



Nevada Psychological Association

NPA News

The Voice of Psychology in Nevada

Upcoming CE Events:

- **October—December 2016**
The Trust Ethics & Risk Management Webinar Series
Online • 6 Ethics CE Credits
- **February 24th, 2017**
Prolonged Exposure for the Treatment of PTSD
Tom Mullin, Ph.D.
Las Vegas • 6 CE Credits
- **March 24th & 25th, 2017**
Gottman Level 1 Training In Couples Therapy
Scott Wolfe, Ph.D.
Reno • 12 CE Credits
- **May 12th, 2017**
NPA Annual Conference—Psychology, Payment, and Policy: Opportunities for Practice Expansion
Benjamin Miller, Psy.D.
Las Vegas • 6 CE Credits
- **September 29th, 2017**
Doing Business as a Psychologist: The Graduate Course You Never Had
Larry Waldman, Ph.D.
Las Vegas • 6 CE Credits
- **November 17th, 2017**
Understanding and Coping with Pain
Akiko Okifuji, Ph.D.
Reno • 6 CE Credits

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2016 Fall Newsletter

IN THIS ISSUE....

THE APA APPORTIONMENT BALLOT - What it is and why you shouldn't just throw it away!

What is it? The Apportionment Ballot is used to determine the makeup of the [APA Council](#). All APA members have ten votes that they can allocate to different divisions within APA. The ballots will arrive in early November.

What is the APA Council? It is the APA's chief governing body and it is the final decision making body. The APA Council votes on multiple issues that affect the practice of psychology everywhere, including here in Nevada. The APA Council votes on key issues such as budgets for state associations (like NPA), policy documents and guidelines that impact professional practice.

What should I do? First of all, don't throw away the ballot. In the event that you are not sure how to allocate your votes, please keep in mind that [NPA Needs Your Votes](#) and that you can allocate all ten votes to your state organization! We want to keep a strong voice on the council so that NPA and Nevada psychologists are appropriately represented.

(for more details, see Page 12)

Also, take a look inside to receive the latest information on topics relevant to Nevada

- **Update from our 2016/17 President, Bree Mullin, Psy.D.**
- **Help us Meet our NPA-PAC Fundraising Goal!** Form on Page 5
- **Update from NPA Lobbyist, Bryan Gresh**
- **Update from our Legislative Committee**
- **2016 & 2017 Continuing Education Calendars**
- **Article: A Couples' Sex Life is a Window into their Relationship**
- **Article: Having the Most Difficult Conversation**
- **2016/2017 Continuing Education Workshop Calendar**
- **Are your 2016/17 NPA membership dues current?** Check the list on pages 16-17. If your name is not on the list, you still need to renew your dues.

~ ~ ~ An Update from our President—Bree Mullin, Psy.D. ~ ~ ~

Thank you NPA for providing me with the opportunity to lead our organization through these inspiring times! Remaining true to our mission statement of advancing psychology as a science and profession and serving the professional needs of our members and community, NPA continues to pilot local, state, and national endeavors. Locally, we supported Dr. Shera Bradley in her efforts to protect patient privacy, by donating \$2,000 to the legal fees required to defend confidentiality, as well as submitting an Amicus Brief to the Nevada Supreme Court and requesting that APA do the same. On a state level, our Legislative Committee and NPA's lobbyist, Bryan Gresh, are actively promoting the Nevada Corporate Practice Law (NRS 89.050), as well as pressing lawmakers to add Psychologists to the definition of "Physician." Nationally, NPA is monitoring legislation relevant to mental and behavioral healthcare (SB 2680; SB 1945; HR 2646), as well as the wake of the Hoffman Report. In response to the Independent Review, we organized a CE event to address psychologists' roles in maintaining ethical standards while employed in institutional settings.

Driving our organization towards success is NPA's new three-year strategic plan. Our revised Strategic Business Objectives (SBO) include: improving financial stability, providing high quality service to members, developing and supporting leadership, and advocating for psychology as a science and profession. NPA identified four to six detailed actions (translators) for each SBO that we will implement to steer us toward goal achievement. We chose six of these translators on which we will focus in 2016-2017, so that in 2017-2019, the foundations will be laid and the remaining translators can be addressed.

