

EXPERT REVIEWER PROGRAM

Thank you for your interest in applying to serve the Board of Psychology (“Board”) as an expert reviewer. Expert reviewers are licensed psychologists who perform case reviews for the Board’s Enforcement Program and perform Board-ordered psychological evaluations.

Psychologists interested in becoming an expert reviewer must:

- ❖ Have held a valid license for at least five consecutive years prior to submitting an application to become an expert reviewer
- ❖ Have an active practice, which is defined as at least 80 hours per month consisting of direct patient care, clinical activity, psychometric testing and/or teaching, with at least 40 of those 80 hours in direct patient care
- ❖ Have five or more years of experience and expertise in specific areas of practice
- ❖ Have forensic experience
- ❖ Complete an application identifying their top areas of expertise and relevant experience, and sign a statement under penalty of perjury attesting to the application’s truthfulness
- ❖ Submit a current curriculum vitae (“CV”) that documents training, education, relevant experience and current work setting
- ❖ Agree to provide copies of publications and samples and/or redacted evaluations, upon request
- ❖ Have no prior or current charges or disciplinary actions related to any healing arts license, registration, certificate or credential to practice psychology or any other profession or occupation in any state in the United States or foreign country
- ❖ Have no criminal convictions, including any that were expunged or dismissed
- ❖ Complete the Board’s expert training workshop in person and agree to attend subsequent biennial training in order to remain a qualified expert
- ❖ Agree to the Board’s hourly compensation rates
- ❖ Agree to testify at administrative hearings and consult with the Attorney General’s Office or investigative staff, whenever necessary
- ❖ Agree that the expert reviewer term is two years in length, with an option to apply for renewal at the end of the two-year term

When applying to become an expert reviewer for the Board, please also consider the following information:

Areas of Expertise

Each expert must identify their areas of expertise and relevant experience. Your current CV must support the identified areas of expertise. We request you complete the attached Areas of Expertise Questionnaire. This questionnaire assists the Board staff in selecting experts for case review. If requested, please ensure that you're able to provide documentation of education, training and experience in your areas of expertise and relevant experience. This information is important if you are required to testify at an administrative hearing.

The Board is only able to use you as an expert in the areas where you are a qualified expert. Although you may have experience and be competent in many areas of psychology, for this purpose, focus only on your areas of expertise.

Expert Reviewer Renewal

Each approved expert reviewer will initially serve a two-year term. At the end of the two-year term, experts wishing to continue to serve as expert reviewers will be required to renew by submitting an expert reviewer application and the required documentation. The Enforcement Program Manager will review each application for renewal.

Biennial Expert Training

Every two years, expert reviewers are required to attend an "in-person" expert training/update session presented by the Board of Psychology.

Curriculum Vitae ("CV")

Your CV must be kept current and available to the Board, upon request.

Because your safety is of the utmost importance to the Board, we recommend that your CV not list your residential address or phone number, as it may become evidence in an administrative hearing and, therefore, becomes available to the public. The same is true for your address of record with the Board. If you would like to verify or change your address of record, please contact the Enforcement Technician at (916) 574-7119.

Hourly Compensation

Depending upon the services provided, Board experts receive \$100 - \$200 per hour for record review, consultation with investigators, report preparation, consultation with the Attorney General's Office and providing testimony at hearing. In addition, regular and customary fees are typically paid to experts who are Board-appointed to perform psychological evaluations on probationers (fees paid by the probationer).

The Expert Reviewer Program is the backbone of the Board's Enforcement Program, and its effectiveness is vital for fulfilling our legislative mandate to protect California consumers of psychological services from unprofessional, incompetent and otherwise dangerous practitioners.

If you are interested in becoming an expert reviewer for the Board of Psychology's Enforcement Program, please return the following information to:

**Board of Psychology
Enforcement Program
1625 N. Market Blvd., Ste. N-215
Sacramento, CA 95834**

- ❖ Expert Reviewer Application
- ❖ Copies of certificates for the continuing education ("CE") courses you have attended in the last two years (please do not send original certificates)
- ❖ A relevant writing sample or recent publication (or excerpt)
- ❖ A sample redacted evaluation (if you indicated you would conduct psychological evaluations for the Board)
- ❖ A current CV
- ❖ A cover letter describing your current practice/employment, forensic experience, work setting and why you are interested in serving as an expert reviewer

The Enforcement Program Manager will review your materials to determine your eligibility, including whether the Board needs additional expert reviewers in the specialty areas that you have indicated. If you are approved as a Board expert reviewer, you will be asked to participate in an initial training and subsequent biennial training sessions, for which you may earn continuing education credits.

