 ~~working~~ days in any calendar year without holding a license issued under s. 455.04 (1), Stats.

(3) The psychologist shall report to the board the nature and extent of his or her practice in this state if it exceeds 20 ~~working~~ days within a calendar year.

SECTION 15. Psy 4.017 (title) is amended to read:

Psy 4.017 Late Renewal and reinstatement.

SECTION 16. Psy 4.017 (5), (6), and (7) are created to read:

Psy 4.017 (5) A revoked license may not be renewed. Except as provided in s. 440.12, Stats., an individual may, no sooner than one year after the date of revocation, apply for reinstatement of a license. The board may accept or reject an application for reinstatement.

(6) INTERIM PSYCHOLOGIST LICENSE. The board may renew at its discretion an interim psychologist license upon a showing of hardship by the applicant.

(a) An applicant for a hardship renewal must demonstrate to the board that one of the following circumstances applies to the applicant:

1. The sickness of the applicant or a member of the applicant's immediate family substantiated by a doctor's certificate.
2. A death in the applicant's immediate family substantiated by proof of death.
3. Temporary military service.
4. Other good reason deemed acceptable by the board.

(b) If a hardship is established under par. (a), the board may request additional documentation from the applicant for its consideration in determining whether a renewal of the interim license is appropriate, including:

1. Attestation that the applicant has a qualified supervisor as provided by s. 455.04 (2), Stats.
2. Documentation of any relevant training, education, or supervised experience the applicant has completed since obtaining the interim psychologist license.
3. Any other relevant documentation requested by the board.

(7) An applicant for renewal of a private practice school psychologist issued under s. 455.04 (4), 2019 Stats. and prior to June 1, 2021, shall include with the renewal application proof of completion of hours of continuing education required under s. Psy 4.025.

SECTION 17. Psy 4.025 (1) is amended to read:

Psy 4.025 (1) Unless granted a postponement or waiver under s. Psy 4.04, every licensee except for those licensed under s. Psy 2.012 shall complete at least 40 board approved continuing education hours in each biennial registration period, as specified in s. 455.06, Stats.

SECTION 18. EFFECTIVE DATE. The rules adopted in this order shall take effect on the first day of the month following publication in the Wisconsin Administrative Register, pursuant to s. 227.22 (2) (intro.), Stats.

(END OF TEXT OF RULE)

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

<p>1. Type of Estimate and Analysis <input checked="" type="checkbox"/> Original <input type="checkbox"/> Updated <input type="checkbox"/> Corrected</p>	<p>2. Date October 14, 2021</p>
<p>3. Administrative Rule Chapter, Title and Number (and Clearinghouse Number if applicable) PSY 1, 2, and 4</p>	
<p>4. Subject Legislative Update</p>	
<p>5. Fund Sources Affected <input type="checkbox"/> GPR <input type="checkbox"/> FED <input checked="" type="checkbox"/> PRO <input type="checkbox"/> PRS <input type="checkbox"/> SEG <input type="checkbox"/> SEG-S</p>	<p>6. Chapter 20, Stats. Appropriations Affected 20.165(1)(g)</p>
<p>7. Fiscal Effect of Implementing the Rule <input type="checkbox"/> No Fiscal Effect <input type="checkbox"/> Increase Existing Revenues <input checked="" type="checkbox"/> Increase Costs <input type="checkbox"/> Decrease Costs <input type="checkbox"/> Indeterminate <input type="checkbox"/> Decrease Existing Revenues <input checked="" type="checkbox"/> Could Absorb Within Agency's Budget</p>	
<p>8. The Rule Will Impact the Following (Check All That Apply) <input type="checkbox"/> State's Economy <input type="checkbox"/> Specific Businesses/Sectors <input type="checkbox"/> Local Government Units <input type="checkbox"/> Public Utility Rate Payers <input type="checkbox"/> Small Businesses (if checked, complete Attachment A)</p>	
<p>9. Estimate of Implementation and Compliance to Businesses, Local Governmental Units and Individuals, per s. 227.137(3)(b)(1). \$0</p>	
<p>10. Would Implementation and Compliance Costs Businesses, Local Governmental Units and Individuals Be \$10 Million or more Over Any 2-year Period, per s. 227.137(3)(b)(2)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>11. Policy Problem Addressed by the Rule The Psychology Examining Board is updating the rules governing the practice of psychology based upon passage of 2021 Wisconsin Act 22. Act 22 creates requirements for a new interim psychologist license; modifies the conditions for the supervised psychological experience requirement; and clarifies the terms of temporary practice for out of state providers. This revision also includes a comprehensive review that updates and creates several definitions within chapter Psy 1 in order to comply with current standards of practice; and implements the reciprocal credential requirements for service members, former service members, and their spouses in accordance to 2019 Wisconsin Act 143.</p>	
<p>12. Summary of the Businesses, Business Sectors, Associations Representing Business, Local Governmental Units, and Individuals that may be Affected by the Proposed Rule that were Contacted for Comments. The proposed rules were posted on the Department's website for a period of 14 days to solicit public comment on economic impact, including how the proposed rules may affect businesses, local government units, and individuals. No comments were received.</p>	
<p>13. Identify the Local Governmental Units that Participated in the Development of this EIA. None</p>	
<p>14. Summary of Rule's Economic and Fiscal Impact on Specific Businesses, Business Sectors, Public Utility Rate Payers, Local Governmental Units and the State's Economy as a Whole (Include Implementation and Compliance Costs Expected to be Incurred) No economic or fiscal impacts are anticipated for specific businesses, business sectors, public utility rate payers, local governmental units, or the state's economy as a whole. A total of \$1,987.55 in one time costs are anticipated to be absorbed within the operating budget of the Department of Safety and Professional Services.</p>	
<p>15. Benefits of Implementing the Rule and Alternative(s) to Implementing the Rule The benefit of implementing the rule is that Psychology rules will be brought into compliance with statutory requirements recently enacted by the state legislature. The alternative to implementing the rule is that the psychcolog rules will be out of compliance with State Statutes.</p>	
<p>16. Long Range Implications of Implementing the Rule</p>	

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

The long range implications of implementing the rule is that Psychology rules will be brought into compliance with statutory requirements recently enacted by the state legislature.

17. Compare With Approaches Being Used by Federal Government

The Federal Government does not regulate the licensing of psychologists.

18. Compare With Approaches Being Used by Neighboring States (Illinois, Iowa, Michigan and Minnesota)

Illinois:

The Illinois Department of Financial and Professional Regulation licenses clinical psychologists and prescribing psychologists. In order to be licensed as a clinical psychologist, an applicant has to be a graduate of a doctoral program in clinical, school or counseling psychology accredited by the American Psychological Association or approved by the National Register of Health Service Psychologists; or be a graduate of a doctoral program whose content is found equivalent by the board. Additionally, applicants have to complete two years of supervised clinical, school or counseling psychology experience, which has to be divided between one year of no less than 1,750 hours in an internship, and one year of postdoctoral supervision. [225 ILCS 15/10]

Illinois does not have interim or training psychologist licenses.

Iowa:

The Iowa Board of Psychology is in the Bureau of Professional Licensure in the Department of Public Health. Iowa licenses permanent, provisional, and health service provider psychologists. The requirements for permanent psychologist include evidence of graduation from a doctorate level psychology program or its equivalent and a minimum of 1,500 hours of supervised professional experience in no less than ten months. [645 IAC 240.3] [645 IAC 240.6]

The requirements for provisional psychologist licensure include evidence of graduation from a doctorate level psychology program and a supervised plan signed by the potential supervisor. This license is effective for two years and may be renewed one time for an additional two years. [645 IAC 240.12]

Michigan:

The Michigan Board of Psychology is in the Department of Licensing and Regulatory Affairs. Michigan licenses master's limited permanent and temporary psychologists; doctoral educational limited permanent and temporary psychologists; and psychologists. In order to obtain a psychologist license, an applicant needs to have been granted a doctoral degree in psychology or its equivalent and have no less than one year of postdoctoral experience in the practice of psychology. The Board may grant a temporary license for the purpose of completing the one year of supervised experience. These temporary licenses are only valid for 24 months and can only be renewed once for an additional 24 months. [MCL 333.18223]

Minnesota:

The Minnesota Board of Psychology licenses Master and Doctoral level psychologists. In order to become a doctoral level psychologist, applicants must earn a doctoral degree in psychology and complete at least one full year or the equivalent in part time of postdoctoral supervised psychological experience in no less than 12 months and no more than 60 months. [MN Stats. 148.907 Subd. 2]

Minnesota has a guest licensure option for applicants who are licensed in another state and would like to start practicing while their permanent license is in process. In order to obtain this license, an applicant must have an unencumbered license to practice psychology in another state, hold a doctoral degree, and pass a professional responsibility examination designated by the board. This license is valid for one year or until the board either issues or denies the permanent license. Guest licenses can be renewed annually until the board has made a determination about the applicant's permanent licensure. [MN Stats. 148.916]

19. Contact Name

Sofia Anderson

20. Contact Phone Number

608-261-4463

ADMINISTRATIVE RULES
Fiscal Estimate & Economic Impact Analysis

This document can be made available in alternate formats to individuals with disabilities upon request.

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

ATTACHMENT A

1. Summary of Rule's Economic and Fiscal Impact on Small Businesses (Separately for each Small Business Sector, Include Implementation and Compliance Costs Expected to be Incurred)

2. Summary of the data sources used to measure the Rule's impact on Small Businesses

3. Did the agency consider the following methods to reduce the impact of the Rule on Small Businesses?

- Less Stringent Compliance or Reporting Requirements
 - Less Stringent Schedules or Deadlines for Compliance or Reporting
 - Consolidation or Simplification of Reporting Requirements
 - Establishment of performance standards in lieu of Design or Operational Standards
 - Exemption of Small Businesses from some or all requirements
 - Other, describe:
-

4. Describe the methods incorporated into the Rule that will reduce its impact on Small Businesses

5. Describe the Rule's Enforcement Provisions

6. Did the Agency prepare a Cost Benefit Analysis (if Yes, attach to form)

- Yes No
-

STATE OF WISCONSIN
PSYCHOLOGY EXAMINING BOARD

IN THE MATTER OF RULEMAKING : ORDER OF THE
PROCEEDINGS BEFORE THE : PSYCHOLOGY EXAMINING BOARD
PSYCHOLOGY EXAMINING BOARD : ADOPTING EMERGENCY RULES

The statement of scope for this rule, SS 060-21, was approved by the Governor on May 13, 2021, published in Register 786A4 on June 21, 2021, and approved by Psychology Examining Board on June 29, 2021. This emergency rule as approved by the Governor on 10/22/2021

ORDER

An order of the Psychology Examining Board to amend Psy 1.02 (2) (Note), (6m), 2.01 (3) (a) and (b), (4), 2.013 (intro), 2.14 (2), and (3), 4.017 (title), and 4.025 (1); to create Psy 1.02 (6g), (9m), 2.012, 2.013 (5), 2.014, and 4.017 (5), (6), and (7); to repeal and recreate Psy 2.10 (intro) and (1), and 2.14 (1), relating to definitions, interim psychologist licensure requirements, reciprocity requirements, reciprocal credentials for service members, former service members, and their spouses, supervised psychological experience, temporary practice for out of state providers, and renewal requirements.

Analysis prepared by the Department of Safety and Professional Services.

EXEMPTION FROM FINDING OF EMERGENCY

The Legislature by SECTION 53 in 2021 Wisconsin Act 22 provides an exemption from a finding of emergency for the adoption of the rule.

ANALYSIS

Statutes interpreted:

Sections 455.01 (5) and (6), 455.03, 455.04, 455.06, 455.09 (3), Stats.

Statutory authority:

Sections 15.08 (5) (b), 227.11 (2) (a), and 455.06 (1) (b).

Explanation of agency authority:

Section 15.08 (5) (b), Stats. provides “[e]ach examining board...Shall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains and define and enforce professional conduct and unethical practices not inconsistent with the law relating to the particular trade or profession.”

Section 227.11 (2) (a), Stats. provides “[e]ach agency may promulgate rules interpreting the provisions of any statute enforced or administered by the agency, if the agency considers it necessary to effectuate the purpose of the statute.”

