

**PUBLIC NOTICE OF A MEETING FOR
STATE OF NEVADA BOARD OF PSYCHOLOGICAL EXAMINERS
AD HOC COMMITTEE TO CONSIDER REGISTRATION OF SUPERVISORS OF
PSYCHOLOGICAL ASSISTANTS, PSYCHOLOGICAL INTERNS, AND
PSYCHOLOGICAL TRAINEES, AND ASSOCIATED CONCERNS
MEETING MINUTES**

April 5, 2023

1. Call To Order/Roll Call to Determine the Presence of a Quorum.

On April 5, 2023, at 9:02 a.m., Committee Chair Dr. Whitney Owens called to order the meeting of the Ad Hoc Committee to Consider Registration of Supervisors of Psychological Assistants, Psychological Interns, and Psychological Trainees, and Associated Concerns.

Committee Chair Dr. Whitney Owens and committee members Dr. Lorraine Benuto, Dr. William O'Donohue, and Dr. Michelle Paul were present. Dr. Ben Adams was absent at roll call, but joined the meeting at 9:13 a.m. Despite Dr. Adams' absence at roll call, the committee had a quorum.

The Board's executive director, Laura Arnold, was present.

Dr. Yvonne Fritz was present as a member of the public. Dr. Sara Amahd later joined the meeting as a member of the public.

Chair Owens explained that because this is a public meeting, members of the public are welcome to attend. She stated that the meeting is recorded, that there will be minutes of the meeting, and that there is an agenda that the Committee will follow to the best of its ability. Chair Owens said there may be times when the Committee may have to limit public or committee comment in the interest of time to make sure we get through the agenda in the one-hour time frame the Committee has.

Chair Owens and the Committee members introduced themselves:

- Chair Whitney Owens is the president of the Nevada Board of Psychological Examiners and wants to be on the Committee because of her strong interest in cleaning up the supervision regulations and making registration more efficient and consistent. Throughout her time on the board, Dr. Owens has found inefficiencies in the way we do things, and wants to clean them up for the protection of the public and for ease of licensure and registration.

- Dr. Michelle Paul is the associate director of clinical training of UNLV's APA accredited Ph.D. program and the Director of the interdisciplinary training clinic at the UNLV Practice. Dr. Paul is also a former member of the Nevada's licensing board, having served a total of 8 years, 3 years as president. During that time, she worked on revising a lot of the Board's regulations' language specific to psychological trainees, interns, and assistants, as well as the requirements of what supervision should look like, and she was eager to join the Committee to continue that work. Dr. Paul also teaches supervision and is eager to see Nevada align itself with best practices in supervision so that trainees at all levels are appropriately trained. She wants to make sure Nevada is setting things up so that those being supervised are not being taken advantage of, as that trickles down to clients and their welfare. Dr. Paul is also the president-elect of the ASPPB Board of Directors and, through that, will hopefully bring some insight as to what is going on at National level.
- Dr. Lorraine Benuto is an Associate Professor in the clinical psychology program at UNR, and directs some clinical services through the psychological service center at UNR for underserved populations, primarily Spanish speaking Latinxs. She wants to be part of the committee because she is heavily involved in supervision of clinical trainees.
- Dr. William O'Donohue is a clinical psychology professor at UNR. He directs UNR's psychological services center, which is a mini version of what Dr. Paul directs at UNLV. Dr. O'Donohue has been doing supervision for 40 years, continuously for 27 years in Nevada. He runs the Victims of Crime Treatment Center at UNR with Dr. Benuto, and also provides free treatment for children who have been sexually abused, adults who have been sexually assaulted, and victims for domestic violence. In his work, he supervises 6 students on his team all year.

The Board's executive director, Laura Arnold, also introduced herself as such.

2. Public Comment. Note: Public comment is welcomed by the Committee and may be limited to three minutes per person at the discretion of the Board President. Public comment will be allowed at the beginning and end of the meeting, as noted on the agenda. The Board President may allow additional time to be given a speaker as time allows and in their sole discretion. Comments will not be restricted based on viewpoint. No action may be taken upon a matter raised under this item of the agenda until the matter itself has been specifically included on an agenda as an item upon which action may be taken (NRS 241.020)

There was no public comment at this time.

