Much has been written in recent months about the electronic practice of psychology. While I do not know of licensed psychologists using electronic communication as a substitute for face to face therapy (i.e., via videoconferencing), psychologists are considering supplementing their face to face work with clients with electronic communications. For example, some psychologists I have talked to have considered using the Internet for educational purposes; for example, for providing information about a treatment plan or available psychological resources. It is not hard to envision a situation in which a psychologist might wish to send a test result or outcome of an evaluation to another professional electronically.

Because electronic communication is now a feature of both workplace and social communication, it is important for psychologists to understand the current position of the South Carolina State Board of Examiners in Psychology with regard to the use of electronic communications in professional practice. These are our current guidelines:

**Limits of jurisdiction**

According to statute, jurisdiction is determined by the residence of the provider. The South Carolina State Board of Examiners in Psychology can regulate the activities of only those providers who reside in South Carolina. Thus, for example, if a South Carolina resident were to obtain “e-therapy” from a provider (licensed or not) in North Carolina, the South Carolinian would not be protected by the South Carolina Psychology Board.

From our point of view, the person seeking services would be doing so at his or her own risk. It is important to recognize that other states may have statutes or regulations regulating the electronic provision of psychological services by persons residing in their states (North Carolina does not). Further, states may regulate e-therapy through other statutes and regulations relating to interstate commerce. Nonetheless, once a person in South Carolina seeks electronic psychological services from a person outside of South Carolina, that person forfeits any protection from the South Carolina State Board of Examiners in Psychology.

**Guidelines for South Carolina licensed psychologists**

Assume now that a South Carolina licensed psychologist wishes to provide psychological services electronically to an individual or group either in South Carolina or another state. Such services might include, but not be limited to, a) services supplementing face to face psychotherapy (e.g. explanations, follow-up communications); b) psychoeducational services on such topics as parenting, marital decision-making and physical health; c) assessment; and d) consultation to organizations. What standards would such services have to meet?

According to statute (Chapter 55), provision of psychological services electronically is subject to all laws relating to the practice of psychology in
Disciplinary Actions of the Board

During the 2000-2001 fiscal year (beginning July 1, 2000), the Board investigated 15 new complaints of licensed psychologists from members of the public. The Board also investigated and corresponded with seven persons (not licensed as psychologists) who were misrepresenting themselves to the public as providers of psychological services.

The results of those investigations of licensees from fiscal year 2000-2001 are as follows:

- Two complaint forms were never returned to the Board office.
- After full investigations, six complaints were dismissed for insufficient evidence or found to be groundless complaints.
- One complaint was dismissed with a “Letter of Warning” addressing the psychologist’s overall approach to custody evaluations. The issues of concern were the psychologist’s practice where, after seeing one spouse, he agreed to provide a full custody evaluation for the family. He failed to anticipate or evaluate the potential for conflict of interest. The psychologist also referred to a “preliminary” report, and signed an affidavit agreeing to testify in court. “Preliminary” reports can often become a court document.
- Six complaints are on-going.
- Seven “Cease & Desist” letters were sent to unlicensed persons misrepresenting themselves as a psychologist or practicing as one.

Six ongoing investigations from fiscal year 1999-2000 resulted in the following:

- The investigation of three complaints against the same psychologist is on-going and will likely result in a “Formal Accusation” and a disciplinary hearing.
- The investigation of two complaints against the same psychologist has...
Complaints to this Board regarding child custody matters top the charts, and it appears this will continue because complaints to your Board are sometimes utilized instead of referring to the courts for resolving grievances. Our best advice is to use extra caution, or perhaps to avail yourself of a peer review by an experienced colleague.

Those subscribing to “The National Psychologist” are aware of a recent article by Psychologist Arnold Lazarus of Princeton, N.J., who proposes liberalizing the boundaries in the area of dual relationships. This has led to spirited debate: yet until modification to our present laws and regulations occur, it is recommended that strict adherence to present laws and regulations governing the practice of psychology in South Carolina be followed. This refers to the ethical behavior of psychologists in the areas of sexual, social or financial relationships with present and former clients – especially when psychologists are providing human services to their clients.