Section 455.06 (1) (b), Stats. provides “the examining board may promulgate rules specifying circumstances in which the examining board, in cases of hardship, may allow an individual to renew a license issued under s. 455.04 (2).”

Related statute or rule:

None

Plain language analysis:

The Psychology Examining Board is updating the rules governing the practice of psychology based upon passage of 2021 Wisconsin Act 22. Act 22 creates requirements for a new interim psychologist license; modifies the conditions for the supervised psychological experience requirement; and clarifies the terms of temporary practice for out of state providers. This revision also includes a comprehensive review that updates and creates several definitions within chapter Psy 1 in order to comply with current standards of practice; and implements the reciprocal credential requirements for service members, former service members, and their spouses in accordance to 2019 Wisconsin Act 143.

Summary of, and comparison with, existing or proposed federal regulation:

None

Comparison with rules in adjacent states:

Illinois:

The Illinois Department of Financial and Professional Regulation licenses clinical psychologists and prescribing psychologists. In order to be licensed as a clinical psychologist, an applicant has to be a graduate of a doctoral program in clinical, school or counseling psychology accredited by the American Psychological Association or approved by the National Register of Health Service Psychologists; or be a graduate of a doctoral program whose content is found equivalent by the board. Additionally, applicants have to complete two years of supervised clinical, school or counseling psychology experience, which has to be divided between one year of no less than 1,750 hours in an internship, and one year of postdoctoral supervision. [225 ILCS 15/10] Illinois does not have interim or training psychologist licenses.

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The Iowa Board of Psychology is in the Bureau of Professional Licensure in the Department of Public Health. Iowa licenses permanent, provisional, and health service provider psychologists. The requirements for permanent psychologist include evidence of

graduation from a doctorate level psychology program or its equivalent and a minimum of 1,500 hours of supervised professional experience in no less than ten months. [645 IAC 240.3] [645 IAC 240.6]

The requirements for provisional psychologist licensure include evidence of graduation from a doctorate level psychology program and a supervised plan signed by the potential supervisor. This license is effective for two years and may be renewed one time for an additional two years. [645 IAC 240.12]

Michigan:

The Michigan Board of Psychology is in the Department of Licensing and Regulatory Affairs. Michigan licenses master's limited permanent and temporary psychologists; doctoral educational limited permanent and temporary psychologists; and psychologists. In order to obtain a psychologist license, an applicant needs to have been granted a doctoral degree in psychology or its equivalent and have no less than one year of postdoctoral experience in the practice of psychology. The Board may grant a temporary license for the purpose of completing the one year of supervised experience. These temporary licenses are only valid for 24 months and can only be renewed once for an additional 24 months. [MCL 333.18223]

Minnesota:

The Minnesota Board of Psychology licenses Master and Doctoral level psychologists. In order to become a doctoral level psychologist, applicants must earn a doctoral degree in psychology and complete at least one full year or the equivalent in part time of postdoctoral supervised psychological experience in no less than 12 months and no more than 60 months. [MN Stats. 148.907 Subd. 2]

Minnesota has a guest licensure option for applicants who are licensed in another state and would like to start practicing while their permanent license is in process. In order to obtain this license, an applicant must have an unencumbered license to practice psychology in another state, hold a doctoral degree, and pass a professional responsibility examination designated by the board. This license is valid for one year or until the board either issues or denies the permanent license. Guest licenses can be renewed annually until the board has made a determination about the applicant's permanent licensure. [MN Stats. 148.916]

Summary of factual data and analytical methodologies:

The proposed rules were developed by reviewing the provisions of Psy 1, 2, and 4, as changed by 2021 Wisconsin Act 22. The provisions of Act 22 were reviewed in conjunction with current rules relating to psychological practice and 2019 Wisconsin Act 143. The Board provided input and feedback to determine any changes or updates needed in addition to those enacted by Act 22 and 143.

Fiscal Estimate:

The Fiscal Estimate and Economic Impact Analysis is attached.

Effect on small business:

These proposed rules do not have an economic impact on small businesses, as defined in s. 227.114 (1), Stats. The Department’s Regulatory Review Coordinator may be contacted by email at Daniel.Hereth@wisconsin.gov, or by calling (608) 267-2435.

Agency contact person:

Sofia Anderson, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 4822 Madison Yards Way, P.O. Box 8366, Madison, Wisconsin 53708; telephone 608-261-4463; email at DSPSAdminRules@wisconsin.gov.

Place where comments are to be submitted and deadline for submission:

Comments may be submitted to Sofia Anderson, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 4822 Madison Yards Way, P.O. Box 8366, Madison, WI 53708-8366, or by email to DSPSAdminRules@wisconsin.gov. Comments must be submitted by the date and time at which the public hearing on these emergency rules is conducted. Information as to the place, date, and time of the public hearing will be published on the Legislature’s website and in the Wisconsin Administrative Register.

TEXT OF RULE

SECTION 1. Psy 1.02 (2) (Note) is amended to read:

Psy 1.02 (2) (Note): The board office is located at ~~1400 East Washington Avenue~~ 4822 Madison Yards Way, Madison, WI 53705, P.O. Box ~~8935~~ 8366, Madison, WI 53708, telephone (608) ~~266-0070~~ 2112, dsps@wi.gov.

SECTION 2. Psy 1.02 (6g) is created to read:

Psy 1.02 (6g) “Interim psychologist” means a person licensed under s. 455.04 (2), Stats.

SECTION 3. Psy 1.02 (6m) is amended to read:

Psy 1.02 (6m) “Jurisprudence exam” means the board approved examination on the ~~elements of practice essential to the public health, safety, or welfare.~~ state law related to the practice of psychology.

SECTION 4. Psy 1.02 (9m) is created to read:

Psy 1.02 (9m) “Psychologist” means a person licensed under s. 455.04 (1) or (2), Stats.

SECTION 5. Psy 1.02 (11) and (12) are created to read:

Psy 1.02 (11) “Practice of psychology” has the meaning under s. 445.01 (5), Stats.

(12) “Psychotherapy” has the meaning under s. 455.01 (6), Stats.

SECTION 6. Psy 2.01 (3) (a) and (b) are amended to read:

Psy 2.01 (3) (a) Official transcript indicating a doctoral degree in psychology from a ~~college or university accredited by a regional accrediting agency approved by the state board of education in the state in which the college or university is located.~~ program accredited by an organization approved by the examining board.

(b) Academic training ~~or specialized experience which in the opinion of the board is that the examining board determines to be substantially equivalent to a doctoral degree in psychology~~ on the basis of standards established in s. Psy 2.09.

SECTION 7. Psy 2.01 (4) is amended to read:

Psy 2.01 (4) Documentation of ~~at least one year experience in~~ completion of psychological work meeting the requirements in s. Psy 2.10.

SECTION 8. Psy 2.012 is created to read:

Psy 2.012 Interim Psychologist. (1) Subject to s. 455.09, Stats., the examining board shall grant an interim psychologist license to an applicant who submits all of the following:

- (a) A properly completed and signed application form.
- (b) An application fee authorized by s. 440.05 (6), Stats.
- (c) Evidence of one of the following:
 - 1. An Official transcript indicating a doctoral degree in psychology from a program accredited by an organization approved by the examining board.
 - 2. Academic training that the examining board determines to be substantially equivalent to a doctoral degree in psychology based on the standards established in s. Psy 2.09.
- (d) Completion of at least 1,500 hours of supervised experience through a successfully completed internship, which shall be accrued after the completion of all doctoral level coursework.
- (e) For applicants who have a pending criminal charge or have been convicted of a crime, all related information necessary for the board to determine whether the circumstances of the pending criminal charge or conviction are substantially related to the practice of psychology.
- (f) Evidence of passing score on the jurisprudence exam.

(2) An interim psychologist license issued under s. 455.04 (2), Stats., is valid for 2 years or until the individual obtains a psychologist license under s. 455.04 (1), Stats, whichever is earlier. An individual holding an interim psychologist license is not required to complete continuing education.

SECTION 9. Psy 2.013 (intro) is amended to read:

Psy 2.013 Reciprocity. An applicant who holds an active license in another state, territory, foreign country or province whose license standards are deemed by the examining board to be substantially equivalent to the standards in this state may apply for license by submitting the following:

SECTION 10. Psy 2.013 (5) is created to read:

Psy 2.013 (5) For applicants who have a pending criminal charge or have been convicted of a crime, all related information necessary for the board to determine whether the circumstances of the pending criminal charge or conviction are substantially related to the practice of psychology.

SECTION 11. Psy 2.014 is created to read:

Psy 2.014 Reciprocal credentials for service members, former service members, and their spouses. A reciprocal license to practice psychology shall be granted to a service member, former service member, or the spouse of a service member or former service member who the board determines meets all of the requirements under s. 440.09 (2), Stats. Pursuant to s. 440.09 (2m), Stats., the board may request verification necessary to make a determination under this section.

SECTION 12. Psy 2.10 (intro) and (1) are repealed and recreated to read:

Psy 2.10 Supervised psychological experience. Except as provided in s. Psy 2.013, an applicant for licensure shall complete at least 3,000 hours of supervised graduate-level experience in the practice of psychology under conditions satisfactory to the examining board and shall include all of the following:

(1) Supervised hours shall consist of all of the following:

- a. At least 1,500 hours of experience through a successfully completed internship, which shall be accrued after the completion of all doctoral level coursework.
- b. At least 1,500 hours of experience consisting of any combination of the following:
 1. Pre-internship hours that occur after the completion of the first year of the doctoral program or at any time while in a doctoral program after the completion of a master's degree in psychology or its equivalent.

2. Hours accrued in the internship as described in sub. a. that are in excess of the 1,500 hours required under sub. a.
3. Post-internship hours accrued under the internship as described in sub. a., but before the conferral of the doctoral degree.
4. Postdoctoral hours obtained after the conferral of the doctoral degree.

SECTION 13. Psy 2.14 (1) is repealed and recreated to read:

Psy 2.14 (1) ~~In this section, "working days" is defined as any day in which the psychologist provides services.~~ In this section, "day" means any part of a day during which psychological services are rendered.

SECTION 14. Psy 2.14 (2), and (3) are amended to read:

(2) A psychologist who is licensed by another state or territory of the United States or a foreign country or province whose standards, in the opinion of the board, are equivalent to or higher ~~than~~ than the requirements for licensure as a psychologist in s. 455.04 (1), Stats., may ~~offer~~ provide psychological services as a psychologist in this state ~~for~~ not more than 60 ~~working~~ days in any calendar year without holding a license issued under s. 455.04 (1), Stats.

(3) The psychologist shall report to the board the nature and extent of his or her practice in this state if it exceeds 20 ~~working~~ days within a calendar year.

SECTION 15. Psy 4.017 (title) is amended to read:

Psy 4.017 ~~Late~~ Renewal and reinstatement.

SECTION 16. Psy 4.017 (5), (6), and (7) are created to read:

Psy 4.017 (5) A revoked license may not be renewed. Except as provided in s. 440.12, Stats., an individual may, no sooner than one year after the date of revocation, apply for reinstatement of a license. The board may accept or reject an application for reinstatement.

(6) INTERIM PSYCHOLOGIST LICENSE. The board may renew at its discretion an interim psychologist license upon a showing of hardship by the applicant.

(a) An applicant for a hardship renewal must demonstrate to the board that one of the following circumstances applies to the applicant:

1. The sickness of the applicant or a member of the applicant's immediate family substantiated by a doctor's certificate.
2. A death in the applicant's immediate family substantiated by proof of death.
3. Temporary military service.
4. Other good reason deemed acceptable by the board.

(b) If a hardship is established under par. (a), the board may request additional documentation from the applicant for its consideration in determining whether a renewal of the interim license is appropriate, including:

1. Attestation that the applicant has a qualified supervisor as provided by s. 455.04 (2), Stats.
2. Documentation of any relevant training, education, or supervised experience the applicant has completed since obtaining the interim psychologist license.
3. Any other relevant documentation requested by the board.

(7) An applicant for renewal of a private practice school psychologist issued under s. 455.04 (4), 2019 Stats. and prior to June 1, 2021, shall include with the renewal application proof of completion of hours of continuing education required under s. Psy 4.025.