During the 2016-2017 year, NPA will improve financial stability by increasing membership via promoting online membership renewals, increasing CE sponsorship, and investigating new pricing models. We have been successful in partnering with new CE sponsors, including Destinations for Recovery, Center for Hope, and Willow Springs, US Air Force Health Professions & Clearview Treatment Centers, which has significantly helped balance our finances. Currently, we are working towards implementing new fees for classified and newsletter advertising, as well as CE workshops. In order to provide high quality services to our members, we must first improve communication with them, which we have initiated by posting summaries of Executive Board meetings to the listserv and being responsive to feedback. We are also coordinating efforts with AT&T to provide discounts on telecommunication services to NPA members in addition to implementing an Office Depot/Office Max Discount program this Spring. With the goal of developing and supporting leadership, we intend to promote the wellness of our Board members, as to avoid attrition and enhance our leadership pipeline. In advocating for psychology as a science and profession, we developed a plan to increase coordination between our Legislative Committee and Executive Board; the Legislative Committee will provide detailed updates to the Board, which will support providing members with information about state and national advocacy efforts.

When NPA Board members are not directly implementing our strategic plan, we are participating in community events to raise awareness of psychology and our profession. Most recently, NPA participated in UNLV Lincy Institute's Workforce Development Forum to address the shortage of skilled professionals trained to meet the behavioral health needs of our community.

It is so motivating to lead an organization so small in numbers, yet so LARGE in professional reach. If you would like to join us in promoting our profession, please contact us today.

Bree Mullin, Psy.D.
2016-2017 NPA President



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** The Trust Practice and Risk Management Association (TrustPARMA) is a national nonprofit membership organization, established by The American Insurance Trust (The Trust) to support psychology, mental health, and allied health professions by promoting education, risk management, and practice management. For more information visit trustinsurance.com.

The View From Carson City *by Bryan Gresh, NPA Lobbyist*



The calendar continues its daily march toward the inevitable. November 8th is Election Day. Early voting began last Saturday. NPA does not formally advocate that you vote for or against a particular candidate or ballot question. But it does advocate one position: VOTE. Be informed and cast your ballot. Whether you vote early, by mail or in person on November 8th, please take the time to exercise this American privilege, this sacred right. Here in Nevada, we have a number of races which warrant NPA's attention. True—voters nationwide are finding fault with both the Republican and Democratic choices for President. But, not so at the state level. Here's how Nevada's ballot is shaping up:

The top of the ticket points to the United States Senate seat being vacated by retiring Harry Reid. Republican Joe Heck, the current Congressman from CD 3, is waging a spirited campaign against Nevada's former Attorney General, Catherine Cortez-Masto. |

Give me three poll takers and I'll give you one poll with Heck in the lead, one with Cortez-Masto in front and a third poll showing the race dead even. We'll know soon enough which of those hypothetical pollsters got it right. The other races to watch are all in the Nevada State Senate. Republicans control the upper chamber by a slim, 11-to-10 margin. If one contested seat flips from R to D, then the Democrats take in control of the state Senate. Out toward Summerlin, Victoria Seaman, a current Assembly member and anti-tax vote, is battling Democratic newcomer, Nicole Cannizzaro. In Henderson, Democratic state Senator Joyce Woodhouse is taking on fellow educator, Republican Carrie Buck. And up north, Reno Republican and former Assembly Minority Leader Heidi Gansert is up against Democrat Devon Reese.

These races are close, candidates are scrambling for every dollar, and every last vote they can get. How many dollars? According to the people who are raising that campaign cash, the two senate races in Southern Nevada will top well over one million dollars in spending. Each.

