

STATE PSYCHOLOGY BOARD

**Will meet on
Friday, November 18, 2011
at 9:00 a.m.**

**In Conference Center 4 of the
Indiana Professional Licensing Agency
Indiana Government Center-South
402 West Washington Street
Indianapolis, Indiana**

Agenda

- I. CALL TO ORDER AND ESTABLISHMENT OF QUORUM** **9:00 a.m.**
- II. ADOPTION OF THE AGENDA**
- III. ADOPTION OF THE MINUTES FROM THE JANUARY 14, 2011 MEETING OF THE BOARD**
- IV. PROBATIONARY PERSONAL APPEARANCES** **9:00 a.m.**
 - A. Mervin Smucker, Ph.D.**
- V. PERSONAL APPEARANCES**
 - A. Martin Hill Ph.D**
Re: Repeat examination application
 - B. Mark Glafke Ph.D**
Re: Positive Response Application
- VI. ADMINISTRATIVE HEARINGS** **10:00 a.m.**
 - A. In the matter of the license of Nicholas J. Constantine, PhD**
License No.: 20041975A
Administrative Cause No.: 2011 ISPB 0001
Re: Complaint
 - B. In the matter of the license of Shelley Ann Haste, Psy.D**
License No.: 20042321A
Administrative Cause No.: 2011 ISPB 0002
Re: Complaint
 - C. In the matter of Brenda Lycan**
Administrative Cause No.: 2011 ISPB 0003
Re: Order to Show Cause/Unlicensed Practice
 - D. In the matter of the license of Barry Shear, PhD**
License No.: 20040363A
Administrative Cause No.: 2011 ISPB 0004
Re: Petition to Review of Notice of Noncompliance
- VII. APPLICATION REVIEW**
 - A. Heather Lampton**
Re: CE approval

B. **Dennis Olvera, Ph.D.**
Re: CE approval

C. **Ronald Ruff, Ph.D.**
Re: HSPP Application

IX. OLD/NEW BUSINESS

- A. **CONSUMER UPDATE BY THE OAG**
- B. **ASPPB Annual Conference**
- C. **2012 Dates**
- D. **IPA Meeting Update**

X. ADJOURNMENT

Next Scheduled Meeting:

Friday, January 13, 2012
Conference Room W064
Indiana Professional Licensing Agency

Dr. med. **Eckhard Roediger**

Psychotherapeutische Medizin
Neurologe und Psychiater
Dozent und Supervisor für
Verhaltens- und Schematherapie

Members, Indiana State Psychology Board
c/o Tasha Coleman, Director
Indiana Professional Licensing Agency
402 W. Washington Street, Room W072
Indianapolis, IN 46204
USA

Grommetstrasse 20
60433 Frankfurt
T: 069 / 43 00 86 47
F: 069 / 43 00 86 48

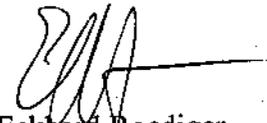
kontakt@eroediger.de
www.eroediger.de

October 28, 2011

Dear Members of the Indiana State Psychology Board:

Dr. Smucker continues to offer training to licensed, practicing professionals at our institute in Frankfurt and in other training institutes in Germany and Switzerland. Since my last report to the Board, I have not received any complaints related to Dr. Smucker's performance, nor have I received any information that would indicate unprofessionalism on his part. On the contrary, Dr. continues to receive extremely positive reviews of his training and is highly regarded by those who receive training from him. I would be pleased to provide any additional information if requested.

Sincerely,



Dr. Eckhard Roediger
Alt-Niederursel 53
60439 Ffm-Niederursel
Germany

cc: Mervin Smucker, Ph.D.
Stacy L. Cook, Esq.





Indiana State Psychology Board

402 West Washington Street, Room W072

Indianapolis, Indiana 46204

Telephone: (317) 234-2051

Fax: (317) 233-4236

Website: www.PLA.IN.gov

Governor Mitchell E. Daniels, Jr.

September 27, 2011

Martin F. Hill
6904 Lohr Way
Indianapolis, IN 46214

Dear Dr. Hill:

The Indiana State Psychology Board ("Board") is in receipt of your request to be issued a Psychologist License with the Health Service Provider designation. Upon further review of your application and our records we find that the license number 20042320A issued to you on March 9, 2009, was issued in error. Please be advised that as per our conversation on Monday, September 19, 2011 that license has been rescinded and the number made Null and Void.