SECTION 17. Psy 4.025 (1) is amended to read:

Psy 4.025 (1) Unless granted a postponement or waiver under s. Psy 4.04, every licensee except for those licensed under s. Psy 2.012 shall complete at least 40 board approved continuing education hours in each biennial registration period, as specified in s. 455.06, Stats.

SECTION 18. EFFECTIVE DATE. This emergency rule shall take effect upon publication in the official state newspaper, pursuant to s. 227.22 (2) (c), Stats., and shall remain in effect for 2 years or until permanent rules take effect, whichever is sooner, as provided in 2021 Wisconsin Act 22, section 53 (1).

(END OF TEXT OF RULE)

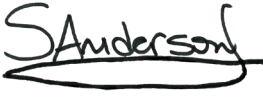
Dated _____

Agency _____

Chairperson
Psychology Examining Board

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Sofia Anderson, Administrative Rules Coordinator		2) Date when request submitted: November 5, 2021 <small>Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting</small>	
3) Name of Board, Committee, Council, Sections: Psychology Examining Board			
4) Meeting Date: November 17, 2021	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Administrative Rules Matters – Discussion and Consideration 1. Adoption Order: CR 21-003: Psy 2, relating to Discrimination Based on Arrest or Conviction Record 2. Pending and Possible Rulemaking Projects.	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? <i>(If yes, please complete Appearance Request for Non-DSPS Staff)</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed: Attachments: 1. CR 21-003 Psy 2 Adoption Order 2. Rules List Chart			
11) Authorization <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;">  <hr/> Signature of person making this request </div> <div style="text-align: right;"> 11/05/2021 <hr/> Date </div> </div> <hr/> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">Supervisor (if required)</div> <div style="width: 35%;">Date</div> </div> <hr/> <div style="display: flex; justify-content: space-between;"> <div style="width: 70%;">Executive Director signature (indicates approval to add post agenda deadline item to agenda)</div> <div style="width: 25%;">Date</div> </div>			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

STATE OF WISCONSIN
PSYCHOLOGY EXAMINING BOARD

IN THE MATTER OF RULEMAKING	:	ORDER OF THE
PROCEEDINGS BEFORE THE	:	PSYCHOLOGY EXAMINING BOARD
PSYCHOLOGY EXAMINING BOARD	:	ADOPTING RULES
	:	(CLEARINGHOUSE RULE 21-003)

ORDER

An order of the Psychology Examining Board to repeal and recreate Psy 2.01 (8) relating to discrimination based on arrest or conviction record.

Analysis prepared by the Department of Safety and Professional Services.

ANALYSIS

Statutes interpreted: Sections 111.321, 111.322, 111.335 and 455.04 (1) (b), Stats.

Statutory authority: Section 15.08 (5) (b), Stats.

Explanation of agency authority:

Section 15.08 (5) (b), Stats.: Each examining board shall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains, and define and enforce professional conduct and unethical practices not inconsistent with the law relating to the particular trade or profession.

Related statute or rule: None

Plain language analysis:

2017 Wisconsin Act 278 enacted statutory changes to ch. 111, Stats., prohibiting a licensing agency from refusing to license an individual, or suspending a license, on the basis of a substantially related pending criminal charge, unless the charge is for one of certain specified crimes against a child or life and bodily security, or a violent crime against a child.

This rule project revises Psy 2 pertaining to applications in order to clarify that applicants are required to submit documentation of their conviction record, and are only required to submit documentation of a pending charge if it is substantially related to the practice and it involves a crime against a child or life and bodily security, or a violent crime against a child, as defined in s. 111.335, Stats.

Summary of, and comparison with, existing or proposed federal regulation: None.

Summary of public comments received on statement of scope and a description of how and to what extent those comments and feedback were taken into account in drafting the proposed rule:

A preliminary hearing on scope for SS 006-19, revising Psy 2, was held at the July 24, 2019 meeting of the Psychology Examining Board. No comments were received.

Comparison with rules in adjacent states:

Illinois: Illinois law allows the Department of Financial Regulation, which regulates psychologists, to: "...refuse to issue, refuse to renew, suspend, or revoke any license, or may place on probation, reprimand, or take other disciplinary or non-disciplinary action deemed appropriate by the Department, including the imposition of fines not to exceed \$10,000 for each violation" where a licensee or applicant has been convicted of, or entered a nolo contendere or guilty plea, any felony under the laws of the United States or any state or territory thereof or that is a misdemeanor of which an essential element is dishonesty, or any crime that is directly related to the practice of the profession (225 ILCS 15/15 (1)).

Iowa: Iowa licensed psychologists may be disciplined, including revocation or suspension of a license, if they are convicted of a crime related to the profession or occupation of the licensee or the conviction of any crime that would affect the licensee's ability to practice within the profession, regardless of whether the judgment of conviction or sentence was deferred (645 IA Admin Code s. 242.2).

Michigan: A Michigan psychologist license can be denied, suspended, revoked, or limited if the psychologist exhibits a lack of good moral character, or has been convicted of the following (MCLS s. 333.16221):

“(v) Conviction of a misdemeanor punishable by imprisonment for a maximum term of 2 years; conviction of a misdemeanor involving the illegal delivery, possession, or use of a controlled substance; or conviction of any felony other than a felony listed or described in another subparagraph of this subdivision. A certified copy of the court record is conclusive evidence of the conviction.

(vi) Lack of good moral character.

(vii) Conviction of a criminal offense under section 520e or 520g of the Michigan penal code, 1931 PA 328, MCL 750.520e and 750.520g. A certified copy of the court record is conclusive evidence of the conviction.

(viii) Conviction of a violation of section 492a of the Michigan penal code, 1931 PA 328, MCL 750.492a. A certified copy of the court record is conclusive evidence of the conviction.

(ix) Conviction of a misdemeanor or felony involving fraud in obtaining or attempting to obtain fees related to the practice of a health profession. A certified copy of the court record is conclusive evidence of the conviction.

(x) Final adverse administrative action by a licensure, registration, disciplinary, or certification board involving the holder of, or an applicant for, a license or registration regulated by another state or a territory of the United States, by the United States military, by the federal government, or by another country. A certified copy of the record of the board is conclusive evidence of the final action.

(xi) Conviction of a misdemeanor that is reasonably related to or that adversely affects the licensee's or registrant's ability to practice in a safe and competent manner. A certified copy of the court record is conclusive evidence of the conviction.

(xii) Conviction of a violation of section 430 of the Michigan penal code, 1931 PA 328, MCL 750.430. A certified copy of the court record is conclusive evidence of the conviction.

(xiii) Conviction of a criminal offense under section 83, 84, 316, 317, 321, 520b, 520c, 520d, or 520f of the Michigan penal code, 1931 PA 328, MCL 750.520b, 750.84, 750.316, 750.317, 750.321, 750.520b, 750.520c, 750.520d, and 750.520f. A certified copy of the court record is conclusive evidence of the conviction.

(xiv) Conviction of a violation of section 136 or 136a of the Michigan penal code, 1931 PA 328, MCL 750.136 and 750.136a. A certified copy of the court record is conclusive evidence of the conviction.”

Minnesota: Under the Minnesota Psychology Board's rules of conduct, licensed psychologists must not violate any law in which the facts giving rise to the violation involve the practice of psychology. Violations of the rules of conduct can result in disciplinary action including denial of licensure. (Minn. Admin Rules s. 7200.4500 and 7200.5500).

Summary of factual data and analytical methodologies:

The Psychology Examining Board reviewed and seeks to revise its rules to bring them into compliance with the statutory changes enacted by 2017 Wisconsin Act 278.

Analysis and supporting documents used to determine effect on small business or in preparation of economic impact report:

The rule was posted for 14 days on the department's website to solicit input on possible economic impact. No comments were received.

Fiscal Estimate and Economic Impact Analysis:

The Fiscal Estimate and Economic Impact Analysis is attached.

Effect on small business:

These proposed rules do not have an economic impact on small businesses, as defined in s. 227.114 (1), Stats. The Department’s Regulatory Review Coordinator may be contacted by email at Daniel.Hereth@wisconsin.gov, or by calling (608) 267-2435.

Agency contact person:

Sofia Anderson, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 4822 Madison Yards Way, P.O. Box 8366, Madison, Wisconsin 53708; telephone 608-261-4463; email at DSPSAdminRules@wisconsin.gov.

TEXT OF RULE

SECTION 1. Psy 2.01 (8) is repealed and recreated to read

Psy 2.01 (8) Documentation necessary for the Board to determine, subject to ss. 111.321, 111.322, and 111.335, Stats., whether any of the following apply:

(a) The applicant has a pending charge for an exempt offense as defined in s. 111.335 (1m) (b), Stats. or a violent crime against a child, as defined in s. 111.335 (1m) (d), Stats., which is substantially related to the practice of a psychologist.

(b) The applicant has been convicted of a crime substantially related to the practice of a psychologist.

SECTION 2. EFFECTIVE DATE. The rules adopted in this order shall take effect on the first day of the month following publication in the Wisconsin Administrative Register, pursuant to s. 227.22 (2) (intro.), Stats.

(END OF TEXT OF RULE)

Dated _____

Agency _____

Chairperson
Psychology Examining Board

**Psychology Examining Board
Rule Projects (updated 11/4/21)**

Clearinghouse Rule Number	Scope #	Scope Expiration	Code Chapter Affected	Relating clause	Current Stage	Next Step
21-080	060-21	12/21/2023	Psy 1, 2, and 4	Legislative Update (2021 WI Act 22) – Permanent Rule	Rule draft sent to Clearinghouse on 10/14/21. Clearinghouse review ends on 11/11/21. Public hearing scheduled on 11/17/21.	Draft to Governor after the public hearing.
EmR 2127	060-21	12/21/2023	Psy 1, 2, and 4	Legislative Update (2021 WI Act 22) – Emergency Rule	Effective as of 11/2/21. It will remain in effect until 11/2/2023 or until the permanent rule takes effect.	Public Hearing scheduled on 11/17/21.
21-084	N/A	N/A	Psy 2.013 (3), 2.018, 3, 4.025 (4), and 5	Expedited Repeal	Submitted to Legislature on 9/23/21. Pending reply.	Approval by Legislature
21-014	058-20	12/08/2022	Psy 2	Reciprocal Credentials	Drafting Final Rule and Leg. Report. This rule was added to Psy 1, 2, and 4.	
21-003	006-19	7/14/2021	Psy 2	Discrimination based on arrest or conviction record	Drafting Adoption Order.	Adoption Order approval by Board.
21-016	130-20	4/12/2023	Psy 5	Telehealth	Drafting prelim rule. On hold pending telehealth bill 2021 SB 309 and 2021 AB 296.	