3. (For Possible Action) Discussion, Deliberation, and Possible Action on the NBOPE Ad Hoc Committee of the registration of supervisors of Psychological Assistants, Psychological Interns, and Psychological Trainees.

In providing some background on the idea of the registration of supervisors, Chair Owens explained that one of the challenges the Board has faced historically and currently is the lack of responsibility by supervisors of their supervisees and the confusion by postdocs, interns and trainees when they are registering with the Board. She said some of the holdup in the registration is supervisors not doing what they are supposed to do to complete paperwork and not adequately supervising students through the process, which makes it more difficult. She also noted that other mental health boards in our state register supervisors, and said that the idea is to register supervisors so the Board knows who is supervising and to help facilitate the process of getting applicants registered. Chair Owens acknowledged that there have been concerns from the Board and the public about creating more barriers to licensure and in general to the applicant pipeline making sure we have people being able to supervise, and said that is not the intention. Rather, the intention is to have supervisors being responsible and involved in the process, and as the Committee works through ideas of how that might happen, the goal is to come up with a system where supervisors are active in and responsible for the process of moving registration along and to make sure the Board can efficiently educate supervisors on their responsibilities. Chair Owens explained that supervisors will contact the Board office and ask why their supervisee is not yet registered, the reasons often being that the student still has items to complete and the supervisor is unaware of that. She reiterated that the intent is not to create barriers, but to streamline the process so that everyone – supervisees, supervisors, and the Board office – are on the same page throughout the supervisions process.

Dr. Benuto had some comments as someone who has expressed concerns. In explaining how supervision works at UNR, she said they admit up to 8 students per year and those students are expected to engage in in-house clinical training in years 1 through 3. They have 4 supervising faculty members, which translates to approximately 24 students being supervised by 4 faculty. Dr. Benuto went on to explain that in years 3 and beyond, students complete a clinical externship, and some faculty supervise clinical externships as well. She said that at a minimum, if things were equally distributed (which they are not because there are variations in terms of how many faculty supervise students), faculty would have 6 clinical trainees, and those who supervise clinical externships or who require the students they advise engage in additional clinical training may have a larger number of supervisees. Dr. Benuto said the new requirements would have a negative impact on their program in terms of admission rates and other factors, as several of the clinical faculty have grant funds, which are very limited, that are used to fund students via clinical externships and then free services are provided to the community. She noted that they just got their funding

notification and experienced a substantial funding cut, so there is not sufficient funding for them to hire additional supervisors. Dr. Benuto said that under the proposed changes, the Board would further reduce clinical services to the populations that desperately need them – those who are disadvantaged, who experience health inequities due to systemic and structural barriers, those who are Spanish speaking, who tend to be uninsured and don't have any other options, and those who have a history of victimization, including sexual abuse, sexual assault, domestic violence, terrorism and human trafficking. Dr. Benuto explained that UNR's faculty has designated protected time for supervision, and that faculty has oversight via the APA accreditation process and via courses and their clinical training committee, so their supervisees are enrolled in a practicum course that the University oversees. She acknowledged that they did have a bit of a rough patch, but they now have a new Director of Clinical Training, so a lot is changing and there is much more oversight now. They have a lot of infrastructure already in place, so they would be trying to disentangle the proposal and determine how it would fit with their model of training when they already have a lot of oversight over their supervisors and supervisees in the clinical program.

Chair Owens thanked Dr. Benuto, and noted that one challenge the Committee will face is figuring out right touch legislation around supervision because of the disparities between what happens in the university setting versus the community setting, what students experience in APA-accredited programs versus non-APA accredited programs, and the disparities in the training in the community and not the university. That is what makes the work ahead of the Committee so complicated and challenging. She said that the goal is not to reduce any kind of wonderful training and oversight that happens in the Universities at the expense of what is happening in the community and vice versa.