That's a staggering sum. And yet, thanks to your generosity and commitment, NPA has met its Political Action Committee (PAC) fundraising goals for this two-year period. So, thank you! Sure, our target number is a modest one compared to some other huge concerns in Carson City. But NPA members came through and, good news going forward, we will launch a PAC fundraising drive for just ONE month every TWO years! One could argue much of that fundraising success has to do with the current group of dedicated psychologists serving as NPA Executive Board members and Legislative Committee members, and one would win that argument. This lobbyist has worked with dozens of fantastic NPA leaders over the years. But the current group—both Legislative and Executive—are the best and brightest I've had the pleasure of working with. Friends, YOUR NPA is in good hands.

It will soon be February once again. Time again to take the relaxing drive up Highway 95 to our state's capital and the 79th Session of the Nevada State Legislature. NPA is already sifting through the nearly 500 bill draft requests filed so far, with another 500 to go before the session concludes in early June. Mental Health, we're told, is going to be a key issue commanding the attention of the Gang of 63 in 2017. NPA will be ready. We have to be—we're going to seek a change in Nevada's Corporate Practice law. It's our goal to amend the law to allow medical and mental health professionals to form equal partnerships. You'll be hearing more on this exciting plan to foster the development of multidisciplinary health services for patients and promote healthcare coordination and collaboration among providers as it moves through the legislative pipeline. Stay tuned!

Thank you.
Bryan Gresh
NPA Government Affairs Firm



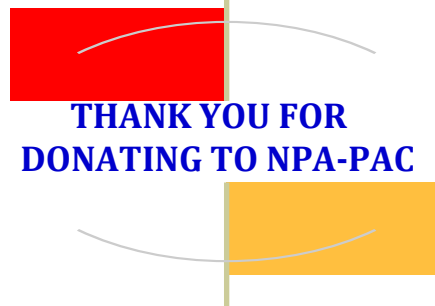
NPA-PAC FUNDRAISING DRIVE

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Or Fax this form to **1-888-654-0050**

Donations may also be made online at www.nvpsychology.org

Donations are NOT tax-deductible, NPA-PAC is an affiliated organization that makes contribution directly to those running for political office in Nevada.

NPA Legislative Committee Update (October 2016)

The Legislative Committee has been quite active during the past year. We had a very successful NPA PAC fundraiser, which resulted in over \$10,000 being raised to support NPA's efforts to advocate for psychology and psychologists in our state. We are truly appreciative to all that contributed. The Legislative Committee has also been quite busy tracking several issues that are likely to be put forward during the 2017 Nevada Legislative Session.

1. The possible bill draft request for a "Behavioral Health Super Board" to regulate all behavioral health groups including psychologists is currently in the very early stages of development. There has been considerable opposition expressed from many stakeholders, but it appears support exists to combine at least some of the behavioral Boards. Although the Nevada Board of Psychological Examiners has to take the lead in the upcoming legislative fight, we instructed our lobbyist, Bryan Gresh, to assist in keeping psychology as a stand-alone Board. We will continue to track this issue closely.

2. We also continue to move forward with our corporate practice initiative to amend NRS 89.050, which currently prohibits mental/behavioral health professionals (e.g., psychologists, MFTs, LCSWs) from forming business partnerships with medical professionals (e.g., MDs) and impedes the practice of integrated healthcare. We have received considerable support for this initiative from multiple disciplines including medical doctors.

3. The PSYPACT, which is a cooperative agreement between states that authorizes both telepsychology and temporary in-person, face-to-face practice of psychology across state lines in participating states, is also moving forward with little opposition at this time. It received unanimous support at the recent Interim Health Care Committee meeting and will become a bill draft request for action during the upcoming 2017 Nevada Legislative Session.

The Legislative Committee would like to thank the many volunteers that have participated in this important work. We are also grateful to our lobbyist, Bryan Gresh, for the many years of thoughtful guidance and dedication to our organization. We would like to encourage any interested NPA members to participate in the Legislative Committee. Together, we can continue to advocate for psychology and psychologists in Nevada.