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request:		2) Date When Request Submitted:	
Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting			
3) Name of Board, Committee, Council, Sections:			
4) Meeting Date:	5) Attachments: <input type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page?	
7) Place Item in: <input type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes (<u>Fill out Board Appearance Request</u>) <input type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed:			
11) Signature of person making this request		Authorization	Date
Supervisor (if required)			Date
Executive Director signature (indicates approval to add post agenda deadline item to agenda)			Date
Directions for including supporting documents:			
1. This form should be attached to any documents submitted to the agenda.			
2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director.			
3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

Profession/Method**Profession:** 057 (Psychologist)**Sub-Profession:****Kind:****Specialty:****Method:** NEW (Original Application - Never Licensed Before)**Checklist Notes:**Please go online for future updates at <http://dps.wi.gov> and look for the 'Application Status' link.[Add a New Standard Requirement](#)**Requirements**

Name	Description	Order	Status	Public	Active	Delete
APP COMP	Application Complete	1	Not Met	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
FEE	Application Fee	2	Not Met	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
FeeReduction	Initial credential fee reduction (Form #3217)	3	Not Applica	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Interim License	Interim License - form 1634	4	Not Met	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Wisconsin Statutes & Rules Examination	Wisconsin Statutes & Rules Examination	5	Not Met	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
TRANDOC	Doctorate Transcripts	6	Not Met	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
EPPP AUTH APP	EPPP Authorization Application	7	Not Met	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
POSTDOCSUP	Post Doctorate Supervised Psych Experience (Form #2555)	8	Not Met	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
1500 Supervised Hours part A	1500 Supervised Hours part A - form 2555	9	Not Met	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
1500 Supervised Hours part B	1500 Supervised Hours part B - form 2555	10	Not Met	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
PES/EPPP	PES / EPPP	11	Not Met	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
VERI LIC	Verification of other state license(s) and/or credential(s)	12	Not Applica	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Conviction form #2252	Information on Conviction(s)/Pending Charge(s) (Form #2252)	13	Not Applica	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
BD APPROVE	Board Approval	14	Not Met	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
ORAL	Oral Exam	15	Not Met	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Lamb, Jennifer - DSPS

From: Lange, Samantha J - DSPS
Sent: Wednesday, November 3, 2021 12:13 PM
To: Lange, Samantha J - DSPS
Subject: Psych issued July - Oct 2021

	A	B	C	D	E	F
PSYCHOLOGY BOARD						
	Month	Date Approved	Name of Applicant	License #	City	State
5	Jul-21	7/1/2021	Stephen Molitor	3968-57	Greenfield	WI
5	Jul-21	7/2/2021	Richard Kneip	3969-57	Lake Orion	MI
7	Jul-21	7/8/2021	Hina Siddiqui	3970-57	Woodbury	MN
3	Jul-21	7/20/2021	Xu Li	3971-57	Oak Creek	WI
9	Aug-21	8/16/2021	Shanna Thomsen	3972-57	Milwaukee	WI
0	Aug-21	8/19/2021	Lauren Meyer	3973-57	Madison	WI
1	Aug-21	8/19/2021	Phillip Buttner	3974-57	Madison	WI
2	Aug-21	8/19/2021	Desiree Hawley	3975-57	Burlington	WI
3	Aug-21	8/27/2021	Alexa Mouloupoulos	3976-57	Milwaukee	WI
4	Sep-21	9/2/2021	Rachel Zachar-Tirado	3977-57	Grand Rapids	MI
5	Sep-21	9/2/2021	Christopher Zachar-Tirado	3978-57	Grand Rapids	MI
5	Sep-21	9/7/2021	Michael Cohn	3979-57	Madison	WI
7	Sep-21	9/7/2021	Kara Mayer	3980-57	Madison	WI
3	Sep-21	9/13/2021	Josie Ullsperger	3981-57	Madison	WI
9	Sep-21	9/17/2021	Vanessa Aguilera	3982-57	Memphis	TN
0	Sep-21	9/17/2021	Samantha Klocknow	3983-57	Hartland	WI
1	Sep-21	9/24/2021	Kaitrin Conniff	3984-57	Madison	WI
2	Sep-21	9/24/2021	Emily Peissig	3985-57	Horicon	WI
3	Sep-21	9/28/2021	Amber Craig	3986-57	Wauwatosa	WI
4	Sep-21	9/29/2021	Stephan Siwiec	3987-57	Wauwatosa	WI
5	Oct-21	10/12/2021	Ashley Whitmarsh	3990-57	Appleton	WI
5	Oct-21	10/20/2021	Jessica Lahner	3991-57	Waukesha	WI
7	Oct-21	10/21/2021	Sindes Dawood	3997-57	Columbus	OH

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Brad Wojciechowski		2) Date when request submitted: November 10, 2021 <small>Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting</small>	
3) Name of Board, Committee, Council, Sections: Psychology Examining Board			
4) Meeting Date: November 17, 2021	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Agenda Item "I" 2) EPPP-2	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? <i>(If yes, please complete Appearance Request for Non-DSPS Staff)</i> <input type="checkbox"/> Yes <Appearance Name(s)> <input type="checkbox"/> No	9) Name of Case Advisor(s), if applicable: <Click Here to Add Case Advisor Name or N/A>	
10) Describe the issue and action that should be addressed: Board discussion of EPPP-2			
11) Authorization <div style="text-align: right; margin-right: 50px;">11/10/2021</div>			
Signature of person making this request			Date
Supervisor (Only required for post agenda deadline items)			Date
<div style="text-align: right; margin-right: 50px;">11/10/2021</div>			Date
Executive Director signature (Indicates approval for post agenda deadline items)			Date
Directions for including supporting documents: 1. This form should be saved with any other documents submitted to the Agenda Items folders. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

The Enhanced Examination for Professional Practice in Psychology: A Viable Approach?

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Debora J. Bell
University of Missouri—Columbia

Joanne Davila
Stony Brook University

Sheri L. Johnson
University of California, Berkeley

Timothy J. Strauman
Duke University







Cindy M. Yee
University of California, Los Angeles

Health disciplines have increasingly required competency-based evaluations as a licensure prerequisite. In keeping with this trend, the Association of State and Provincial Psychology Boards (ASPPB) has begun to develop a second part to the Examination for Professional Practice in Psychology (EPPP). The resulting 2-part examination is collectively referred to as the Enhanced EPPP. Part 1 of the Enhanced EPPP, which consists of the current exam, is designed to be an assessment of knowledge. Part 2 of the Enhanced EPPP is newly developed and intended to address the need for a competency-based evaluation. To date, ASPPB has addressed some standard facets of validity for the EPPP Part 2, but not others. In addition, the EPPP Part 2 has yet to be subjected to a broader validation process, in which the suitability of the test for its intended purpose is evaluated. Implementation of the EPPP Part 2 before validation could have negative consequences for those seeking to enter the profession and for the general public (e.g., potential restriction of diversity in the psychology workforce). For jurisdictions implementing the EPPP Part 2, failure to gather and report the evidence required for use of a test in a forensic context may also open the door for legal challenges. We end with suggestions for feasible research that could significantly enhance the validation process for the EPPP Part 2 and offer jurisdictions concrete suggestions of features to look for in determining whether and when to implement the Enhanced EPPP.

Public Significance Statement

The national licensing exam for psychologists acts as a gatekeeping evaluation intended to protect public welfare. To date, the suitability and value added of the EPPP Part 2 is unclear, and ASPPB has described only limited plans to conduct validation of the EPPP Part 2. Validation of the planned revision to the exam is of crucial significance to the entire profession and serves to protect the discipline's reputation as a health service provider.

Keywords: licensure, validity, validation, Examination for Professional Practice in Psychology (EPPP), Association of State and Provincial Psychology Boards (ASPPB)

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Subsequent to Jennifer L. Callahan, authors are listed alphabetically and contributed equally to the manuscript.

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**Jennifer L.
Callahan**

Photo by George Dean

Almost 2 decades ago, the Institute of Medicine (IOM), Board on Health Care Services, Committee on the Health Professions Education Summit (2003) recommended that competency-based education become the standard of training for all health service provider disciplines. Across the ensuing years, health service psychology has made important strides in assimilating this recommendation into doctoral psychology education and training (APA, 2018; Callahan & Watkins, 2018a; Callahan & Watkins, 2018b). Although there is no consensus across higher education on a standard operational definition of competency-based education (Gervais, 2016), the general approach is one that shifts curricular attention away from future-oriented goals and objectives to evaluation of present tense, realized outcomes (see O'Connell & Moomaw, 1975 for a review of conference discussions that led to that seminal distinction). Correspondingly, in keeping with IoM's recommendation, recent years have seen a shift in doctoral psychology accreditation requirements away from a focus on delineating program-level goals and objectives in future tense language (*Guidelines and Principles for Accreditation of Programs in Professional Psychology*, APA, 2008) toward a focus on assessment and documentation of student-centered, present-tense competency attainments (*Standards of Accreditation for Health Service Psychology*, APA, 2018).

A natural extension of the IoM's recommendation for competency-based education is a growing trend across health care fields toward competency-based evaluation of licensure candidates seeking to enter their profession. All major health care professions in the United States have developed, validated, and disseminated assessment procedures for evaluating the preparation and appropriateness of

candidates for licensure. Historically, prior to the IoM recommendation, such evaluations focused on assessment of foundational knowledge using standardized multiple-choice examinations (e.g., the Examination for Professional Practice in Psychology [EPPP]). In contrast, more contemporary competency-based evaluations assess how adept a licensure candidate is with applying the requisite professional knowledge, skills, values, attitudes, and behaviors under authentic practice conditions.

Consistent with these national trends across health services, the Association of State and Provincial Psychology Boards (ASPPB) has begun to revise the existing EPPP to incorporate competency assessment into the evaluation of candidates for licensure as a psychologist. The primary revision of the EPPP (which ASPPB now calls the Enhanced EPPP) involves developing an additional competency-based test (referred to as Part 2) to supplement the existing, traditional foundational knowledge test (hereafter referred to as Part 1). Descriptions of Part 1's development and validity, as well as longstanding concerns associated with the exam, have already been identified and debated in the peer reviewed literature (e.g., DeMers, 2009; DiLillo & Tremblay, 2009; Erikson Cornish & Smith, 2009; Rosen, Reaves, & Hill, 1989; Ryan & Chan, 1999) and will not be repeated herein. Rather, this article primarily focuses on the emergence of Part 2. To facilitate clarity across the larger literature, we will note where an issue pertains to both Part 1 and Part 2. As ASPPB has suggested including both Part 1 and Part 2 in the Enhanced EPPP, we will also discuss consequent issues associated with incremental validity in this article.

Is Part 2 Ready for Implementation?

Test development necessitates a systematic and coordinated approach that examines validity as well as validation before implementation. Despite the phonemic similarity between "validity" and "validation," the two terms are associated with different meanings—accuracy versus appropriateness, respectively—and hold different implications as they pertain to test development (Cizek, 2016; Hughes, 2018). The highly cited *Standards for Educational and Psychological Testing* (referred to simply as *Standards* hereafter; American Educational Research Association, American Psychological Association, & National Council on Measurement in Education, 2014) defines validity as "a unitary concept" (p. 14). Fundamental to that definition is that all validity is construct validity,¹ and careful adherence to the *Standards* is widely regarded as best practice for ensuring test validity (e.g., Wise & Plake, 2016).

¹ As such, types of validity (e.g., predictive validity, content validity) are not specifically delineated or considered in the *Standards*.



Debora J. Bell

According to public statements issued by ASPPB, the *Standards* form the basis of the technical work being conducted to develop Part 2 of the Enhanced EPPP. As Cizek (2012) noted, however, a narrow and technical focus on validity cannot determine whether a testulti-

mately should be used for the proposed purpose. Test validity is only one part of a larger iterative validation process (see Figure 1). The goal of such a validation process is to determine whether a test is appropriate for use (e.g., Cizek, 2012; Hubley & Zumbo, 2011; Kane, 2016; Newton & Shaw, 2013; Shepard, 2016; Sireci, 2016; Zumbo & Hubley, 2016). During validation, “It is the interpretations of test scores for proposed uses that are evaluated, *not the test itself*” (American Educational Research Association et al., 2014, p. 11, emphasis added). Standard practice dictates that the test developer and publisher hold joint responsibility for the technical question of whether a test can be used (relying on psychometric evidence of construct validity), while stakeholders are responsible for resolving the ethical question of whether a test should be used (in light of findings from validation studies). In this article, we seek to promote a transparent and balanced validation process that brings together the test developers and stakeholders in a productive partnership. In the sections that follow, we consider the current state of validation of Part 2.