Dr. Benuto said she understands there are different contexts, and that she just wanted to give a lay of the land and advocate for their program. The way this is devised does not impact their ability to continue to function as a program or the services they deliver. She wondered if one possible approach is to exempt faculty of APA programs from the registration requirements, and if that is something to put out there to mitigate the issues.

Dr. Paul clarified for Dr. Benuto that practicum students are not required to register with the Board. Rather, they only have to register if the supervisor wants to bill Medicaid for the services they want the trainee to do. At that point, they have to register the trainee with the Board and demonstrate that they meet the registration requirements. Dr. Paul explained that when the Board was writing the regulations regarding the registration of trainees, Medicaid's concern was that those providing the services that were going to be reimbursed were properly supervised. She said there was never an intent that these regulations interfere or oversee what was going on in training programs, and asked Dr. Benuto if that made a difference to her or continued to present a challenge.

Dr. Benuto said that the way their program is structured, it makes a huge difference because it essentially means that none of their faculty would be required to register students, and that she had misunderstood. She said she thought that all clinical trainees had to register, and thanked Dr. Paul for the clarification.

Chair Owens stated that the other piece to add in terms of the registration of supervisors is who is in charge of the student/trainee – who is accountable for helping the student/trainee through the process in a way that reduces the time from application to registration. Going back to Dr. Paul's point, for those seeking reimbursement from Medicaid, and depending on what happens with some of the legislation that is going through and the ability to bill commercial insurance as well (and acknowledging that the legislation that Dr. Paul wrote for the registration of trainees and interns is amazing), Dr. Owens explained the Board is finding that by the time the trainee is registered with the Board and then Medicaid, most of their training is complete and the public misses out on time they can provide services. She reiterated that the Committee's goal is not to create more problems for supervisors, but to create more efficiency in the application and making sure everything moves along so the trainees can get registered with the Board and with Medicaid provide services. It is a matter of creating a process by which supervisors are responsible – they are in charge and making sure students move to registration, and are accountable in a meaningful way for doing so. Dr. Owens suggested that it could be as simple as changing the application form, or as big as registering and creating that additional accountability for supervisors who are registering their students with the Board.

Dr. Benuto offered the thought that there could be language in the document that specifies what a psychological assistant is, what a psychological intern is, and what a psychological trainee is, or identify where that is referenced is in the Nevada Administrative Code so that there is clarity that psychological trainees are only those providing services that are going to be reimbursed by Medicaid.

Dr. Paul stated that language is in there, and that it is something she would like to clarify. Revisions to the Nevada Administrative Code had been made in R074-18 that stated that trainees and interns may, not must, register, and that psychological assistants are the only ones who must register. Dr. Paul was not sure if those changes had yet been codified, but wanted to make the Committee aware of that information in those provisions. She noted that training clinics potentially move into the realm of billing and that she wants to keep an eye on what the implications are for training clinics. It is harder to bill Medicaid in a training clinic than one would think, but that aside, the question is how it impacts what happens. Dr. Paul stated that Chair Owens' point about the length of time it takes for trainees to get registered is well taken – if it takes them 6 months to get registered to the point where they can bill for services, it is not clear what we are doing.

Dr. O'Donohue asked for someone to describe in more concrete terms, and what exactly is happening that is a problem. He asked whether these are postdocs that are

not registering, why it takes six months, if they do not have a supervisor, and generally what the issue is and how frequent it is.

Chair Owens explained that the typical issues are practitioners in the community who hire, for instance, a psychological assistant. She said the Board's executive director works with that psychological assistant in the process of registering, letting them know what they need to provide to the Board office. Despite that the psychological assistant applicant states that he or she will provide what is required, they may tell the supervisor they have done what is required and it is the Board's fault, resulting in angry emails and calls to the Board about holding up applicants and an effort by the Board to show communications between the applicant and the Board as to the application status. Chair Owens stated that supervisors in the private setting do not have a sense of accountability for getting their students through the process. She noted that supervisors benefit from students financially, but do not take as much responsibility as needed for their students' success. Although it is not a complicated process, there are certain logistical pieces for which supervisees need a mentor to help them through. Chair Owens said that with the Board being a one-person office, having a supervisor give guidance ropes in the training community versus the responsibility falling on the Board office.