In a previous issue, I wrote an article on “closing a practice.” I have received helpful comments as a result – among them a suggestion that the transfer of records be made in a “neutral” environment. This refers to a situation where records were kept in a private residence, and former clients came to the psychologist’s home with uncomfortable exchanges occurring.

Some years ago, your Board presented an initiative so licensees could utilize Board personnel as consultants on issues of practice, ethics and the laws. Using the Board as a resource continues to flourish and produces two-way benefits as the licensee brings to our attention those gray or not well defined areas of our present regulations and laws. One was the issue of release of confidential client information. Our CODE of ETHICS, see 100.4, reads: “The psychologist may release confidential information in compliance with the CODE of LAWS of South Carolina or to conform to other state or federal laws or regulations.” The issue arises as licensees are issued subpoenas to appear and testify in court.

I recently received a memo on this issue and consulted with our Board attorney Sharon Dantzler. The disclosure of confidential patient information is governed by a sub-section of S.C. CODE 19-11-95. The law essentially requires disclosure “when required by statutory law or by court order.” Therefore, if an attorney wants the information, he/she will have to go to the judge to obtain a court order before a practitioner is required to make the disclosure.

Use of collateral persons may occur when treating a child and contact is made with a teacher or other members of the child’s family. A person may be seen a number of times in connection with the individual treatment of their spouse. A question arises when that collateral person is seen more than just a few times by the psychologist. When the “collateral spouse” for example, enters into conjoint sessions where the dynamics of the marriage are discussed, the CRC would argue that the “collateral spouse” is defacto now a patient. Treating multiple clients has produced more than their share of complaints before the CRC, and thus we would cite this as an area where caution regarding issues of confidentiality and definition of client status be carefully defined before therapy begins.

Report of Psychologists Licensed by the Board
(July 1, 2000-June 30, 2001)

| Licensed September 22, 2000 | Joanne E. Hattendorf, Ed. D. | Counseling |
| Maureen H. Carrigan, Ph. D. | Ashley B. Noojin, Ph. D. | Clinical |
| Joanne L. Davis, Ph. D. | Jennifer J. Noyes, Ph. D. | Clinical |
| Robert J. Kennerley, Ph. D. | Theodore B. Simpson, Psy. D. | Clinical |
| Jennifer L. Miller-Green, Ph. D. | Albert G. Teichner, Ph. D. | Clinical |
| Jeffrey E. Musick, Ph. D. | Clinical |
| Mary Ann Stroupe, Ph. D. | Clinical |
| George R. Woodruff, Ph. D. | Clinical |

| Licensed November 17, 2000 | Clinical |
| Ernestine C. Briggs, Ph. D. | Clinical |
| Leslie Kaye Burke, Ph. D. | Clinical |
| Cindy Lee Carter, Ph. D. | Clinical |
| Clinical |

| Licensed January 26, 2001 | Counseling |
| Sheryl R. Cantey, Psy. D. | Clinical |
| Catherine C. Cantrell, Ph. D. | School |
| Lesley A. Foulkes-Jamison, Ph. D. | Clinical |
| Robert A. Hynes, Ph. D. | Clinical |
| Larry S. Kroll, Ph. D. | Clinical |
| Emily V.B. Mulcahy, Psy. D. | Clinical |

| Licensed March 23, 2001 | Jody L. Wuethrich, Ph. D. | Clinical |
| Elizabeth A. Keathley, Ph. D. | Clinical |

| Licensed May 25, 2001 | Counseling |
| Stephanie B. Boyd, Ph. D. | Clinical |
| Shelle G. Dietrich, Psy. D. | Clinical |
| Mary R. Faucette, Ph. D. | Clinical |
| Kenneth Harwood, Ph. D. | Clinical |
| Sharon K. Presty, Ph. D. | Clinical |
| Glen O. Sallows, Ph. D. | Clinical |
| Robert F. Schilling, Ph. D. | Clinical |
| Joneis F. Thomas, Ph. D. | Clinical |

Board of Examiners in Psychology
July 2001
New Computerized EPPP Procedures for South Carolina Applicants

A. Application Procedures:

After the applicant’s PAL has been approved by the Board, the applicant notifies the Board in writing when ready to sit for the EPPP. The Board then transmits a list of approved candidates (the “Eligibility List”) to PES.