~ Melanie Crawford, Ph.D., Northern Region Committee Chair
 ~ Lisa Linning, Ph.D., Southern Region Committee Chair

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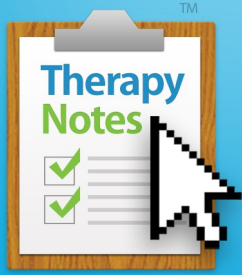
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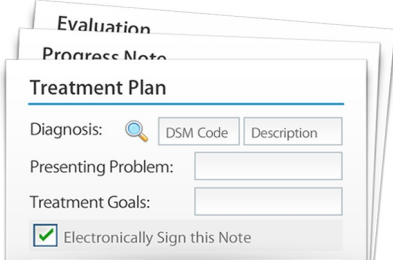
Online Practice Management for Psychologists and Mental Health Professionals



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Dr. Christina Zampitella, FT, Licensed Clinical Psychologist

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Kathleen Bremer, PCC-S

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Sequence IV: Ethics and Risk Management in the Age of the Affordable Care Act: Everything You Didn't Want to Know and Were Afraid to Ask

Friday, December 2nd, 2016 ~ 8:00am—4:15pm ~ 6 Ethics CE Credits

Details and registration link:

<https://www.nvpsychology.org/workshops/sequence-iv-ethics-risk-management-age-affordable-care-act/>

2017 Continuing Education Calendar

Prolonged Exposure for the Treatment of PTSD, Thomas Mullin, Ph.D.

February 24th, 2017 ~ Las Vegas, NV ~ 6 CE Credits

<https://www.nvpsychology.org/workshops/ptsd>

Gottman Level 1 Training in Couples Therapy—Bridging the Couples Chasm, Scott Wolfe, Ph.D.

March 24th, & 25th, 2017 ~ Reno, NV ~ 12 CE Credits

<https://www.nvpsychology.org/workshops/couples-and-addiction>

26th NPA Annual Conference—Psychology, Payment, and Policy: Opportunities for Practice Expansion, Benjamin Miller, Psy.D.

May 12th, 2017 ~ Las Vegas, NV ~ 6 CE Credits

<https://www.nvpsychology.org/workshops/integrated-healthcare>

Doing Business as a Psychologist: The Graduate Course You Never Had

Larry Waldman, Ph.D., ABPP

September 29th, 2017 ~ Las Vegas, NV ~ 6 CE Credits

<https://www.nvpsychology.org/workshops/graduate-course>

Understanding and Coping With Pain, Akiko Okifuji, Ph.D.

November 17th, 2017 ~ Reno, NV ~ 6 CE Credits

<https://www.nvpsychology.org/workshops/chronic-pain>

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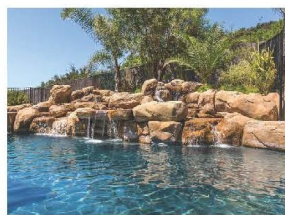
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- Post-Traumatic Stress Disorder (PTSD)
- Veterans / Active Duty Military

Desert Parkway Behavioral Healthcare Hospital is a Joint Commission accredited, 83-bed acute psychiatric facility that offers a wide range of treatment options for adults, children and adolescents ages 5-17, veterans and active duty personnel and their families. We work with patients as individuals, addressing each of his or her unique needs through an interdisciplinary treatment approach which includes collaboration with other community providers. We encourage calls to our Intake Department 24/7 to inquire about admission and insurance verification at (702) 776-3500.

Thank You to our other 2016 CE Sponsors!



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Journey Program for Children age 5-11, helps children make a successful transition from childhood to early adolescence.

For more information on Willow Springs Center programs and services please visit our website at: www.WillowSpringsCenter.com or call us at: **800-448-9454**

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Nestled in the foothills of the Sierra Nevada Mountains, Center for Hope of the Sierras provides an intimate setting ideal for healing and recovery for individuals suffering from anorexia nervosa, bulimia nervosa, binge eating disorder, and related disorders. Center for Hope offers residential (RTC), partial hospitalization (PHP), and intensive outpatient (IOP) treatment to men, women and adolescents, ages 16 and up (ages 14 and up for PHP/IOP program). We are proud to offer one of the country's only specialized residential tracks for the complex treatment of co-occurring diabetes and eating disorders.