Dr. Paul stated that there is a lack of knowledge regarding how the registration process works, even just the basic rules on grace periods, when psychological assistants can start seeing patients or not, and just what the process entails. She said something the Committee can brainstorm is how to put out regular training to supervisors so they understand the ASPPB portal and what is required, and how quickly this can work if the pieces are in place. Dr. Paul said she has seen colleagues who have psychological assistants who have been working on registration for 6 months and the supervisor does not even know their psychological assistant is not registered. They may be working within a state agency for example and perhaps outside the Board's authority, but it should not be that way. She noted that one of the problems is the lack of knowledge about how the regulatory and registration process works in Nevada, and supervisors putting all the onus on the trainee when it should be a joint responsibility to get the trainee registered. Dr. Paul stated that she has registered many psychological assistants and that she has to walk them through it or it will not get done. That is not to say they are not smart, bright people, it just does not make sense to them how to do it.

Chair Owens stated that historically, the Board has written step by step instructions, and it has done a "how do you register your students" presentation that had good attendance, but the missing piece is how to create accountability. Students are not keen to report their supervisors to the Board. She said that while she receives a lot of complaints about supervisors personally – i.e., students not being given adequate supervision or not getting paid what they were told – without formal complaints, it is difficult to regulate supervision in a way that there is accountability. Registration may

be a way to remediate those issues and delayed registration by providing additional accountability.

Dr. Benuto asked how many trainees are currently registered, wanting to understand the breadth of the issue. She said she does not know anyone who is billing Medicaid for trainees.

Chair Owens asked Director Arnold how many trainees are registered. Director Arnold did not know off the top of head, though it is probably not more than a couple dozen. She said that we just registered several trainees through UNLV. The Board had put a packet together for the applicants, which they filled out and sent in at one time, and the Board provisionally registered them right away with a grace period pending the results of their background checks so that they could start billing Medicaid. Director Arnold explained that the registrations that take a little more time are those coming from a non-APA accredited school because they have to go through the ATEAM process, which does not occur until after we receive their PLUS application.

Dr. Paul asked if the Board has a sense of how many interns and assistants are registered with the board. She noted that trainees are slower because it has been extremely complicated, not because of the Board but because of Medicaid, but asked about interns or psychological assistants.

Director Arnold said there were not as many interns as there are psychological assistants. She said some are waiting to be registered, some are registered, but she does not know the number off the top of her head. She noted that the Board has an active pipeline of applicants and those who have been registered.

Dr. Paul asked how many licensed psychologists there are in the state. Director Arnold said it is probably at least 650 and growing all the time, as the Board receives quite a few applications and they generally tend to go through quickly. Dr. Paul thought a percentage of psychological assistants could be gleaned from that, perhaps roughly 100 to 600.

Wanting to get a lay of the land with what the Committee is working through, Chair Owens stated that she wants the Committee members to look at what they have been discussing in terms of registration and if there are other ways of creating accountability with supervisors. She said she is happy to be creative in creating accountability, whether it is registration of supervisors, shifting paperwork, shifting requirements for how supervisors are active in the process of registration of their students, or any other ideas this Committee has. She wants to solve for the problem of accountability and supervisors being active because they benefit from having students and there should be accountability tied to that benefit.

4. (For Possible Action) Discussion, Deliberation, and Possible Action to revise NAC Chapter 641 provisions related to the practice of supervision by a psychologist.

- A. NAC 641.1507
- B. NAC 641.1519
- C. NAC 641.152
- D. NAC 641.156
- E. NAC 641.157
- F. NAC 641.158
- G. NAC 641.159

Dr. Owens stated that the executive director had sent to the Committee a proposal of changes that the Board has discussed in terms of shifting some of its supervision requirements. She said that part of the conversions around these regulations were about 2 years ago regarding some of the language about the time that it takes to become a supervisor, the requirements of becoming a supervisor, and how many supervisees a supervisor can have at one time. As the Board started looking into the regulations, it was not clear if they made sense or if there was data to support them. Chair Owens pointed to the documents that the executive director gathered from other states and forwarded to the Committee members relating to the practice of psychology and what their regulations around supervision are.

