

Good morning Committee,


My name is Christopher Carpenter and I represent my experience as an individual but also as a board member of the Wisconsin Association for Marriage and Family Therapy. I (we as the WAMFT board) have concerns for the backlog of license applications as well as the draft of training licenses in draft LRB0367. I want to thank you for allowing me to come in and speak about my experience navigating the new License-E portal as well as my experience with the turn around for licensing. First off, the License-E portal itself is very user friendly. I am happy with that and the ability to pause and come back to resume my application. I was able to have clear instructions for what was expected of me. For example, I needed to have course descriptions and dates for when I took the classes or will be taking the classes. I was able to find the information necessary for the application. With that being said, I checked week after week to see the status on my license application. I then got a hold of the chair of the Wisconsin Association of Marriage and Family Therapy to see what guidance I could get. It took her to get a hold of someone in DSPS to review my application and get it completed. If someone high up in DSPS can review and give me feedback on my application within a day, I really can't understand why it takes weeks for a "team to review" my application and make a decision on licensing. My story is not the only one this committee has heard and it won't be the last I am sure of this. It would be really nice to see if there was an estimated time shown on the License-E portal that says a realistic timeline of when our applications would be processed. But the overall experience using this new system has been very enjoyable and user friendly. However, the complaint of the backlog from DSPS on the reviewing, processing, and decision making on licensure is highly concerning. If we want lower rates of suicide, better family functioning, and less deaths from drug overdose, then DSPS needs to do a better job of fixing this backlog. DSPS also needs to have more staff reviewing the applications and processing them.

I have another concern for DSPS and the possibility of giving preliminary licenses to mental health professionals (LRB0367). The language used in the draft almost seems as though you can apply for this credential as long as in two years you will apply for a training license. This means someone right out of their undergraduate degree could apply for this credentialing. This is extremely problematic and

although it is another hardship to have to review and approve/deny the application, it is even more harmful to give a preliminary credential prior to training license. Training licenses provide knowledge, skills, and growth when under a supervisor. 3,000 hours post graduate is the necessary hours for a training license to become fully licensed. This is a minimum requirement as the agency and MPSW board has decided these are the minimum hours for therapists to have the confidence and competency to be on their own. There would be more harm to clients if you give a preliminary license prior to training license and permit people to have licenses after undergraduate school. There is a reason that after four years of medical school, these young trainees are under supervision of their attending or fellow. The reason doctors practice this safe and comprehensive practice is to ensure confidence as well as competence with their residents. That being said, it is crucial that therapists practice this same training that other medical fields need. The other aspect I want to talk about is the desire that this department has on the Sunset program. Reviewing and deciding whether or not occupational licensing needs licensing is a radical implementation of bad practice. It is important to keep the licensing necessary for mental health professionals and not have a four year undergraduate conduct therapy. Quite frankly, I would see more harm than good, and the requirements for a psychology degree does not effectively help someone have the knowledge and skills necessary to conduct therapy. The way we make sure that therapists now are competent, is by the 30 continuing education credits every two years to ensure that licensed therapists are up to date on evidence-based practices. These practices have been shown to be most effective and applied to clients. Without these types of requirements, licensed therapists would be serving harm to the public. I know that this committee may not understand the daily operations as a therapist. But, I can tell you that you do not want a Bachelor's level graduate working with military service with PTSD, or personality disorders, sexual disorders. This also includes families, kids, teenagers, immigrants, people with disabilities, minority groups and more. If any of you have children and are of college level, would you entrust them with people's lives?

Again, I want to thank you for allowing me to speak at this hearing and I hope that hearing these experiences will have a positive impact towards fixing this systemic problem.

Sincerely,

Chris Carpenter, LMFT-IT, 
Treasurer for WAMFT