If you have any questions, please contact the Enforcement Technician at (916) 574-7119.

**California Board of Psychology
Expert Reviewer Application**

Name (First, Initial, Last):

Address:

City, State, Zip:

Work:

E-mail:

Address for Fed Ex/UPS shipments, if different from above:

Address:

City, State, Zip:

Please indicate your Primary Professional Work: *(Please check all that apply)*

- Academic
- Administrative
- Clinical
- Consulting
- Health/Medical Psychology

Please indicate your primary client base: *(Please check all that apply)*

- Adolescents
- Adults
- Children
- Couples/Marital
- Elderly
- Family
- Organizations/Institutions

In addition to English, please list any other languages in which you possess written and verbal fluency:

Printed Name:

Have you ever been arrested, convicted or pled nolo contendere (no contest) to any violation of any federal, state, or local law of any state in the United States or foreign county? You are required to list any convictions set aside and dismissed, or expunged or where a stay of execution has been issued. Yes No

Has any licensing board, agency or hospital filed or taken disciplinary action against you regarding any healing arts license, registration, certificate or credential to practice psychology or any other profession or occupation in any state in the United States or foreign country? If yes, please attach a detailed explanation. Yes No

Do you have an active practice, which is defined as at least 80 hours per month in direct patient care, clinical activity, psychometric testing and/or teaching, with at least 40 of those 80 hours in direct patient care? Yes No

Do you perform psychological evaluations and conduct testing? Yes No

If yes, please state how many evaluations you have completed in the previous two years.

Would you be interested in performing psychological evaluations and testing for the Board of Psychology? Yes No

If you are interested in performing psychological evaluations and testing for the Board of Psychology, you are required to submit a redacted sample evaluation.

Do you have a thorough understanding of the Laws and Regulations Relating to the Practice of Psychology and the APA Ethical Principles of Psychologists and Code of Conduct? Yes No

Have you ever testified/supported your professional opinion (as an expert witness) in court/formal setting? Yes No

If so, when and what was the outcome?

AREAS OF EXPERTISE QUESTIONNAIRE

From the following topics, please select those for which you have demonstrated expertise and for which you would like to be utilized as an expert reviewer:

Ethics and Laws:

Confidentiality (including exceptions)
Dual/Multiple Relationships (sexual and non-sexual)
Media Issues
Informed Consent
Patient Abandonment
Record Keeping/Documentation
Reporting (child & elder abuse, Tarasoff and related laws)
Telehealth

Diversity:

Cultural/Ethnic; Gay/Lesbian;
Transgender; HIV/AIDS
Religion

Assessment/Psychological Testing:

Child Custody
Diagnostic
Disability/Insurance Evaluations
Neuropsychological
Organizational
Personality
Psychological Evaluations
Suicide Risk
Workers' Compensation Evaluations

Psychotherapy:

Anger Management
Behavioral
Biofeedback
Divorce Mediation
Health/Medical
Hypnosis
Psychodynamic
Psychopharmacology
Sex Therapy
Systems

Specific Diagnostic Categories:

Borderline Personality Disorder
Chemical Dependency/Substance Abuse
Dissociative Identity Disorder
Post-Traumatic Stress Disorder
Sexual Abuse

Supervision:

Organizational/Consulting
Supervised Professional Experience (SPE)

Other/Areas Not Listed:

Forensic

Application Certification

I hereby certify under penalty of perjury that all statements made in this application are true and complete, and I understand that any misstatements of material facts will subject me to disqualification. I further understand that if approved, I will serve as an expert reviewer for a period of two years, at which time I can apply to renew my status. If I decide not to participate as an expert reviewer, I will notify the Board of such.

Printed Name:

Signature: _____ Date: