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February 14, 2017

To: Oregon House Committe on Healthcare

Re: **HB 2319 (2017)** Position: **Against**

Dear Members of the Oregon House Committee on Healthcare:

I am writing today in opposition to HB 2319.

Listed are my concerns:

1) The writing of HB 2319 is atrocious, and the bill is thus incomprehensible.

I have been an observer of the Oregon Board of Psychologist Examiners (OBPE) for 15 years and even I struggle to make sense of this bill. I suspect it will be even more difficult for other stakeholders to understand.

The OBPE and the Oregon Board of Licensed Professional Counselors & Therapists (OBLPCT) are already operating with a set of ORS's & OAR's which are so internally contradicting that it facilitates arbitrary and capricious behavior on the part of the boards. The passage of this garbled bill would simply make matters worse.

A personal story: OBPE, proposed a \$5,000 Civil Penalty against me in 2013 for using an abbreviation after my name to indicate my license as a Psychologist Associate which they didn't like. They later (ef.1-21-15) wrote an *ex post facto* OAR 858-010-0062 to make rules on the matter CLEAR. Prior to the clarity of this rule, the OBPE was acting in an arbitrary and capricious manner. CLARITY is important in a State which operates under the Rule of Law. HB 2319 is not clear. It is a mess.

Later in 2013, OBPE decided to accuse me of "claiming to practice psychology" and claiming I have a degree in "clinical" psychology (which I have). They changed their proposal to a *one year suspension of my license* and a *\$10,000 Civil Penalty*. Subsequently, I have asked OBPE several times (twice at audio recorded board meetings) what it is that I, as a licensed Psychologist Associate, practice. On every occasion, they were unwilling or unable to tell me what it is that I practice. They used the laws and rules to assert (arbitrarily & capriciously) that I did NOT practice psychology. But they could not tell me what it is I DO practice. I pay \$750 every 2 years to OBPE and complete 40 CE's just like (doctoral) psychologist, but I DO NOT know what it is my board believes they licensee me to practice. This has caused considerable impairment to the practice of my profession and my ability to earn my living. ■

In the matter of Yankee vs. the Oregon Medical Board (OMB), the Oregon Appellate Court had to spell out to Warren Foote, the AAG for OMB, OBPE <u>AND</u> OBLPCT, in child-like terms, the difference between "Fact" and "Reason," even pasting a dictionary definition in large print in the written court opinion. Mr. Foote's tendency to exploit sloppy language in statute and rule is a travesty. Mr. Foote is, and will be, the AAG representing BOTH the OBPE <u>and</u> the OBLPCT. We cannot give him the atrociously written HB 2319 as it is now written to work with.

2) The ties between OBPE and OBLPCT is already a case of INHERENT conflict of interest. HB 2319 will make it worse.

Despite the IRREFUTABLE consensus in the Clinical Mental Health published, peer reviewed scientific literature that a Psychologist Clinician produces NO BETTER psychotherapeutic outcome than a masters degreed Counselor, Therapist or other similar Mental Health Professional, OBPE attempts to hold psychologists in dominion over Counselors and Therapists. What is going to happen in the proposed "Oregon Mental Health Agency" when Counselors and Therapists (as is their *logical* right) petition to be called "Psychologists?" Who's side will the proposed "Oregon Mental Health Regulatory Agency" take? HB 2329 will only make the current OBPE/OBLPCT shared-staff, inherent-conflict-of-interest problem *worse*.

3) HB 2319 would create a dangerous <u>ILLUSION</u> of the much needed independent oversight of OBPE and OBLPCT.

If stakeholders are lead to believe that the proposed "Oregon Mental Health Regulatory Agency" (OMHRA) will provide the increasingly recognized utter need for independent oversight of OBPE and OBLPCT, they will stop pressing for REAL oversight of these boards.

HB 2319 needs to detail *specific* duties of oversight which the OMHRA will abide. Protocal needs to be made specific for instances when one of these boards operate outside of rule and law. Examples of operating outside of rule and law include the writing of unconstitutional OARS, and the denial of REAL due process in disciplinary proceedings. Without such such clarity and detail, HB 2319 will do nothing but create more obfuscation of the laws and rules which surround the regulation of the practices of psychology and counseling in Oregon. As it is written, HB 2319 does NOT provide the much needed independent oversight these boards need. The Oregon people and the Oregon government are crying out for greater transparency. HB 2319 does NOT increase transparency. It decreases it.

HB 2319 *must* be rejected by the Oregon House Committee on Healthcare as it is presently written. I ask that the bill be sent back to its writers for rewrite in consideration of the concerns expressed in this letter.

Thank you.

Christian Wolff