First, we review the facets of validity that have and have not been established. We contend that beyond the initial validity tests, ASPPB has not yet acknowledged the need for a broader, comprehensive process of validation. We highlight some concrete examples of ways in which premature use of Part 2 might be inappropriate and

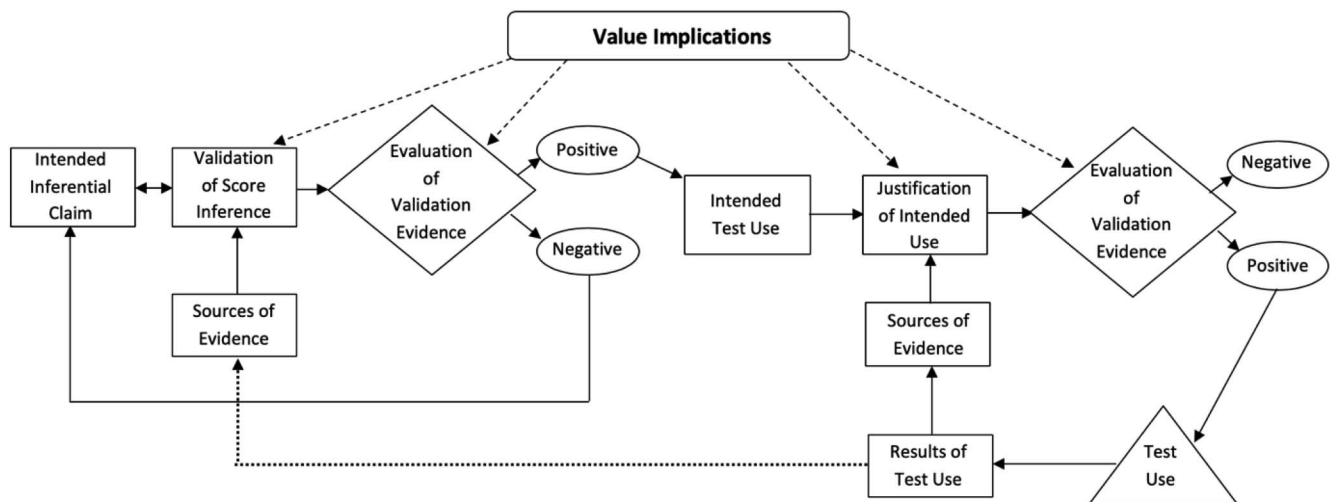


Figure 1. Relationships between validation of score inference and justification of test use. The solid lines and arrows in the figure represent a linear flow of activities (single-ended arrows) or a recursive process (double-ended arrow). The value considerations (indicated by dashed lines in the upper half of the figure) are not a similarly linear flow; rather, they permeate all of the score inference validation and score use justification process. The solid line from the Results of Test Use box indicates that results directly provide a source of evidence contributing to the corpus of justification evidence, whereas the dotted line from that box indicates that the same results might also produce evidence bearing on the intended score interpretation. Figure reprinted with permission from “Defining and Distinguishing Validity: Interpretations of Score Meaning and Justifications of Test Use,” by G. J. Cizek, 2012, *Psychological Methods*, 17, p. 36. Copyright 2012 by American Psychological Association.



Joanne Davila

yield unintended consequences that could have been identified prospectively and addressed via a more thorough validation process. Premature adoption and its potential for adverse consequences also raises the question of whether Part 2 can withstand challenges in the courts, and so we pay particular attention to legal standards regarding appropriateness of test implementation.

Second, we draw attention to the present lack of involvement and buy-in from relevant stakeholders and argue for the merits of broader collaboration and the peer-review process. To provide a comparison to the test development process associated with the Enhanced EPPP, we summarize the recent focus in medical competency evaluations on careful and iterative collection of validity data and the broader process of test validation. We also provide some historical context for our expectations by briefly summarizing validation studies of the original EPPP (i.e., Part 1) in which ASPPB, jurisdictions, and independent investigators collaborated successfully.

We wish to emphasize that we are not questioning the need to assess applied knowledge or skills as part of licensure readiness, or questioning the importance of what ASPPB has undertaken. Rather, we highlight standard goals in test development that we believe have not been fully achieved in the development of Part 2 in the Enhanced EPPP, even as it is evident that other disciplines have been able to do so effectively. Without further test development and validation, it is unclear whether Part 2 is positioned to accomplish its stated aim. We end by urging the discipline as a whole to consider issues of validation and to exercise its collective responsibility to determine whether or not there is

sufficient evidence to justify and ethically implement Part 2 of the Enhanced EPPP.

Summary of Validity and Validation Evidence

Table 1 highlights 10 forms of evidence² that may be used to establish the accuracy (validity) and appropriateness (validation) of a test such as the Enhanced EPPP. In addition to reporting the prevalence of each type of evidence in recent test development articles, Table 1 includes (a) an example of how that evidence type applies to the Enhanced EPPP and (b) whether ASPPB has indicated plans to provide such evidence.³

Validity evidence. As shown in Table 1, the strength of the Enhanced EPPP Part 2 stems from the careful test development process of identifying critical content via a profession-wide job tasks survey, writing items to fit that content, and evaluating item performance via item response theory analyses. ASPPB has provided evidence for this type of validity.

The second type of evidence in the table, structural, is a relative weakness in ASPPB's communications and actual analyses. Ninety percent of test development articles report statistics associated with structural evidence of validity (Hughes, 2018), yet such analyses have not been described or reported by ASPPB to date. According to ASPPB, Part 2 of the Enhanced EPPP is intended to capture six different forms of competency: scientific orientation; assessment and intervention; relational competence; professionalism; ethical practice; and collaboration, consultation, and supervision. Structural analyses, such as factor analyses or multi-dimensional item response theory, could assess whether items cohere into unique subscales capturing these six domains (as compared to forming one unified factor that captures a more general knowledge of the field, or the ability to use logic and intelligence to solve test items, as two examples).

Another apparent limitation in ASPPB's communication and analytic approach pertains to stability across groups (the third entry in Table 1). Reflecting their appreciation for the risk of differential item functioning across subgroups of examinees, ASPPB describes efforts to include diverse individuals among job task survey respondents and Part 2 item writers, to train item writers to avoid cultural and linguistic bias, and to have an evaluation committee conduct

² Table 1 validity and validation types are drawn from a review of all newly developed scales published in two of the most highly regarded psychometrics journals, *Psychological Assessment* and *Assessment*, between April 2015 and June 2016 (Hughes, 2018). We do not attempt to include all possible approaches, but focus on the most commonly used approaches. For example, we do not cover response process validity, which is an important and underutilized approach.

³ We do not have a full list of ASPPB plans, and this review focuses on the statements offered in their description of the EPPP Part 2 (ASPPB, 2017).



Sheri L. Johnson

item level screening for possible bias (ASPPB, 2017). These efforts are laudable, though perhaps overly narrow in focus (e.g., socioeconomic status and/or implicit bias do not appear to have been considered). Despite this seeming awareness, ASPPB does not describe a plan to evaluate whether or not those efforts actually produce stable validity indices, for content or structure, across subgroups.

Examination of measurement and structural invariance in organizational research provides a way to examine these issues, providing an evidence-based method to assess comparability across gender, race, ethnicity, and socioeconomic status (Vandenberg & Lance, 2000). In personal communication to members of the California Board of Psychology (undated, but distributed around January 29, 2019), ASPPB's senior director of examination services (M. Turner) and the ASPPB Implementation Task Force chair (E. Rodolfa) indicated that scores from individuals in early adopter jurisdictions will be used to set the pass point, pass rates, and determine item level psychometric data. Although beta-testing could be carried out on known groups to allow for examination of measurement and structural invariance, the letter to the California Board indicates exclusive reliance on convenience sampling that is dependent upon a cohort of applicants from early adopter jurisdictions. We view this testing and sampling strategy as inadequate with respect to issues of both validity and validation.

Validation evidence. At a broad level, the remaining eight indices found in Table 1 all pertain to validation of a test with regard to its intended use. ASPPB has argued that assessing the appropriateness of the Enhanced EPPP is beyond the scope of their duty, with no plans or intention to conduct any such investigations (ASPPB, personal commu-

nication, January 29, 2019). As test developers who hold responsibility for establishing technical validity, one might reasonably agree with their position that such investigations are beyond their requisite duty. It is undeniable, however, that validation to determine appropriateness is a critical component of the development process and it appears to have been neglected thus far.

Although ASPPB's mission is "[t]o support member jurisdictions in fulfilling their responsibility of public protection," we would argue that, indeed, they are not positioned to successfully complete a validation process independently. Test justification decisions must be guided by the values of the profession and the ethics of the field (see Figure 1). As such, validation must be inclusive of the varied stakeholders across health service psychology education, training, and licensure, as well as the public. Validation is a major undertaking and the process might seem overwhelming. Yet, psychological science as a discipline has a huge investment and is well positioned to address the challenge. Test validation is a core facet of psychological research that is a central career goal for many psychological scientists. Accordingly, the field is rich with individuals who could contribute to this process. While this process may be outside the scope of ASPPB's mission, ASPPB is well positioned to facilitate a spirit of cooperative, stakeholder-driven validation processes that services the ultimate aim of protecting the public and builds confidence among stakeholders in the ultimate value and appropriateness of the proposed test. Historically, during the development of the original EPPP, ASPPB encouraged and facilitated a series of cooperative validation processes (see Shrader, 1980, for a review).

Consequences of Implementation Without Comprehensive Validation

As a high-stakes examination, implementation of the Enhanced EPPP before completing a comprehensive, psychometrically rigorous process of validation may have important implications for individuals seeking licensure as well as for the general public. Although not a complete listing, some prominent concerns include: diversity constriction, consequences for doctoral training, jurisdictional inconsistency, personal finance implications, and legal challenges. We discuss these concerns in the context of both the current EPPP, as well as the enhanced EPPP (which includes both Parts 1 and 2) because implementation of the Enhanced EPPP is directly linked to present use of the current EPPP.

Failing to address diversity and inclusion issues. Racial and ethnic minorities, men, and individuals with disabilities are all underrepresented in psychology's emerging workforce (Callahan et al., 2018). Failure to develop an equitable exam may directly contribute to further diversity constriction in the future workforce and undermine the



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likelihood of successfully meeting the mental health needs of an increasingly diverse population (e.g., Agency for Healthcare Research and Quality, 2017; Ibaraki & Hall, 2014; Owen, Tao, Imel, Wampold, & Rodolfa, 2014; Tao, Owen, Pace, & Imel, 2015). Thus, ensuring that the EPPP Part 2 is unbiased is of crucial importance given the underrepresentation of minorities within psychology.

Evidence from investigators working with the second APA Task Force of the Commission on Ethnic Minority Recruitment, Retention and Training suggests that the EPPP Part 1 systematically constricts racial and ethnic diversity in the workforce (Bowman & Ameen, 2018). Relatedly, Sharpless and Barber (2009) found that increased student body diversity was associated with lower EPPP pass rates at the program level. Further, in a recent study that drew upon the Freedom of Information Act to gain access to the full population of data associated with a large, populous state (N examinees = 4,892), the failure rate at first exam attempt clearly varied by race and ethnicity (African/American or Black = 38.50%; Hispanic/Latinx = 35.60%; Asian = 24.00%; White, non-Hispanic = 14.07%; Sharpless, 2019).

Further evidence of workforce diversity constriction emerged in Puerto Rico when attempting to translate the EPPP into Spanish. Puerto Rico became a member of ASPPB on the condition that a bilingual Spanish EPPP (S-EPPP) would be made available to applicants in that jurisdiction (Law 281–2012). ASPPB translated two forms of the EPPP into Spanish and began to offer them in Puerto Rico (Hilson, 2016). However, as described in Law 193–2015, preparation of those forms was rushed, did not engage stakeholders, and did not include a sufficient validation process. After the launch, the failure rate on the S-EPPP was

so high that it resulted in a workforce crisis across the jurisdiction and the earlier law was revoked (via Law 193–2015). ASPPB subsequently discontinued the S-EPPP entirely (ASPPB, 2016).

Smaller, but still discernible, differences have also been observed based on binary gender identification with men failing more often than women (18.85% vs. 15.82%). We did not locate any data regarding disability status and EPPP scores, suggesting an area of needed research. However, we did find evidence that pass rates on the United States Medical Licensing Examination (USMLE), which serves a similar professional gatekeeping purpose, were lower for those with disabilities (Meeks & Herzer, 2015). Similar inquiries in other health care professions, such as psychology, may be informative in understanding the possible role of credentialing examinations in the underrepresentation of individuals with disabilities in the workforce.

Consequences for doctoral training. Based on the observation that candidates pass at a higher rate when the current EPPP is taken closer to the completion of doctoral coursework (Schaffer et al., 2012), ASPPB infers that it would be beneficial for students to take the current knowledge exam (Part 1) of the Enhanced EPPP before completing dissertation and internship requirements. Hence, when Part 2 is introduced, timing of Part 1 is expected to shift. There are multiple conceptual and pragmatic complications for doctoral training that are associated with this inference but, for efficiency, we will draw attention to two conceptual problems that may be less obvious.