PES then sends each candidate on the eligibility list application materials, including, the computer-scannable EPPP application form (the “application form”).

Candidates will be instructed to return completed application materials to PES. Included with the completed application form will be the “examination fee.” Acceptable forms of payment of the examination fee are: certified check, money order, Visa, or MasterCard. In the case of a payment made by certified check or money order, the payee must be Professional Examination Service. In the case of payment by Visa or MasterCard, payment will include authorization for PES to charge said Visa or MasterCard. If a candidate’s application form is incomplete and/or incorrect, PES will return it to the candidate for completion and/or correction. Any application form that is not accompanied by payment of the examination fee will be deemed incomplete, and returned to the candidate.

Candidates may take the examination two times in any 12-month period. There is a 60-day waiting period required between administrations.

PES will send a letter to each candidate for whom it has scanned an application form informing the candidate of his/her authorization to sit for the examination (the “Authorization to Test Letter” or “ATT”). The ATT will contain Prometric’s toll-free telephone number for use in scheduling an examination appointment, as well as instructions on the scheduling process.

Each candidate will be required to submit a $65 “computer-based testing fee,” directly to Prometric. Candidates failing to submit the computer-based testing fee to Prometric (either by Visa/MasterCard or debit from a demand deposit account) at the time the appointment to sit for the examination is scheduled will not be permitted to schedule such appointment.

Prometric test centers in South Carolina include: Columbia, Charleston, Greenville and Myrtle Beach.

Candidates must schedule and sit for the Examination within 60 days of the date on the Authorization to Test Letter (the “eligibility period”). If the candidate fails to schedule and sit for the examination within the 60-day eligibility period, he/she will be automatically removed from the eligibility list.

Candidates declared ineligible to take an examination because of their failure to schedule to sit for the examination before the end of their 60-day eligibility period will be required to resubmit their applications along with the examination fee. Under no circumstances will the eligibility period be extended.

Candidates may reschedule to take the examination by noon two working days prior to the scheduled examination date by calling Prometric’s Candidate Services Call Center using the toll-free telephone number.

Candidates who fail to give the required two working days notice to Prometric of their intention to reschedule an examination, and fail to sit for the examination as scheduled, will forfeit their computer-based testing fee. In order to sit for the examination, candidates will be required to begin the application process again including payment of the computer-based testing fee and the examination fee.

The application materials sent to candidates will contain information regarding fees.

B. Examination Administration Procedures:

Candidates will be instructed to arrive at the Prometric Test Center (PTC) at which they have scheduled to take the Examination 15 minutes prior to their scheduled appointment. At the PTC, candidates will be asked to show “proof-of-identity.” Proof-of-Identity can be shown by the candidate by presenting a government-issued identification that bears a current photo of the candidate (e.g., passport, driver’s license, etc...), and a second piece of identification which must contain the candidate’s signature (e.g., credit card, school identification).

Prior to sitting for an examination, candidates will be photographed at the PTC. All examination sessions are videotaped.

Candidates will have four hours and 15 minutes to take the examination. Prior to an examination beginning, a tutorial will be presented to familiarize the candidate with the examination’s format as well as computer-based testing. During the examination, candidates can move forward or backward between items, and if they choose, mark items for later review.

C. Examination Scoring, Score Reports:

Candidates’ pass/fail status will not be available to candidates at the PTC. The candidates’ scores will be sent to the Board within one month.

The Board will be responsible for distributing individual pass/fail results to its candidates.
Confidences of patients of mental illness or emotional conditions

SECTION 1. The 1976 Code is amended by adding:

“Section 19-11-95.