Residential treatment takes place in a beautiful country style home set in a quiet neighborhood with large covered porches, lush lawns, beautiful trees, and an outdoor fire circle. Center for Hope's treatment home has 10 beds, comfortable and cozy sitting areas, and an open and spacious floor plan. Supportive staff help create and nurture a welcoming environment where residents can find themselves and recovery from their eating disorders.

Partial hospitalization and intensive outpatient treatment is offered just a few miles away from the residential home in a relaxed environment with multiple individual and group therapy rooms, a large teaching kitchen and family-style dining area, a welcoming art therapy room, and serene indoor and outdoor individual reflection areas.

At Center for Hope of the Sierras, it is our mission to welcome each person who enters our doors with excitement about their willingness to heal and with respect for the courage it takes to enter treatment. We offer compassion, dignity, an individualized approach, and a commitment to each person's unique healing process.



ATTENTION APA MEMBERS.....Your APA Apportionment Ballot will arrive in **early November**. Don't Throw Away Your Voice at the National Level!!!

**THE APA APPORTIONMENT BALLOT—DOES IT MATTER?
!!!! YES IT DOES !!!!**



WHY??? The Council of Representatives is APA's chief governing body and is charged with legislative and oversight responsibilities for the entire Association. Council's function is to develop and implement policies and programs..."to advance psychology as a science and profession and as a means of promoting health, education and human welfare."

While policy development begins with APA's boards and committees, and the Board of Directors, the final decision-making body is the Council. The Council votes on MANY items that impact state associations and the professional practice of psychology. In 2013, SPTAs composed 53% of the organized entities that make up Council, but had only 40% of the representatives and votes. The good news is that SPTAs have gained 5 seats since 2007, but you need to vote to help NPA gain more seats.

NPA Needs Your Votes! The number of votes obtained in the Apportionment Ballot process determines which SPTAs and Divisions get the additional seats past the one per entry. APA Members are given 10 votes to use as they wish—you can allocate all of your ten votes to your state (or split them up amount your SPTA and Divisions) to ensure that NPA, and all state associations, continues to have a voice on the APA Council. Because Divisions can draw from large pools across the country, many end up with multiple representatives on Council, whereas states typically can only muster enough votes for one seat.

Gerald R. Weeks, Ph.D., ABPP has recently published two books. The first is entitled, *A Clinician's Guide to Systemic Sex Therapy* (2016) and is the companion of *Systemic Sex Therapy* (2015). It is a practical book on how to implement a systemic approach to treating all the major sexual dysfunctions. The second book, *Techniques for the Couple Therapist* (2016) is an edited book with over 20 of the best known couple therapists in the U.S. writing about a wide array of techniques that can be used in couple therapy. Dr. Weeks has now published 24 professional texts with two more forthcoming texts. He is also co-author of an in-press article in the J. of Family Psychotherapy called, The Logical and Clinical Argument for the concept of Meta-Schema in Cognitive Therapy. We propose the existence of meta-schema's (not meta-cognition) for the first time in the history of cognitive therapy.

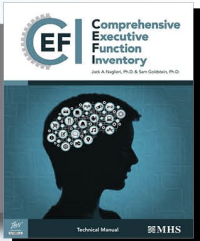
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A Couple's Sex Life is a Window into their Relationship, John C. Friel, Ph.D.

A couple comes in as a last-ditch effort to save their marriage. They have seen a few other therapists in the past 20 years, but nothing ever got better for more than a few weeks after each round of therapy had ended.

During the first hour in most cases, I will say, "The next question I usually ask at this point—and most people are actually pretty good at answering it—is this: On a 10-point scale, 10 being 'fantastic' and 0 being nonexistent, how would you rate your sex life in the beginning of the relationship (or at its best? Or something similar)?"

They smile at each other warmly and both say "10."