First, assessment of the knowledge base in psychological science and clinical application training is regulated by doctoral program accreditation (e.g., APA, 2018; Psychological Clinical Science Accreditation System, 2011), with the understanding that competency-based evaluations are the responsibility of doctoral programs, not ASPPB. While ASPPB can, and should, participate as a stakeholder in doctoral accreditation regulation processes, ASPPB assessment of this same body of knowledge is unjustified. Observation that exam pass rate likelihood is tied to proximity of doctoral coursework (Schaffer et al., 2012), coupled with findings that pass rates are higher among students graduating from accredited programs (McGaha & Minder, 1993; Ross, Holzman, Handal, & Gilner, 1991; Schaffer et al., 2012; Templer & Tomeo, 1998; Templer & Tomeo, 2000; Yu et al., 1997), suggests doctoral programs and their accrediting bodies are performing their duties well. Indeed, the strong correspondence between timing of doctoral coursework completion and success on the Part 1 knowledge exam suggests unnecessary evaluative redundancy. In addition, trainees will be subjected to preparing for Part 1 of a licensure exam that overlaps with required preparation and testing for high stakes program requirements that include, but are not limited to, qualifying and comprehensive examinations as well as the dissertation proposal defense.



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Second, placement of Part 1 testing within doctoral training may significantly undermine the quality of doctoral training itself. Exam preparation time seems highly likely to draw time away from research, teaching, and/or practicum training that is necessary for development of these skills and abilities. To preserve time for those experiences, programs may feel pressed (by students and/or faculty) to teach to the test. There is an additional risk that some internship sites could screen applicants by stratifying them according to their Part 1 exam scores. As described earlier, it has already been demonstrated that Part 1 scores are associated with unintended racial/ethnic referents (Bowman & Ameen, 2018) as well as gender (Sharpless, 2019). As such, internship placements could quickly begin to inadvertently stratify by demographic variables if applicants are screened by test score.

Inconsistencies in implementation across states. If both parts of the Enhanced EPPP are retained, the timing of the two exams will be determined by each state licensing board, with exam readiness requirements likely to vary across jurisdictions (as they do now). Such variability may inadvertently contribute to inequities by enabling trainees from jurisdictions with earlier exam completions to be more rapidly available to compete for employment. (We note that such variability is not found in the medical licensure process, which itself is conducted by licensing boards in each state.) Differences in licensing guidelines would also likely further hinder professional mobility. Sample scenarios for consideration: Will it be necessary to retake the EPPP Part 1 if a candidate is seeking licensure in a state that requires completion of both sections at the postdoctoral level? Will jurisdictions with less restrictive limits on access to the

EPPP Part 1 receive a disproportionate increase in the number of potential licensees who indicate intent to practice in that state? Will federal employees disproportionately seek and maintain licenses in states where they do not reside to avoid local regulations? Each of these requires careful consideration. At a minimum, the current implementation plans for the Enhanced EPPP appear likely to amplify existing problems related to jurisdictional inconsistency rather than resolve them. Likewise, there is no evidence to date that a majority of jurisdictions are satisfied with the validation process and willing to incorporate the new test into their licensing procedures.

Personal financial burden. Doctoral training in health service psychology typically results in significant debt burden by the time of licensure eligibility (Doran, Kraha, Marks, Ameen, & El-Ghoroury, 2016). Fees for test registration and exam preparation materials are scheduled to increase substantially with the advent of the Enhanced EPPP's two-part examination model. Although ASPPB indicates efforts to contain fee increases associated with the Enhanced EPPP, it seems inevitable that most exam costs will double relative to current levels. In addition to direct expenses, it is likely that licensure applicants will incur indirect costs as well, such as lost productivity and income and greater debt as employment is delayed while trainees prepare for the longer, two-part exam. Of import, available evidence suggests that student diversity status, debt load, and likelihood of passing the current EPPP intersect (Bowman & Ameen, 2018; Doran et al., 2016; Sayette, Norcross, & Dimoff, 2011), raising concerns that the Enhanced EPPP will further limit access to the field for trainees from diverse racial, ethnic, or socioeconomic backgrounds.

Possible legal challenges. "According to ASPPB, the EPPP Part 2 is an assessment of skills or application of knowledge in a manner that is reliable, valid and defensible" (H. Broadus, personal communication, February 5, 2019). Because ASPPB has apparently been understood by staff of the Arizona Board of Psychologist Examiners as asserting defensibility, consideration of legal standards for high stakes assessment is worth brief consideration. According to the Supreme Court (*Daubert v. Merrell Dow Pharmaceuticals*, 1993), there are four specific qualities applied to tests being introduced in a legal context that determine the admissibility of scientific evidence. All four of the following conditions must be met: testability, peer-review and publication, error rate, and general acceptance. Based on what is known at this time, it is not clear whether the Enhanced EPPP meets any of the *Daubert* requirements.

In written and verbal statements, ASPPB has used a variety of terms to describe their hypothesis regarding what the Enhanced EPPP, particularly Part 2, is designed to evaluate. Developed under the auspices of competency-based evaluation, Part 2 is commonly described as "a test of skills" or "an integrated test of knowledge and skills" while

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Table 1
Types of Validity Evidence to Support Accuracy and Appropriateness, Frequency of Use, Application to the Examination for Professional Practice in Psychology (EPPP Part 2, and Planned Use by the Association of State and Provincial Psychology Boards (ASPPB)

Type of evidence	Definition	Percent usage in recent test development articles (Hughes, 2018)	Example relevant to EPPP Part 2	Described by ASPPB (2017) for EPPP Part 2?
Accuracy Indices				
Content	The degree to which the items of a measure comprehensively captures the target construct	55	Items match the types of competencies described in the job analysis survey	Yes
Structural	The degree to which the relationships among items reflect the theoretical framework (e.g., confirmatory factor analysis)	90	If the aim is to assess different aspects of competency, items for those different facets cohere into statistically distinct subscales	No ^a
Stability across groups	The degree to which the content and structural validity indicators are stable across groups	35	The degree to which items appear to relate to total scores in a similar manner for those from different socioeconomic status, ethnic and racial backgrounds, and gender	The goal is reported, but the details of which subgroups are being considered is not provided
Appropriateness indices				
Convergent	The relationship of the new scale to other measures of the same construct	75	The degree to which EPPP Part 2 scales relate to other indices of competency, such as program evaluations of clinical competency	No
Concurrent	Cross-sectional correlation of scores on the new test with criterion data collected at the same time	60	The degree to which EPPP Part 2 scales relate to completion of clinical psychology doctoral degree, to other indicators of skills in clinical psychology	No
Predictive	The ability of scores on the new test to longitudinally predict criterion scores	10	Over time, the degree to which EPPP Part 2 scores are found to relate to licensing board censure, client complaints, or dismissal from employment	No; we concur with ASPPB that, unless individuals are tracked across the span of their career, this would be difficult to demonstrate
Discriminant	The relationship of scores on the new test with scores on measures assessing different constructs	85	EPPP Part 2 scores are not well explained by general academic/test taking, personality or intellectual skills, or by variables such as socioeconomic status	No
Incremental	Improvements in prediction of a criterion variable added by scores on the new test and above other measures	20	Does the EPPP Part 2 predict performance in clinical roles above and beyond the EPPP Part 1?	No
Known groups	The extent to which the new measure correctly discriminates between those known to be low and those known to be high in a construct	10	People who have received ethical censure from state boards could be paid to take the EPPP Part 2; their scores could be compared to those with no such record	No
Consequences	The intended and unintended consequences of test use	0	Degree to which EPPP Part 2 shows bias against certain groups of people, including those coming from disadvantaged backgrounds	No
Feasibility	The practical concerns related to use of the new test, such as cost, time, and respondent reactions	0	EPPP Part 2 cost is estimated to be twice the fee of current testing and require an additional day of testing at a later time point (a protracted process); will require concentrated preparation from trainees	ASPPB offered a limited period of reduced fee to address concerns raised by graduate trainees and professors

^a ASPPB refers to an item response theory (IRT) approach consistently in its slideshows and accompanying narration, regardless of presenter. Unidimensionality is an assumption of IRT that would preclude examination of the six-factor structure that ASPPB repeatedly assures is present in Part 2. It is entirely possible that the actual statistician employed by the test publisher working with ASPPB is using multidimensional IRT, which would allow for such structural evidence. Unfortunately, ASPPB has appeared to be unwilling or unable to provide further information with respect to the IRT analyses.

“a test of applied knowledge” has also been acknowledged (J. Horn, personal communication, January 18, 2019, 2019 Council of University Directors of Clinical Psychology Mid-Winter Meeting). Such a multiplicity of descriptions suggests a lack of clear theoretical grounding or falsifiability and, consequently, potential failure to meet the testability requirement. ASPPB’s exclusive reliance on unpublished research that has not been subjected to scholarly peer review falls short of meeting the second requirement of peer review and publication (Reisberg, Simons, & Fournier, 2016). The lack of external validity evidence precludes identification of an error rate (Faigman, 2013; Gatowski et al., 2001; Meixner & Diamond, 2014), which violates the third requirement.

The fourth and final requirement, general acceptance, refers specifically to acceptance by the relevant scientific and professional communities. A letter to ASPPB (D. Bell, personal communication, October 5, 2018) indicates that Part 2 has not attained general acceptance by relevant scientific communities. The letter—sent on behalf of 10 councils and professional organizations⁴ who collectively represent approximately 800 doctoral training programs or clinics in health service psychology, spanning all licensure jurisdictions—detailed multiple concerns associated with the construction and implementation of Part 2. To summarize, the letter stated that the councils and organizations

remain deeply concerned that the measure development process is inadequate and the planned launch of the Enhanced EPPP is premature. We strongly urge ASPPB to (1) address the many stakeholder concerns regarding development of a high-quality, valid, and accessible exam, (2) not hesitate to slow and alter exam development to fully resolve these challenges and concerns, and (3) more fully involve stakeholders, including state associations and training councils, in constructive dialogue and data collection that resolves these issues. (p. 2)

In fact, some jurisdictions have chosen not to adopt the EPPP Part 2, including, most recently, New York (New York State Education Department, Office of the Professions, Board of Psychology, personal communication, September 4, 2019).

Altering the Trajectory

It is ultimately the responsibility of jurisdictions to determine how and when to implement any changes to licensure examinations. Jurisdictions are not only within their scope of authority to make all implementation decisions, it is their duty to make reasoned, evidence-based decisions that protect the public’s interests. In forming expectations around what constitutes sufficient validation prior to implementation, jurisdictions may find it useful to consider how other health care professions have approached the need to modernize licensure examinations in their disciplines and miti-

gate shortcomings that potentially jeopardize the best interests of consumers in their jurisdictions.

Lessons From the Assessment of Licensure Readiness in Other Health Service Disciplines

The National Board of Medical Examiners (NBME, 2019), responsible for competency assessment in medicine, has taken a notably different approach to the evaluation of licensure readiness than that of ASPPB. Here, we focus on four particularly critical points of contrast that we believe have worked well for medicine and could provide guidance for psychology: engagement of stakeholders, peer review, breadth of construct validity evidence, and a broader use of validation processes.

Engagement of stakeholders. Stakeholder engagement permeates licensure evaluation much more fully in medicine than in psychology. Consider, for example, that ASPPB’s membership consists of representatives from state and provincial licensing boards and that the organization serves as the sole owner and operator of the licensing exam. Input from stakeholders outside of jurisdictional regulatory bodies—on ASPPB’s functioning, licensure evaluation processes, and the licensing exam itself—is typically in the form of responses to occasional and fairly specific requests for comments solicited by ASPPB, or informal feedback provided through ASPPB’s liaison relationships with other professional organizations. In contrast, NBME includes representation from national experts who contribute to the design of its examinations, at-large members who include members of the public, and representatives from multiple stakeholder organizations.⁵ This representation is remarkably broader than ASPPB’s, with a formal structure that ensures broad representation and inclusion of stakeholders in the profession.

⁴ In alphabetical order, the 10 cosigning organizations/councils to that letter were as follows: Academy of Psychological Clinical Science, Association of Counseling Center Training Agencies, Association of Postdoctoral Programs in Clinical Neuropsychology, Association of Psychology Training Clinics, Clinical Child and Pediatric Psychology Training Council, Consortium of Combined-Integrated Doctoral Programs in Psychology, Council of Counseling Psychology Training Programs, Council of Directors of School Psychology Programs, Council of Graduate Departments of Psychology, and Council of University Directors of Clinical Psychology.