(A) For purposes of this section:

(1) ‘Provider’ means a person licensed under the provisions of any of the following and who enters into a relationship with a patient to provide diagnosis, counseling, or treatment of a mental illness or emotional condition:

(a) Chapter 55 of Title 40;
(b) Chapter 75 of Title 40;
(c) Section 40-63-70 as a licensed master social worker or a licensed independent social worker;
(d) Section 40-33-10 as a registered nurse who meets the requirements of a clinical nurse specialist and who works in the field of mental health.

(2) ‘Patient’ means a person who consults or is interviewed by a provider to diagnose, counsel, or treat a mental illness or emotional condition as authorized in item (A)(1) of this section.

(3) ‘Confidence’ is a private communication between a patient and a provider or information given to a provider in the patient-provider relationship.

(4) ‘Written authorization after disclosure,’ or a similar phrase, includes an authorization in the application or claims procedure of an insurer or a person providing a plan of benefits.

(B) Except when permitted or required by statutory or other law, a provider knowingly may not:

(1) reveal a confidence of his patient;
(2) use a confidence of his patient to the disadvantage of the patient;
(3) reveal a confidence of his patient for the advantage of himself or of a third person, unless the patient gives written authorization after disclosure to him of what confidence is to be used and how it is to be used.

(C) A provider may reveal:

(1) confidences with the written authorization of the patient or patients affected, but only after disclosure to them of what confidences are to be revealed and to whom they will be revealed;
(2) confidences when allowed by statute or other law;
(3) the intention of the patient to commit a crime or harm himself and the information necessary to prevent the crime or harm;
(4) confidences reasonably necessary to establish or collect his fee or to defend himself or his employees against an accusation of wrongful conduct; (5) in the course of diagnosis, counseling, or treatment, confidences necessary to promote care within the generally recognized and accepted standards, practices, and procedures of the provider’s profession;
(6) confidences in proceedings conducted in accord with Sections 40-71-10 and 40-71-20;
(7) confidences with the written authorization of the patient or patients affected for processing their health insurance claims, but only after disclosure to them of what confidences are to be revealed and to whom they will be revealed.

(D) A provider shall reveal:

(1) confidences when required by statutory law or by court order for good cause shown to the extent that the patient’s care and treatment or the nature and extent of his mental illness or emotional condition are reasonably at issue in a proceeding; provided, however, confidences revealed shall not be used as evidence of grounds for divorce;
(2) confidences pursuant to a lawfully issued subpoena by a duly constituted professional licensing or disciplinary board or panel;
(3) confidences when an investigation, trial, hearing, or other proceeding by a professional licensing or disciplinary board or panel involves the question of granting a professional license or the possible revocation, suspension, or other limitation of a professional license.

(E) A disclosure pursuant to subsection (C) or (D) is limited to the information and the recipients necessary to accomplish the purpose of the subsection permitting the disclosure.

(F) A person to whom a disclosure is made pursuant to subsections (C) (1), (5) and (7), an employee to whom a disclosure is made pursuant to subsection (G), and any other person to whom a confidence, written or oral, is disclosed by a provider are bound by the same duty of confidentiality as the provider from whom he received the information.

(G) A provider shall exercise reasonable care to prevent his employees, associates, and others whose services are utilized by him from disclosing or using confidences of a patient, except that a provider may reveal the information allowed by subsections (C) and (D) through an employee.

(H) A provider releasing a confidence under the written authorization of the patient or under the provisions of this section is not liable to the patient or other person for release of the confidence to the person authorized to receive it; provided, however, a patient has a cause of action for damages against a provider, associate, agent, employee, or any other person who intentionally, willfully, or with gross negligence violates the provisions of this section.

(I) Nothing in this section alters the existing requirements of non providers to preserve confidences or the requirements of providers subject to Sections 44-23-1090 and 44-52-190. Time effective SECTION 2. This act takes effect six months after approval by the Governor. Approved the 8th day of June 1989.

