

**DEPARTMENT OF HEALTH
HEALTH REGULATION AND LICENSING ADMINISTRATION**

BOARD OF PSYCHOLOGY
AUTHORITY FOR GUIDANCE

March 14, 2023
DATE OF POLICY EXTENSION

23-002
POLICY NO.

POLICY STATEMENT

**GUIDANCE ON TELEPSYCHOLOGY AND REMOTE SUPERVISION DURING THE
(FORMER) COVID-19 HEALTH EMERGENCY**

EXTENDED PERMANENTLY

In light of the former COVID-19 Public Health Emergency (that had been declared by the Mayor on January 11, 2022 via MAYOR’S ORDER No.: 2022-08) the Board of Psychology (Board) permanently extends the following policy it had previously adopted and offers this guidance related to telepsychology and the supervision of psychology practice in the District. (The policy, No. 20-002 was in effect during calendar year 2020 and expired on December 31, 2020; then, policy statement, No. 21-001, was issued to extend the guidance until January 31, 2022. Subsequently, policy statement, No. 22-001, was issued to extend the guidance until August 31, 2022. Policy statement, No. 22-002 was then subsequently issued to extend the guidance until January 31, 2023.) **This policy statement, No. 23-002, is issued to permanently extend the guidance.** As a result, further guidance statements may only be issued if necessary.

The District issues psychology licenses and psychology associate registrations. Licensed psychologists are authorized to practice independently **while psychology associates must practice under the supervision of a licensed psychologist. The *primary supervisor under whose supervision psychology associates can practice must be a licensed psychologist.*** The psychologist who is the primary supervisor *may* delegate some supervisory responsibility to another psychologist, a psychiatrist, or an independent clinical social worker licensed in the District as is stated in 17 DCMR § 6911.1. *However, the **primary supervisor must be a licensed psychologist.*** Additionally, an individual seeking a psychology license must possess a doctoral degree in psychology and have accrued two (2) years of practice experience under the primary supervision of a psychologist. 17 DCMR § 6902.1. Section 6911.6 of Title 17 of the District of Columbia Municipal Regulations (DCMR) requires that ten percent (10%) of the supervised practice be performed under the immediate supervision of the supervising psychologist. Immediate supervision is defined as supervision in which the supervisor maintains direction and control of the services provided by the supervisee through in person, face-to-face observation or in physical proximity to the individual being supervised. 17 DCMR § 6999.1.

Board of Psychology

Policy Statement 23-002: Guidance on Telepsychology and Remote Supervision during (former) COVID-19 Emergency – EXTENDED PERMANENTLY

On March 11, 2020, Mayor Muriel Bowser declared a state of public health emergency in the District due to the threat of the COVID-19 pandemic. Mayor's Order 2020-045. Following this declaration, the Mayor issued an order prohibiting mass gatherings of fifty (50) or more persons on March 16, 2020. Mayor's Order 2020-048. On March 24, 2020, non-essential businesses were ordered closed. Mayor's Order 2020-053. A stay-at-home order was issued on March 30, 2020, prohibiting District residents from leaving their home except for certain specified essential businesses. Mayor's Order 2020-054.

As a result of these prior emergency restrictions, health care practitioners were forced to provide care through telehealth, which is used here to refer to the practice of health care or provision of care or treatment to clients located in the District, remotely, through the use of communication technology. To support safe and effective telehealth practice, the Department of Health issued a Guidance dated March 12, 2020 (Guidance) to clarify the standards and requirements for telepractice.

The Guidance stipulates that health care providers are permitted to deliver health care services to clients, through the use of communication technology so long as they conform to the acceptable standards of care and comply with privacy requirements. *For additional guidance, providers may consult 17 DCMR § 4618 (Telemedicine), which the Board now temporarily adopts as framework for the tele-practice of psychology. Further, the Guidance provides that a practitioner may establish new patients via the use of real-time telehealth.*

However, **practitioners seeking to practice telehealth to District clients must be properly licensed in the District.** (Psychology students practicing under appropriate supervision as part of their psychology education are exempt from licensure.) *Based on the Guidance above, therefore, the Board has determined that psychologists licensed in the District may engage in telepsychology practice including providing supervision via communication technology, provided, that licensees comply with the applicable standards of care and privacy mandates.*

However, the requirement of **“immediate supervision” is hereby modified to permit real-time, synchronous communication between the supervisor and the supervisee through the use of appropriate real-time technology such as telephone or audiovisual telecommunication.** The use of technology that does not involve real-time communication, such as e-mail or text messaging, while permissible as part of tele-practice and tele-supervision, does not constitute immediate supervision.

For illustration, a psychology associate's practice must be fully supervised and the supervisor may utilize either synchronous or asynchronous means of communication. However, ten percent (10%) of the associate's practice time must receive immediate supervision conducted via synchronous means of communication.

This policy is applicable to psychology practice and supervision going forward.

Board of Psychology

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All inquiries pertaining to the practice of psychology, including the continuing education requirements, may be directed to the Board at dcbopsych@dc.gov.