Then I say, "To understand a couple's marriage and sex life, a couples therapist needs to be comfortable asking specific questions. So my next question is a little more specific." Looking toward her I ask, "And back then when it was great, did you sometimes have an orgasm?"

She looks straight at me, and then her eyes dart quickly toward her partner and then back at me, as she answers "No." He looks startled.

I then ask, "Have you ever had an orgasm while making love with him?"

"No," she replies. His jaw drops to the floor.

"Have you ever had one?" "Yes," she replies.

"By yourself?" I ask.

"Yes," she says.

"So you know what it feels like?"

"Yes," she answers.

"Do you know what you could have asked of him, or could have told him back then, that he could have done and/or said, that would have helped you have an orgasm?" "Oh, yes," she answers affirmatively.

"Did you ever tell him?"

"No."

"Why not?"

"Because I was afraid that I would hurt his feelings, and I didn't want to do that. And besides, he has always been kind of 'sensitive,' and so I was also afraid that he would blow up and get angry if I tried to tell him." And then she added, "And now, after all of these years, I realize that I should have taken that risk; because it has always been that way between us—me tiptoeing around his feelings and never saying what I want. My mother was that way with my father, too. Today, I can see that it was my responsibility to say something back then, and all along the way; and I guess now I have finally gotten up enough courage to talk about it."

Still stunned, he says, "No one ever asked us about our sex life before."

It is such a commonplace scenario, and it reveals two things. The first is that in almost every case, the structure and form of a couple's sexual conflicts is identical to all of their other conflicts—kids, money, in-laws, being messy or neat, etc. What of couples who don't have sexual conflicts? There is no such thing. All couples have sexual conflicts. Our friend and colleague David Schnarch wrote that "Sexual conflict in marriage is not only inevitable, but it is a good thing, because it makes both people grow up."

But what about the couple who hasn't had sex in five years (which is also very common)? Where is the conflict? They gave up on it, so they don't have any sexual conflicts, right? Wrong. It's there. It's just buried.

A couple says that their problem is that they "just aren't communicating," or they "just aren't connecting much anymore," that they are great at tasks—shuttling the kids to hockey or soccer games, band concerts, sleep-overs at friends' houses, working, paying the bills, sharing household chores—but that "the chemistry" left the marriage several years ago. Then they typically add, "but that happens in all marriages, right?"

And I will reply, "Well, actually, in marriages that are firing on all 6 cylinders, that isn't the case. Would you be interested in taking a closer look at this part of your marriage?"

In 95 out of 100 cases, they say, "Yes."

The second thing this reveals is that therapists who say that they do couples therapy but who are not very comfortable and at ease talking very specifically about sex need to ask themselves a) why that is, b) what they can do to remedy that deficiency, and c) whether or not they are actually willing to remedy it. The number of couples who, at the end of the first session, have declared that "No one has ever asked us about our sex life" might astonish you. Unless, of course, it doesn't.

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Having the Most Difficult Conversation

By Kristin B. Webb, Psy.D. & Alexis T. Franzese, Ph.D., Colleague Assistance Committee Members

You work in a small private practice with two other therapists, one doctoral and the other master's level. Over several weeks you overhear a client of the latter referring to him as "Dr. Smith." You worry that you can't say something without insulting your friend and business partner. Is it even a problem? Is it worth a potentially angry response?

A colleague who successfully manages her bipolar disorder has recently begun to share concerns regarding your work. She believes you have acted unethically on several occasions and describes in detail how your actions may be harming patients. She has extensive documentation of these details. She has mentioned that she would like for you to discuss her concerns with her, at length, and for you to ask forgiveness of your patients. You strongly believe that you have not acted unethically or harmed any of your patients in any way. Additionally, you suspect that her concerns are symptomatic of a manic episode. How can you get her to back off and stop telling you that you're unethical? Can you ask her if she is taking her medications? Can you suggest to her that she needs to return to treatment for her bipolar disorder?

If It's About a Colleague

The APA Ethics Code is vague about how to deal with such ethical conundrums as a case of colleague who is exercising poor judgment or is distressed to the point that it interferes with his or her work, or who may be impaired.