⁵ NBME includes representatives from the Association of American Medical Colleges, the American Board of Medical Specialties, the American Medical Association, the Resident and Fellows Section of the American Medical Association, the American Medical Student Association, the Council of Medical Specialty Societies, the Educational Commission for Foreign Medical Graduates, the Federation of State Medical Boards, Student National Medical Association, the uniformed services, and the Department of Veterans Affairs. Similarly, the Joint Commission on National Dental Examinations is the agency responsible for the development and administration of the National Board Dental Examinations. The 15-member commission includes representatives from dental schools, dental practice, state dental examining boards, dental hygiene, dental students, and the public (see description at <https://www.ada.org/en/jcnde/about-us/jcnde-members-and-appointing-organizations>).

Competency assessment for medical licensure is similarly managed by a collaborative stakeholder group. The [USMLE \(2019\)](#) is governed by members from the NBME, the Federation of State Medical Boards, the Educational Commission for Foreign Medical Graduates, and the public. This governing committee is responsible for overseeing all significant policies and procedures, including maintaining the quality of the assessment process, identifying potential conflicts of interest that could interfere with widespread acceptance of the test, determining the overall direction of the program, and identifying and approving procedures for scoring and determining the pass/fail standard. Medicine's reliance on a structured checks-and-balances approach, with three partnering bodies that work in tandem, formalizes broad and ongoing stakeholder involvement in the regulation of their profession. A similar governing structure for licensure examination might be very beneficial to psychology.

The USMLE test content is determined by a set of test committees appointed by the overall committee. Broad stakeholder involvement is evident here, as well; the test committees include biomedical scientists, medical educators, and clinicians, and virtually all accredited medical schools in the United States have been represented on one or more USMLE test committees. USMLE test committee members represent a "national faculty of medicine" drawn from medical schools, state medical boards, and clinical practice settings across the United States ([USMLE, 2019](#)).

Peer review. Peer review has been described as the bedrock of quality control in the field of psychological science (e.g., [Reisberg et al., 2016](#)). Peer review allows for rigorous evaluation of validity and statistical reliability ([Faigman, 2013](#); [Gatowski et al., 2001](#)). However, to our knowledge, there is no involvement of independent investigators to promote quality science regarding the EPPP Part 2. Further, at the time of this writing, analyses and findings associated with the EPPP Part 2 have not been subjected to peer review.

In contrast, the NBME has an explicit commitment to make test data available to researchers to perform independent examinations of test validity and reliability and to conduct research on medical assessment and competency using the dataset. The NBME Data Sharing and Research Collaboration Program provides test score data and related information to appropriately vetted external investigators to pursue topics of their own interest that will also benefit the health professions education community or measurement community by expanding knowledge and improving practice. Through this program, NBME promotes research and evaluation in assessment by building relationships with academic and applied researchers and the organizations with which they are affiliated. It is expected that completed research will be submitted for publication in peer-reviewed journals. A similar commitment to independent examination

of the EPPP that can withstand the rigors of peer review would almost certainly yield a wealth of invaluable information that could help our profession shape a strong licensure evaluation process.

Breadth of construct validity evidence. The [IOM, Board on Health Care Services, Committee on the Health Professions Education Summit \(2003\)](#) recommended that individual disciplines should benefit from each other's knowledge and experience in creating and implementing more valid and reliable assessment[s] of competency for initial licensure and beyond. In keeping with this emphasis on more valid and reliable assessments, the NBME systematically develops plans to enhance assessment of competency with the full cooperation of relevant stakeholders. Current projects include investigations related to the assessment of new constructs and competencies, simulations and performance testing, test score scaling and equating, score reporting and feedback, validity of test score use, group differences, and general psychometrics ([NBME, 2019](#)). Notably, all of those projects are equally appropriate to health service psychology and could be used to expand and enrich ASPPB's current emphasis on content validity. Although instituting such a broad scope of activities is labor intensive and expensive, many of these goals can be readily achieved within psychological science given the research interests and expertise represented in our ranks. Examples involving two domains, score correspondence and incremental validity, are discussed further below.

Use of validation processes. Consistent with other health profession accreditation groups, the USMLE incorporates four working principles to assessment for medical licensure: (a) continually determining the acceptability of the program to stakeholders, (b) encouraging stakeholders to participate actively in evaluating and improving the test, (c) monitoring and evaluating the correspondence between performance on the test and relevant external measures of competency in medical practice, and (d) using the findings from that evaluation process to revise and improve the test itself over time ([Epstein & Hundert, 2002](#)). This overall process reflects the USMLE evolution in approach over the past 20 years—initiating strategic steps to move away from exclusive reliance on job task analysis and content validity in the test development process, and moving toward an iterative multistep sequence of content development and evaluation in cooperation with multiple stakeholders. In this way, the USMLE has engaged in a process of validation that includes careful analysis of the function of the test for its intended purpose. (For discussions of how other disciplines have taken on similar challenges successfully, see [Gadbury-Amyot, McCracken, Woldt, & Brennan, 2014](#); [Rose & Regan-Kubinski, 2010](#).) It is probable that Part 2 of the EPPP could similarly benefit from iterative validation studies.

Specific Recommendations for Jurisdictions Licensing Health Service Psychologists

Thus far, we have made several specific recommendations concerning additional research that should be conducted, and we have advocated for much greater infusion of stakeholder feedback into the exam creation and governance processes. For the more immediate future, we offer several recommendations to jurisdictions regarding the Enhanced EPPP. We strongly encourage jurisdictions to look for three key indicators of readiness prior to making any implementation decisions regarding the Enhanced EPPP: (a) greater depth and breadth in psychometric inquiries of the examination; (b) peer review of each study cited as contributing to implementation recommendations; and (c) broader participation of, and acceptance by, relevant stakeholders, including appropriate scientific communities. The first and second indicators are self-evident via review of citations (e.g., verifying psychometric inquiries are published in peer reviewed journals). The third indicator could be evaluated by seeking explicit, formal input from the broad stakeholder base (e.g., training councils; other professional organizations that are independent of ASPPB). With respect to psychometric inquiries, we provide a sampling of possible studies in two different areas to illustrate the breadth and depth of scope that is feasible via independent investigations (as is done in medicine) and/or in cooperation with ASPPB. By no means is this an exhaustive listing of feasible or necessary work but rather, these exemplars are offered to encourage greater discussion and involvement by stakeholders and independent investigators.

Score correspondence. Prior to adoption, jurisdictions will need information on whether scores from the Enhanced EPPP correspond to intended referents (e.g., competency) and not unintended referents (e.g., race; socioeconomic status; gender identification; disability status; national origin). Multiple yardsticks for the assessment of score correspondence with appropriate referents could be considered. For example, a known groups design could be used to examine whether there are differential pass rates among those holding unrelated doctoral degrees (e.g., engineering), related subdoctoral degrees (e.g., master's degree in health service psychology), and doctoral degrees in health service psychology. Previous research underscores the likelihood of discernible exam performance differences (e.g., master's vs. doctoral levels; DeMers, 2009) and may provide important information to jurisdictions in determining the appropriate scope of practice for doctoral level health service psychology, particularly in light of forthcoming accreditation of master's programs in health service psychology (Callahan, 2019).

For the original EPPP, ASPPB's examination committee, the test vendor, and individual jurisdictions worked with independent investigators to facilitate validation inquiries

involving known groups designs. Included in these designs were undergraduate students (Shrader, 1979; Wertheimer, 1972, 1974), master's-level individuals seeking licensure (Shrader, 1980; Terris, 1973), doctoral-level individuals according to degree type (e.g., PhD, PsyD, and/or EdD; Hays & Mullins, 1978; Hays & Schreiner, 1977), and individuals failing the exam at least once and as many as four times (Shrader, 1980). We are unable to verify all of the primary sources for those inquiries because some rely on communications from investigators that were sent directly to ASPPB. However, Shrader (1980) reportedly had access to all of these reports and concluded that known groups fell into a hierarchy of mean exam scores as follows: PhD psychology, PsyD psychology, EdD psychology, master's degree psychology, graduate students in psychology, undergraduate honors students in psychology, and other psychology undergraduates. Shortly thereafter, Hoffman (1980) reported similar findings in which mean EPPP scores fell into a hierarchy based on the type of degree institution: major university, small or unknown college, or professional school. Such differences were evidenced not only at the total score level, but also when examining subtest scores (Templer & Tomeo, 1998; Templer & Tomeo, 2000). A known groups design would also allow for tests of independence between Part 2 examination scores and unintended referents (e.g., diversity variables).

As noted earlier, the field of medicine expects licensure scores to correspond with competent skills performance in other settings. Of importance for research of that type, work in our discipline has already gone into creating psychometric scales to measure demonstrable competency while accounting for the phenomenon of rater biases (e.g., Price, Callahan, & Cox, 2017). Such scales, in concert with standardized simulated patient scenarios (e.g., Cramer, Johnson, McLaughlin, Rausch, & Conroy, 2013; Sheen, McGillivray, Gurtman, & Boyd, 2015), could be used to investigate score correspondence. To be clear, we are not suggesting all examinees participate in simulated patient scenarios, which is presently beyond the financial and logistic resources of our profession and licensure applicants. Rather, we are suggesting focused research studies that could, with adequate statistical power, contribute important information to the validation process and inform decisions concerning implementation.

Incremental validity. Dismantling designs and research on incremental validity would allow jurisdictions to parse the Enhanced EPPP into the discrete contributions of Part 1 and Part 2. Although ASPPB does not support such inquiries (J. Hunsley, personal communication, December 7, 2017) and holds an a priori belief that all components of the Enhanced EPPP are essential, there is no empirical evidence at this time to support such an assertion. In fact, adopting such a perspective appears counter to the implied framing of the Enhanced EPPP Part 2. ASPPB has publicly

stated⁶ that ~95% of those who pass Part 1 are likely to also pass Part 2. This suggests that the Enhanced EPPP is not likely to demonstrate any significant incremental validity, which underscores our concerns of excessive and unnecessary redundancy. Based on what ASPPB has stated, we hypothesize that studies of incremental validity would show no incremental benefit with the use of both exams and therefore recommend that only the superior of the two exams be implemented. Unfortunately, we cannot be sure at this time which of the two examinations (Part 1 or Part 2) is superior.

Conclusions

While ASPPB has engaged in an intensive and ambitious process to develop test items for the Enhanced EPPP Part 2 that reflect core job tasks, they have been less engaged in the fuller process of validation, and have not communicated an openness to greater engagement from relevant stakeholders, involvement of psychological experts, and peer review. As a result, the overall Enhanced EPPP development process is less sophisticated and comprehensive than similar undertakings in other professions, which could have untoward consequences for health service psychology and the public, and leaves open the door for legal challenges regarding the Enhanced EPPP.

As noted above, the recent history of the USMLE highlights important trends in assessment for licensing in health care provision (e.g., Elstein, 1993; Epstein & Hundert, 2002). We find it particularly salient that other disciplines have relied heavily on strict and comprehensive application of psychological principles and psychometric theory in tackling such challenging questions as the development of optimal and efficient methods for assessing clinical reasoning (Longo, Orcutt, James, Kane, & Coleman, 2018; Rencic, Durning, Holmboe, & Gruppen, 2016) and for ensuring the predictive validity of competency assessment for health care practice (Melnick & Clauser, 2005). It is encouraging and reassuring to see how psychological knowledge and assessment practices have led to substantial improvements in assessment for health care licensure and practice. Both pragmatic and legal concerns have driven those involved with competency evaluation for medical licensure and practice to invest significant resources, to collaborate extensively and, in the process, to focus more intensively on validity and reliability (Govaerts & van der Vleuten, 2013; Norcini, Lipner, & Grosso, 2013).