Dr. Paul asked if the Committee was provided with the ASPPB guidance on supervision, to which Director Arnold said no, but that it was provided with responses to a query she sent to the ASPPB listserv. Dr. Paul said it would be good if the Committee had the ASPPB guidance on supervision, and that she would provide it to the executive director to circulate to the Committee members.

Chair Owens referred to NAC 641.1158, which goes through the limitations on the number of assistants, interns, and supervisors. She said to her knowledge, no other state in the country limits the number of supervisees, but rather leave it up to psychologists to follow their ethics code so they don't take on more supervisees that they can adequately manage and supervise while also adequately caring for the patients that the supervisees see. The goal is to figure out language and right touch legislation that does not limit supervision if someone is a great supervisor and can adequately supervise 10 people at one time while also making sure supervisors are not creating a business of and making passive income on supervising people but not actually providing supervision. Chair Owens went on to address the qualifications of a supervisor, noting that historically one would have to have 3 years of experience in the state to be a supervisor. She said the question is how to shift the language to focus on

qualifications, not years of experience. For instance, one could be licensed for 3 years, have no supervision experience, but can be a supervisor, whereas a post doc could come out with a lot of supervision experience and be a much more qualified supervisor rather than someone who just has time. Chair Owens stated that the Board proposed language to shift from a time requirement to an experience requirement, including course work, continuing education, supervision of supervision, and shifting it to that kind of model. Those are other pieces that are under the Committee's purview. She said that there are other regulations around supervision that are also included, and she wants to clean up the supervision language to make it easier for supervisors and supervisees to read, and to make it clear with the goal of making it easier for people to know what they are responsible for and how to be responsible for what they are responsible for.

Dr. Paul stated that the ASPPB guidelines speak to language on what experience someone should have, and offer guidance on how many supervisees one should have.

Dr. O'Donohue said he liked what Chair Owens said in reference to the Committee emphasizing user-friendliness and simplicity. He referred to an interesting book that talks about the average person violating 900 regulations as they go through life, noting that, as much as he wants to comply, he is daunted and confused by the regulations on the practice of psychologists in Nevada and feels like he needs a translator. Dr. O'Donohue also noted that Nevada being the only state in the nation to limit the number of supervisees seems arbitrary. There is no data to say that everything falls apart by, i.e., having 4 rather than 3 supervisees. He likes the emphasis on being clear and user friendly so that it makes sense and is logical.

Chair Owens stated that during her seven years on the Board and having heard different concerns and questions to the Board, she realizes some of the regulations do not make sense, an example being the limitation on supervisees and whether taking on one more is good or bad. The public would have more access to services. She reiterated that the impetus for doing this is to make things cleaner, more readable and sensible, and more user friendly. The intention is to clean up regulations around supervision while also protecting the public and students, who are also a vulnerable population in our state and it is important that they are treated with respect and still mentored through the process until they are independently licensed and responsible for their own livelihood.

Dr. Paul said she wants everyone to call the Board and say what a great experience it was, and that it was supportive, helpful and clear. She noted, however, that when the Board presents regulations, they go through the filter of the Legislative Council Bureau, and they are the ones who make it confusing. The Board has to translate through simpler language, which she knows Chair Owens has tried to do, and people are still not sure how to navigate our website, which is problematic. Dr. Paul said that the layers of the onion keep peeling back as to what is murky and clear as mud. She likes having a

vision of efficiency and friendliness because it is not about being punitive, but about doing the right thing and helping people do the right thing.