As psychologists, we are enjoined to seek informal resolution. Although we are generally well trained about and accustomed to having difficult conversations with clients, we sometimes avoid having such conversations with colleagues. Our reluctance to approach a colleague might reflect a desire to maintain a professional and/or personal relationship, our own feelings about confronting others, or myriad other concerns.

The NCPA Colleague Assistance Committee offered a workshop on this topic in April 2012. Our presentation, from which this article is taken, is based on a review of research on this topic, on CAC members' experiences, and on comments offered by NCPA members.

If you're concerned about a colleague who appears to be in distress or is struggling with substance use or other potentially problematic behavior, the following guidelines may be helpful in considering whether and how to approach him or her.

- Consider why you are concerned. What are your motivations? Do you want to express concern, lecture, or punish or criticize? If you want to do anything other than express concern, stop.
- Pick the time and place—Make sure you have enough time for a roomy conversation, and enough privacy for both of you to feel comfortable. Don't attempt to engage a person when she or he is in an altered or clearly distressed state unless it's urgent.
- Don't feel the pressure of having to "know" if someone has a problem or not. If you're worried, that's worth a conversation. Start with affirming the connection between the two of you, whatever it is (i.e., "We've been friends for a long time..."), and talk in terms of "I'm concerned about you, not "I think you have a problem." Be prepared with specifics of times that have concerned you.
- Be ready with resources.
- Don't worry about scripting each word—The conversation is likely to be awkward yet may still be helpful

Having the Most Difficult Conversation (*continued from Page 18*)

If you are rebuffed and your colleague's behavior is of great concern, first remember that the person you care about has heard you, regardless of denial or defensiveness. However, if the behavior is dangerous and your colleague is unwilling or unable to address it, take it to the next level, which may mean consulting the CAC, the Ethics Committee, or the North Carolina Psychology Board. Remember, decisions about these situations need to be informed by the APA Ethics Code and relevant state and federal law.

Or Topsy Turvy

The complexities involved in us approaching a colleague with concerns also apply when we think about how to respond to a colleague who approaches with us with concerns about our behavior.

- Express appreciation for the contact (even if you disagree with the facts or the opinion being expressed).
- Recognize that it's most likely coming from a place of concern.

- Limit defensiveness and argumentativeness. Respond inquisitively rather than argumentatively (e.g., "What did you notice that caused discomfort?"; "What caused you to bring this issue to my attention now?") Use your listening skills to get a good understanding of the facts being presented.

Take time before responding, but do not ignore your colleague's approach and do respond to it eventually. Seek consultation. It is crucial to remember that this is a colleague's attempt at managing the issue informally which is ultimately for your benefit and in your best interest.

In Any Case

In conclusion, the APA Ethics Code provides for both autonomy and responsibility. By allowing, and expecting informal resolution, the Ethics Code is respecting the competence and ability of psychology's professionals. Therein lies the responsibility to protect our discipline and profession and to care for our colleagues and those we serve.

The APA Advisory Committee on Colleague Assistance (ACCA) seeks to promote the health and well-being of psychologists by providing resources to help them prevent burnout and to thrive and flourish in their personal and professional lives. It also seeks to help organizations in which psychologists work to promote their well-being. ACCA has a threefold mission:

- 1. To prevent and ameliorate professional distress and impairment and their consequences among psychologists.*
- 2. To foster and provide resources via linkages to state associations to this end.*
- 3. Thereby, to better protect the public.*

ACCA attempts to attain these goals in three ways: By promoting an understanding and acknowledgment of the unique occupational hazards of psychologists' work, supporting the development and maintenance of state level assistance programming, and encouraging appropriate linkages between state ethics committees, regulatory boards and assistance programs.

By working in these areas, ACCA hopes to serve the interests of the public and the professional community. Resources to help psychologists and their professional organizations can be found on the ACCA web page:

(<http://www.apa.org/practice/leadership/colleague-assistance.aspx>).

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