From: Sunset Advisory Commission

To: <u>Janet Wood</u>

Subject: FW: Public Input Form for Agencies Under Review (Public/After Publication)

Date: Wednesday, November 16, 2016 8:14:59 AM

----Original Message-----

From: sundrupal@capitol.local [mailto:sundrupal@capitol.local]

Sent: Tuesday, November 15, 2016 8:57 PM

To: Sunset Advisory Commission

Subject: Public Input Form for Agencies Under Review (Public/After Publication)

Agency: TEXAS STATE BOARD EXAMINERS MARRIAGE AND FAMILY THERAPISTS

First Name: Aaron

Last Name: Robb

Title:

Organization you are affiliated with:

Email:

City: Frisco

State: Texas

Your Comments About the Staff Report, Including Recommendations Supported or Opposed:

[Apologies in advance, as there are multiple Boards covered by the same report I am submitting this for each of those boards.]

By and large, I agree with the Sunset Commission's assessment of multiple issues outlined in the report. As a Licensed Professional Counselor, as well as a member of both the Texas Counseling Association and the National Association of Social Workers, I have seen many of these problems in for years and agree that the Boards do not appear able to resolve these problems themselves or they would have done so already. The one exception I would take to the solutions proposed is my opposition to the recommendation to relegate mental health professional licensing boards to advisory status under the over-extended Texas Department of Licensing and Regulation (TDLR).

Oversight of mental health professionals is beyond the scope of TDLR. None of the occupations regulated by TDLR work with fragile individuals struggling to overcome devastating behavioral, social, emotional and physical challenges.

While the TDLR administrative model should inform application and complaint procedures for the board overseeing mental health professionals, TDLR is not equipped to regulate mental and behavioral health professionals. Expanding the scope of TDLR beyond its mission is likely to adversely impact consumer protection across all the industries it regulates and risk its efficiency.

A move to TDLR will also not resolve access to care or regulatory challenges, as it just shuffles the problem around. The State should allocate licensing fee revenue to directly support the regulatory functions of the Boards. Issues #2 and #3 would be moot had the Texas Department of State Health Services allocated funds generated by licensing fees solely to support the regulatory functions of the existing Boards.

Setting and enforcing clear, ethical training and practice standards for mental health professionals can only be

accomplished by a professionally specialized licensing board. Best practice to protect consumers is to have an independent, professionally specialized board with public and professional members that regulate mental health care.

The long-term solution that both addresses regulatory efficiency and professional standards is to combine all behavioral sciences licenses (LPC, SW, LMFT, psychology, LCDC, and LSOTP; possibly others) into one larger regulatory agency in order to achieve the cost savings that adequate scale would provide. There is no need for multiple boards writing nearly identical rules to regulate therapy, parenting facilitation, child custody evaluations, and other professional mental health services as currently exists.

Significant cost savings are available if we cut that administrative burden (e.g. each agency spending Board and staff time debating and publishing minutely different rules in the Texas Register) and have one unified set of rules for all mental health professionals based not on Guild but on services performed. Such a larger agency could still have specialty rules for the different sub-groups of mental health professionals, such as the specialized care issues encountered by LSOTPs, or the non-clinical work of LMSWs, but these would work in harmony with the base rule set established by the agency (rather than in conflict as we sometimes see now). Such a move would also streamline enforcement actions, as complaints against licensees who hold multiple credentials (e.g. LPCs who are also LMFTs) could be heard by one complaints process rather than duplicative parallel processes.

Finally, the multiple due process and privacy/confidentiality protections noted by the Commission should be legislatively mandated on the Board, along with directives to insure staff screening of complaints so that frivolous and non-jurisdictional complaints occupy as minimal an amount of Board time as possible. The need for the Board to close non-jurisdictional complaints (such as when a family court litigant complains about the outcome of a court case to the Board rather than the Court of Appeals, simply because they disliked the opinion of a mental health professional involved in the case) efficiently has already been recognized by the Legislature. In 2015 the Legislature, through HB 1449, instructed the Board to enact rules that "specify that any complaint relating to the outcome of a child custody evaluation or adoption evaluation conducted by a person licensed by any of the boards must be reported to the court that ordered the evaluation." Rather than continue to piecemeal these instructions to the Board, there should be an overarching directive that when no breach of ethical duty is alleged by a complainant then the Board should close the case. Unfortunately disgruntled litigants, and even unhappy extended family members who were never in a professional relationship with a licensee, are creating an increased workload for the Boards which interferes with the Boards addressing actual protection of the public.

Any Alternative or New Recommendations on This Agency: Please see above for integrated recommendations.

My Comment Will Be Made Public: I agree