As to Agenda Item 4, Chair Owens said she wants the Committee members to familiarize themselves with the regulations with the intention of how the Committee can make them clearer. She asked the Committee members to look at the ASPPB guidelines and their data collection as to what the data says about the number of supervisees a supervisor has. Chair Owens also said she wants some suggestions for Agenda Items 3 and 4 when the Committee returns in a month. Perhaps the Committee could start to put some ideas down in writing, and in another meeting or two make those ideas clear and present it to the Board, which may come back with recommendations or suggestions. She said she hoped that by the end of the year, they will have suggestions for regulation language.

Dr. Paul shared R074-18 (revised regulations). She said she is not sure if they have been codified, but the Committee members should see and be familiar with them because they dovetail with what the Committee is doing.

Chair Owens clarified that R074-18 has not yet been codified. Despite that the Board has been working with the Legislative Council Bureau since 2020, it is low on the list of their priorities. The fact that they are not yet codified makes the state exam more challenging because people are having to make sense of them on our website.

Chair Owens asked if the Committee could look now into scheduling the next meeting. Dr. Benuto said they would be looking at May 3, which is a month out, and that the same time works for her. The other Committee members agreed to that next meeting date and time. Chair Owens stated that the next meeting of the Committee would be on May 3, 2023, at 9:00 a.m., and that she will work with the executive director to get the homework out to the Committee.

Dr. Paul asked if they could also see if the Committee could also see the regulation form(s) that trainees and supervisors are asked to fill out. She thought that would be helpful.

Chair Owens said one thing they have tried to figure out is if there is a way to get a system where once a trainee fills something out, it kicks it over to the supervisor for the supervisor to fill out. While the Board office does not have the financial resources for such a system, it is another idea that the Board has floated around. Chair Owens noted that there is a piece of legislation that has been proposed for Nevada to have a universal licensing system so people could have a progress bar in terms of where they are in licensure and registration. However, those systems are pretty far out in terms of any kind of potential adoption or inclusion for the boards, so the question is how to streamline the process and get supervisors involved under the current electronic system the Board has.

Doctor O'Donohue stated that DocuSign does what Chair Owens first described. It shows the progress of document signing. Chair Owens said they use that in her practice as well, and that it something to look into if it is a usable system, as it is not really cost prohibitive.

Dr. Paul stated that counselors and CMTs have approved supervisors, and wondered if there was something the Committee could look at in their Board. Chair Owens stated that she is registered as a secondary supervisor for them and is familiar with their regulations, which provide for an arduous and intense process through the Social Work Board. While it is nice in terms of the processes they have in place, it might be overly restrictive in some ways. She also noted that the language she used for the registration of supervisors came from social work boards, and asked the executive director to include in the materials for the Committee the NAC provisions for MFTs and social workers. Dr. Paul included CTCs as well.

Dr. O'Donohue thought it would be helpful to have a discussion about what concretely good supervision looks like. Chair Owens stated that Dr. Paul has great articles and resources for that. Dr. Paul added that the set of regulations she referenced previously outlines what supervisors need to do for competent supervision, and recommended Carol Falender's book, *Supervision Essentials for the Practice of Competency-Based Supervision*.

Dr. O'Donohue said there is some overlap with different models, and he has a problem with the model being structurally rather than functionally oriented. He would like to see if there is an emphasis on evidence-based outcomes as opposed to a process where you meet for X amount of time. He asked if Dr. Paul could send the book around, in response to which she said she would provide the information to the executive director for distribution to the Committee members.

5. Public Comment - Public comment is welcomed by the Board and may be limited to three minutes per person at the discretion of the Board President. Public comment will be allowed at the beginning and end of the meeting, as noted on the agenda. The Board President may allow additional time to be given a speaker as time allows and in his sole discretion. Comments will not be restricted based on viewpoint. No action may be taken upon a matter raised under this item of the agenda until the matter itself has been specifically included on an agenda as an item upon which action may be taken (NRS 241.020)

There was no public comment at this time.

6. (For Possible Action) Adjournment

Chair Owens adjourned the meeting, stating that the executive director would send out an email with documents to review over the next month. She thanked the Committee

members for taking on this endeavor and said she appreciated how it will impact the practice of psychology.

There being no further business before the Committee, Chair Owens adjourned the meeting at 10:03 a.m.