The Board has requested that you submit a new application for licensure as a Psychologist in the State of Indiana to be granted permission to repeat the licensing examination. Due to the error in licensing being that of IPLA, we will waive the application fee of \$100.00 and will allow you to submit the transcripts and supporting documents that are presently on file with this office in lieu of requesting that new transcripts be sent on your behalf from Michigan State University.

Unfortunately, we are unable to waive the examination fee of \$450.00 made payable to Professional Examination Services.

The Board is requesting that you personally appear before them at their next regularly scheduled meeting as required by law, after an applicant has failed the licensing examination three (3) or more times.

The meeting will take place on **Friday, November 18, 2011** in the Indiana Government Center South, Conference Center Room 4, 302 West Washington Street, Indianapolis, Indiana 46204 at **9:30 a.m.** Please also submit a **detailed study plan** at least one (1) week prior to the meeting for review by the Board. Failure to appear may result in the denial of your application.

Please find attached your application for HSPP licensure and check #1681 in the amount of \$100.00 (voided).

If you have any questions, please feel free to contact this office at (317) 234-2051 or by email at pla6@pla.in.gov

Sincerely,

Tasha Coleman

Tasha Coleman
Board Director
State Psychology Board
Indiana Professional Licensing Agency

CERTIFIED MAIL: 91 7190 0005 2720 0011 7608
Return Receipt Required



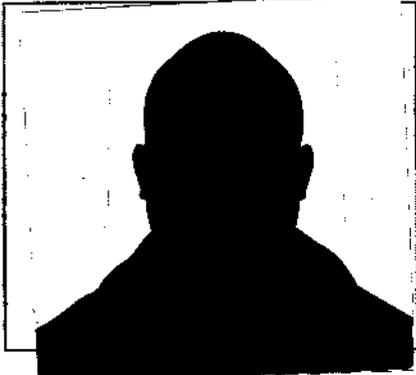
APPLICATION FOR REPEAT EXAMINATION FOR PSYCHOLOGY

State Form 53327 (8-07)

Approved by State Board of Accounts, 2007

INDIANA STATE PSYCHOLOGY BOARD
PROFESSIONAL LICENSING AGENCY
402 West Washington Street, Room W072
Indianapolis, Indiana 46204
Telephone: (317) 234-2051
E-mail: pla6@pla.IN.gov

* Your Social Security number is requested by this agency in accordance with IC 4-1-8-1, and it is mandatory that it be given.



FOR OFFICE USE ONLY

APPLICATION FEE	5000
DATE FEE PAID (month, day, year)	10-5-08
RECEIPT NUMBER	1845989

20042320
3-9-09

DO NOT WRITE ABOVE THIS LINE

Please check one: Law Examination for Professional Practice in Psychology (EPPP)

EPPP is given by computer. Information regarding testing will be sent after passing of the jurisprudence examination.

APPLICANT INFORMATION

Name of applicant (last, first, middle, maiden)		Hill Martin Fitzgerald	
Address (number and street or rural route)			
6904 Lohr Way			
City	State	Indianapolis IN	
Telephone number (daytime)	E-mail address	(317) 487-9938 hillmf@cmi	
Name of school	Number of times previously taken		
	4		

If your answer is "Yes" to any of the following, explain fully in a sworn affidavit, including all related details. Describe the event including the location, date and disposition. If malpractice, provide name of plaintiff. Falsification of any of the following is grounds for permanent revocation of the license or permit issued pursuant to this application.

- Has disciplinary action ever been taken regarding any health license, certificate, registration or permit that you hold or have held? Yes No
- Have you ever been denied licensure, registration, certification, or permit to practice psychology or any regulated health occupation in any state (including Indiana) or country? (Note: if only denial is because you failed this licensing exam, do not mark "Yes") Yes No
- Are you now being or have you ever been treated for drug or alcohol abuse? Yes No
- Have you ever been convicted of, pled guilty or nolo contendere to:
 - A violation of any Federal, State or local law relating to the use, manufacturing, distribution or dispensing of controlled substances or drug addiction? Yes No
 - To any offense, misdemeanor or felony in any state? (Except for minor violations of traffic laws resulting in fines) Yes No
- Have you ever been admonished, censored, reprimanded or requested to withdraw, resign or retire from any hospital or health care facility in which you have trained, held staff membership or privileges or acted as a consultant? Yes No

If this information has been submitted with your original application and has not changed please check here:

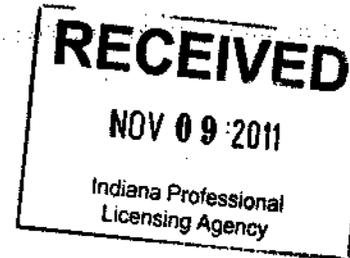
You only need to submit additional information if circumstances have changed since you last submitted an explanation regarding these questions.