Act No. 163(R249,H3599)
Introduced by Judiciary Committee; AN ACT TO AMEND THE CODE OF LAWS OF SOUTH CAROLINA, 1976, BY ADDING SECTION 19-11-95 SO AS TO PROVIDE THAT CONFIDENCES OF A PATIENT IN THE COURSE OF DIAGNOSIS OR TREATMENT OF A MENTAL OR EMOTIONAL CONDITION MAY NOT BE REVEALED BY PROVIDERS, AS DEFINED BY THIS ACT, SUBJECT TO EXCEPTIONS, TO PROVIDE IF DISCLOSURE IS MADE BY AUTHORITY OF SOME OF THE EXCEPTIONS, THE SAME DEGREE OF CONFIDENTIALITY APPLIES TO THE RECIPIENTS OF THE DISCLOSURE AS APPLIES TO THE PROVIDER, AND TO ALLOW A CAUSE OF ACTION FOR VIOLATION OF THE SECTION.

Be it enacted by the General Assembly of the State of South Carolina:
Inquiries regarding licensure in South Carolina were received from 126 persons during the 2000-2001 fiscal year.

Eleven applicants took the Examination for the Professional Practice of Psychology (EPPP) in October 2000. Of the 11, nine passed and two failed. In April 2001, we went to computerized testing and as of June 30, 2001, we have no scores to report.

Thirty-four new applicants submitted Preliminary Applications for Licensure (PAL). Of the thirty-four PALs, 29 were from APA-approved programs and accepted. Five were not from APA-approved programs and were reviewed by the Board to see if their graduate course work met the ASPPB’s educational criteria as statutorily required. The five PALs were not approved by the Board.

As of June 30, 2001 (end of fiscal year 2000-2001), 32 applicants have completed the application process and have taken oral examinations. Thirty-two applicants received a passing score on the oral exam and were licensed as psychologists in South Carolina.

Administrator

Continued from page 1

is updated every 24 hours. By using the “Licensee Look-up” employers, insurance companies, hospitals and the public will have instant access to a licensee’s renewal information, license expiration date and disciplinary actions.

LLR is upgrading its computer system agencywide. It should be operational for our area, hopefully by the renewal period. Our new computer system will expand capabilities for staff and have many advantages for licensees. Licensees will be able to access renewal forms and pay fees by credit card. If renewal forms are lost in the mail, licensees will be able to access the form on our Web site. Applicants and licensees will also be able to access and pay for applications over the Internet. The new system will give staff many more capabilities and opportunities to improve customer service. We will be able to electronically communicate with PES and ASPPB to process examination scores and disciplinary actions. We will also be able to image licensure information, track complaint information, and monitor continuing education compliance. The Psychology Board staff looks forward to the future installation of the new computer system and its expanded capabilities.

April 1, 2001, marked the start-up date for the computer-based administration of the Examination for Professional Practice in Psychology (EPPP). The exam will be given in five locations in South Carolina: Charleston, Greenville, Myrtle Beach and two sites in Columbia. South Carolina applicants may take the examination two times in any 12-month period with a 60-day waiting period required between administrations. Applicants have to be approved by the South Carolina Board of Examiners in Psychology before applying to take the EPPP. See the article “New Computerized EPPP Procedures for South Carolina Applicants” in this newsletter for more information concerning the EPPP computerized administrative procedures.

Board

Continued from page 2

resulted in the issuing of a “Formal Accusation” by the Board attorney, and will likely go to a disciplinary hearing.

• One complaint has resulted in the issuing of a “Formal Accusation” by the Board attorney, and will likely go to a disciplinary hearing.

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www.llr.state.sc.us
general. Therefore, any practitioner providing such services within this state must meet all statutory and regulatory (including ethical) standards as encoded in South Carolina law. In concrete terms, this means that any South Carolina licensed psychologist who decides to use the Internet to deliver any type of psychological service must at the very least ensure that:

a) the patient is fully informed of any limitations of treatment (including recognition of lack of research on efficacy of psychological services provided electronically);

b) all communications are clear and professional (e.g., that the same degree of care is given to verbal statements made on the Internet as would be given to statements in formal written communications);

c) conventional standards of adequate client contact have been met;

d) confidentiality is ensured.