ASPPB's process to date has not reflected the same level of investment in validation studies or in strategic inclusion of stakeholders and researchers with relevant expertise. We have every reason to believe that relevant stakeholders would be willing to engage productively in this process as partners with the common goal of ensuring public health and well-being. As a discipline, we must compel ourselves

to apply rigorous methods and standards to putative developments in the evaluation of those seeking licensure in health service psychology. To hold ourselves less accountable to our own standards and ethics than other disciplines—who cite our discipline's standards as foundational to their work—is disappointing at best and self-defeating at worst. Our field has the knowledge and skills to produce a well-validated and appropriate licensure assessment process, as well as stakeholders who are clearly committed to participating in the validation process. It is imperative that we use these resources fully to protect the discipline and the public.

To be clear, we do not recommend abandoning Part 2 development. As noted earlier, independent, peer-reviewed studies repeatedly report significant limitations associated with the existing EPPP, particularly with respect to diversity constriction (e.g., Bowman & Ameen, 2018; Sharpless, 2019; Sharpless & Barber, 2009). Thus, based on the rigor of the workforce analysis and attention to construct validity described thus far, we strongly suspect Part 2 carries potential to emerge as psychometrically superior to the current EPPP. Rather than abandon development of Part 2, we encourage more thorough investment in its validation in concert with planned obsolescence for the current examination (i.e., Part 1). We strongly urge ASPPB and jurisdictions to partner with additional stakeholders and qualified investigators to facilitate the needed validation studies, including examination of (a) structural and measurement invariance and (b) incremental validity to reevaluate the necessity of both exams.

Until these goals are reached, we urge ASPPB and licensure jurisdictions to hold off on implementation of the Enhanced EPPP. Potential costs of implementing a test prematurely include costs to trainees in time and burden, costs to the discipline of implementing an additional gate that may disproportionately influence more vulnerable trainees, and the potential for state boards to face legal challenges regarding their licensure standards.

⁶ Addressing the full body of attendees at the January 2019 Mid-Winter Meeting of the Council of University Directors of Clinical Psychology.

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REPLY

Inviting ASPPB to Address Systemic Bias and Racism:
Reply to Turner et al. (2021)Jennifer L. Callahan¹, Deborah J. Bell², Joanne Davila³, Sheri L. Johnson⁴, Timothy J. Strauman⁵,
and Cindy M. Yee⁶¹ Department of Psychology, University of North Texas² Department of Psychological Sciences, University of Missouri–Columbia³ Department of Psychology, Stony Brook University⁴ Department of Psychology, University of California, Berkeley⁵ Department of Psychology and Neuroscience, Duke University⁶ Department of Psychology, University of California, Los Angeles

Turner et al. (2021) subtly relapse in conceptualizing the Examination for Professional Practice in Psychology (Part 2–Skills) exam as a competency evaluation despite Association of State and Provincial Psychology Boards' (ASPPB) prior concession that Part 2 measures only the knowledge of skills (not skill competency). They do not address the purpose of redundant evaluation or the other concerns raised in Callahan et al. (2020). Instead, Turner et al. remain narrowly focused on defense of content validity and a reliance on outdated standards that fail to meet contemporary expectations for assessment of health care professionals. The adopted processes and procedures, albeit time consuming and effortful, are known to be methodologically inadequate. ASPPB's methods demonstrably foster linguistic biases and systemic racism that constricts licensure of diverse individuals as psychologists. Specific suggestions are offered, and ASPPB is urged to take drastic corrective action.

Keywords: systemic bias, licensure, validity, Examination for Professional Practice in Psychology (EPPP), Association of State and Provincial Psychology Boards (ASPPB)

The Examination for Professional Practice in Psychology (EPPP) is an international exam, yet neither the

existing nor Part 2 exam reflects contemporary measure development guidelines for evaluation of linguistically and culturally diverse peoples (International Test Commission, 2018). Therefore, it is not surprising that the existing EPPP evidences strong English bias (Callahan et al., 2020) and is not required by jurisdictions where English is not the predominant language (e.g., Quebec, Puerto Rico). Within jurisdictions that do require the EPPP, the prevalence of students for whom English is a second language averages 10% (nearing 20% in the largest jurisdictions; Hussar et al., 2020). Turner and colleagues (2021) do not address concerns of linguistic bias.

The Association of State and Provincial Psychology Boards' (ASPPB) goal of developing an unbiased exam aligns with the profession's broader goals of "working to dismantle institutional racism . . . within . . . psychology" and diversifying the workforce (Abrams, 2020, p. 20). However, assertions that item writer antibias training can be assumed effective or that

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cultural competence consultants are reliable in subjective bias appraisals are undermined by evidence, drawn from a meta-analysis involving more than 490 studies and 80,000 participants, that even short-term changes in implicit bias are difficult to achieve (Forscher et al., 2019).

The current EPPP, which uses the same methods as does Part 2, evidences significantly lower pass rates for underrepresented Black or African American and Hispanic applicants than does the dominant majority (Sharpless, 2019a, 2019b). In light of such findings, Turner and colleagues' (2021) continued defense of nonrepresentative early adopter jurisdictions for norming suggests entrenched processes and procedures for sustaining racial inequities that contribute to systemic racism.

Turner et al. (2021) assert that the EPPP Part 2 meets minimum standards for licensing exams and, citing Kane (1982), consider criterion validity unnecessary and impossible. They ignore Kane's revised position (Kane, 2016), which agrees with ours. Contemporary rigor (Haist et al., 2017) and modern validity theory tenets (Royal, 2017) in the evaluation of health care professionals are not met. Turner and colleagues are also nonresponsive to other consequences of instituting a test prior to validation, including those for doctoral training (timing), test-takers (financial costs), and the public (jurisdictional inconsistencies). Turner et al. conclude that the EPPP Part 2 is legally defensible, yet they do not address concerns that none of the *Daubert (Daubert v. Merrell Dow Pharmaceuticals, 1993)* criteria for tests introduced in a legal context are met (testability, peer-reviewed publication, error rate, established general acceptance). What justification is there for two *only knowledge-based* exams whose pass rates correlate to the point of measurement redundancy (Callahan et al., 2020)?

The ASPPB is encouraged to yield exclusive authoritative decision-making control¹ and rise above historical minimum expectations. We recommend that the ASPPB conduct known groups testing and test large representative samples prior to implementation. Further, we recommend that the ASPPB make data available to scholars and licensing jurisdictions for independent review. Jurisdictions and the field are encouraged to hold licensure processes, be it the ASPPB or another entity, to contemporary validation and antibias methods that authentically serve the needs of a linguistically and culturally diverse public and profession.

¹ We are aware that following our earlier publication the Association of State and Provincial Psychology Boards (ASPPB) began engaging in

discussion to form some kind of advisory group of stakeholders and knowledgeable others. However, to date, the ASPPB has indicated intention to retain exclusive control over all decision-making and data access.

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COMMENT

Appropriate Validation Standards for Licensure Examinations: Comment
on Callahan et al. (2020)

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Callahan et al. (2020) asserted that the Examination for Professional Practice in Psychology (Part 2-Skills) has not undergone appropriate validation. Although they recognized that content validity is the foundation of licensure examinations, they suggested additional validation strategies that are not recommended for licensure examination development. This response clarifies the appropriate validation standards for the examination.

Keywords: licensure, validity, validation, Examination for Professional Practice in Psychology (EPPP), licensing examination development

Callahan et al. (2020) argued that the Examination for Professional Practice in Psychology (EPPP; Part 2-Skills) had not been subjected to appropriate validation during its development. This response clarifies the appropriate validation standards for the development of licensure examinations.

The EPPP (Part 2-Skills) was developed to provide licensing boards a reliable and valid measure of skills in response to the increasing “culture of competence” in professional psychology (Roberts, Borden, Christiansen, & Lopez, 2005). Based on input for the need for such an examination from licensing boards, the Association of State and Provincial Psychology Boards (ASPPB) began work on the examination over a decade ago (ASPPB, 2019).

Similar to the development of the EPPP (Part 1-Knowledge) during the past 60 years, the EPPP (Part 2-Skills) was developed using procedures outlined in the

Standards for Educational and Psychological Testing (American Educational Research Association, American Psychological Association, and National Council on Measurement in Education, 2014), including the use of a standard-setting procedure to determine the pass point that represents the minimal skills required for entry-level practice. The standards emphasize that licensure/credentialing examinations are built from a content validation framework, and this framework is used for licensure examinations across professions. The standards indicate that validation methodologies typically used for cognitive or psychosocial functioning measures are of limited relevance to licensure testing:

Criterion related validity is of limited applicability because credentialing examinations are not intended to predict individual job performance in a specific job but rather provide evidence that the candidates have acquired the knowledge, skills and judgement required for the effective performance, often in a wide variety of settings. (pp. 175–176)

The purpose of a licensing examination is to provide a licensing board with information that, by passing the examination, a candidate has demonstrated a minimum level of knowledge or skills for providing services independently at the point of licensure. Even if criterion-related validity evidence was desirable for a licensing examination, there are two constraints that would need to be considered for any validation efforts: (a) Measures of external criteria generally

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do not exist or are not psychometrically sound, and (b) only pass/fail results, not the total examination score or the examination domain scores, should be used in validation analyses. To suggest that a licensure examination should not be used due to a lack of criterion-related validity evidence implies a standard that no licensure examination meets or should meet. Accordingly, the “appropriateness indices” in Callahan et al.’s Table 1, most of which are criterion-related validity indices, are largely irrelevant to the development of the EPPP or *any* other licensing examination. For example, for concurrent validity, psychometrically sound measures of the broad range of entry-level skills necessary in professional psychology (not just clinical psychology, as Callahan et al. suggested) would be required; currently, such measures do not exist. The suggestion to determine whether the EPPP (Part 2-Skills) predicts variance in clinical roles beyond that predicted by the EPPP (Part 1-Knowledge) is also problematic. Although this kind of incremental validity analysis is often undertaken with psychological measures, establishing a meaningful, validated criterion for a licensing examination is likely not possible (Kane, 1982). There is no measure of what makes a “good” or competent psychologist, and as Kane noted, “To ignore this limitation by evaluating licensure examinations in terms of their ability to provide accurate predictions of future performance is to set up an unattainable standard” (p. 918).

As part of their “accuracy indices,” Callahan et al. recommended validation studies on structural and measurement variance prior to implementing the examination. Structural validation analysis is sometimes conducted on licensing examinations; however, for such an analysis, data must be available from hundreds of candidates who have taken the examination. It is therefore premature to call for such an analysis prior to offering an examination. Callahan and colleagues also indicated a need for stability of structural indicators across groups; again, actual examination data from candidates seeking licensure are needed for such analyses to be conducted.

We agree with Callahan and colleagues about ensuring examination scores are as unaffected by bias as possible. This critical issue has received much attention throughout the development of both parts of the EPPP. As the authors noted, the ASPPB has ensured that the many psychologists who have contributed to the examination come from diverse backgrounds. Instruction on language issues, potential bias, and cultural implications is part of the item-writing training for the EPPP, as is training to address implicit biases. Differential item functioning analyses will also be conducted, with flagged items being reviewed by a panel of cultural competence experts to determine if the items have content that could be biased and should be edited or removed from use. Thus, ASPPB continues to have sound strategies in place to address the potential for bias in the examination development process.

Callahan and colleagues contended that stakeholder involvement in the EPPP (Part 2-Skills) development process does not match what is done by some other professions. We suggest that the job task analysis undertaken to establish the examination content, based on a survey of 2,700 licensed psychologists, constitutes extensive stakeholder involvement. Survey data were used to determine psychologists’ views on the knowledge and skills required at the point of licensure, with the resulting EPPP (Part 2-Skills) blueprint being remarkably similar to competency models provided by the American Psychological Association and the Canadian Psychological Association. Furthermore, hundreds of psychologists from a variety of geographic regions, sociodemographic backgrounds, training backgrounds, areas of practice, and psychology group memberships (including many members of the training community) contribute to the standard-setting procedures, ongoing reviews by subject matter experts, ongoing statistical analysis, and the continuous development of the examination. Moreover, updates on examination development have been provided to many psychology organizations and associations over the past decade, thus providing multiple opportunities for discussion and feedback.

In conclusion, Callahan et al. acknowledged that the ASPPB has demonstrated content validation of the EPPP (Part 2-Skills), and we fully agree. Based on procedures outlined in the standards, the EPPP (Part 2-Skills) has been developed through a rigorous, extensive, and thorough process that is appropriate for licensure examinations and is legally defensible for use by licensing boards.

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