If the Board were to find that a South Carolina licensed psychologist had, in attempting to provide psychological services electronically, violated one or more of these or other ethical standards, that person would be subject to disciplinary procedures.

Unlicensed providers

In South Carolina, it is illegal for an individual to offer psychological services without a license, unless one qualifies for an exemption under Section 40-55-90 of the South Carolina Code of Laws. Thus, if a person residing in South Carolina offers psychological services via the Internet but is neither a South Carolina licensed psychologist nor a person who is allowed to provide such services as per Section 40-55-90, that person will be prosecuted.

Conclusions

We often hear that e-therapy is the “wave of the future.” That may or may not be the case. Here is what we do know. If you are a licensed psychologist, any psychological services provided electronically must be provided in a way which meets all current standards of practice. This means that the psychologist’s activities must conform to both statute and regulation, including the Ethical Principles of Psychologists. If you as a South Carolina resident are a consumer of electronic psychological services, the South Carolina State Board of Examiners in Psychology has jurisdiction over the provider only if he or she resides in South Carolina. Should you “go out of state” for psychological treatment, you do so at your own risk.

Alert!!!

Post-Doctoral Supervisees and Supervisors

In accordance with §40-55-80, all post-doctoral supervision must be documented on a Supervision Contract, submitted and approved by the Board prior to the initiation of the supervision. Please make sure your supervisees have made an application to the Board on the proper forms before the supervision is begun. Although this is the applicant’s responsibility and is spelled out in the Application Information Form found in the Preliminary Application for Licensure, supervisors should make sure that supervisees have submitted the Post-Doctoral Supervision Contract to the Board prior to beginning supervision. Any request to consider post-doctoral supervision, which took place prior to the submission of an approved contract, must be considered by the entire Board, and the Board may require additional supervision. Supervision must be comprised of at least 1,500 hours of actual work; to include direct service, training and supervisory time.

List of Psychologists Not Renewing

David G. Brunetti, Ph. D. – Out of State
Gerald L. Gandy, Ph. D. – Out of State
Kasey L. Hamlin, Ph. D. – Out of State
Janice E. Herron, Ph. D. – Out of State
Stan J. Huey, Ph. D. – Out of State
Frank J. Provenzano, Ph. D. – Retired/Out of State
John C. Richardson, Ed. D. – Out of State
Sigrid A. Rogers, Ph. D. – Out of State
Evelyn G. Rutledge, Ph. D. – Retired
Thomas M. Stuzman, Ph. D. – Deceased
Mervyn K. Wagner, Ph. D. – Deceased
Scott A. White, Psy. D. – Out of State

In Memory of . . .

The Board of Examiners in Psychology has learned, with regret, of the death of: Thomas M. Stuzman, Ph. D., of Orlando, Florida and Mervyn K. Wagner, Ph. D. The Board extends its condolences to their families, friends and professional colleagues.
When the South Carolina legislature created the Department of Labor, Licensing and Regulation (LLR) in 1994, one driving goal was to improve efficiency and the quality of service delivered by the 40 separate agencies that were merged to form the agency. The legislature envisioned an agency that would promote efficiency and build accountability. With that in mind, LLR’s staff has created a strategic plan for the agency. This plan is a roadmap to help the agency reach the ultimate goal of being the best state government agency in the United States by the year 2010.

Key points of the strategic plan include:
• Core purpose or mission – Making South Carolina a Better and Safer Place to Work and Live.
• Core values – Provide excellent service, act with integrity and treat people with respect.
• Key strategies – “Maximize Customer Satisfaction,” “Maximize Employee Satisfaction” and “Use Resources Efficiently.”

Several interim goals also were established:
• By 2001, be recognized in the southeastern United States as a leading state government agency.
• By 2002, be recognized in the United States as a leading state government agency.
• By 2005, have specific performance measures in place to track progress toward being the best state government agency in the United States.

“These interim goals will keep us focused on the larger goal of being the best state government agency in the United States by 2010,” LLR Director Rita M. McKinney said. “I like to think of these goals as short-term wins on the road to achieving excellence in public service.”