APPLICATION AFFIRMATION

I hereby swear or affirm under the penalties of perjury that the statements made in this application are true, complete and correct.

Signature of applicant	Date (month, day, year)
	10-14-08

Date: November 8, 2011
TO: Tasha Coleman, Board Chair Psychology Licensing Board
FROM: Martin F. Hill
SUBJECT: Study Plan for EPPP



Dear Dr. Coleman,

This memo is to inform the board of my plan to study and prepare for the EPPP licensing exam. The plan I will put together will be as follows:

- Purchase new study materials
- Purchase option where there is supervision and personal assistance during study process
- Register for practice exams and quizzes
- Once appropriate pass rate is achieved, register for exam
- Work closely with supervision during study process (online and face to face) to insure mastery
- Take and pass EPPP exam
- Allow 3-6 months for preparation

I hope these plans sound organized and well thought out regarding preparation for the EPPP exam.



Indiana State Psychology Board

402 West Washington Street, Room W072

Indianapolis, Indiana 46204

Telephone: (317) 234-2051

Fax: (317) 233-4236

Website: www.PLA.IN.gov

Governor Mitchell E. Daniels, Jr.

September 21, 2011

Mark Glafke
1204 S. 26th Street
Lafayette, IN 47905

Dear Dr. Glafke:

The Indiana State Psychology Board has reviewed your application for licensure as a Psychologist in Indiana. The Board requests that you appear before them at their next regularly scheduled meeting to answer questions they have regarding your application.

This meeting will be held in **Conference Center 4**, of the Indiana Government Center South, 302 W. Washington Street, Indianapolis, Indiana, 46204 on **November 18, 2011 at 9:30 am.**

If you have any questions, please feel free to contact this office at (317) 234-2051 or by email at pla6@pla.in.gov

Sincerely,

Andre Phillips

Andre Phillips
Assistant Board Director
Indiana State Psychology Board
Indiana Professional Licensing Agency



APPLICATION FOR LICENSURE TO PRACTICE PSYCHOLOGY IN INDIANA

State Form 27522 (R11 / 1-10)
Approved by State Board of Accounts, 2010

RECEIVED
JUL 15 2011
Indiana Professional Licensing Agency

STATE PSYCHOLOGY BOARD
PROFESSIONAL LICENSING AGENCY
402 West Washington Street, Room W072
Indianapolis, Indiana 46204
Telephone: (317) 234-2051
E-mail: pla6@pla.IN.gov

* This agency is requesting disclosure of your Social Security number in accordance with IC 4-1-8-1; disclosure is mandatory, and this record cannot be processed without it.

FOR AGENCY USE ONLY		
Date received (month, day, year)	Decision	Initials

PSYCHOLOGY LICENSE	TEMPORARY PERMIT
Application fee 100.00	Application fee 50.00
Date fee paid (month, day, year) 7/23/2011	Date fee paid (month, day, year) 7/29/2011
Receipt number 3529520	Receipt number 3529520
License number	Permit number
License issuance date (month, day, year)	Permit issuance date (month, day, year)



DO NOT WRITE ABOVE THIS LINE

APPLICANT INFORMATION		
Name (last, first, middle, maiden) GLAFKE, MARK STEPHEN		
Home address (number and street or rural route) 1204 S. 26TH STREET		ZIP code 47905
Telephone number (daytime) (765) 404-3555	Date of birth (month, day, year) 9/18/1972	ORNIA
Are you applying for licensure by: <input checked="" type="checkbox"/> Examination <input type="checkbox"/> Endorsement		
Do you desire a temporary license? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

GRADUATE EDUCATION (Doctoral)		
Name of school PURDUE UNIVERSITY	Department PSYCHOLOGY	Title of program CLINICAL PSYCHOLOGY
Street address (number and street, city, state, and ZIP code) 703 THIRD STREET, W. LAFAYETTE, IN 47907	Dates attended (month, day, year) 8/24/00 - 12/18/2010	Degree earned PH.D.
Number of hours required for degree (excluding dissertation hours) 60 CREDIT HOURS	APA approved at the time of graduation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Which were the hours? <input checked="" type="checkbox"/> Semester <input type="checkbox"/> Quarter		

PREDOCTORAL INTERNSHIP	
Was an Internship required for graduation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Name of internship program SOUTHERN ARIZONA VETERANS HEALTHCARE SYSTEM	
Address of internship program (number and street, city, state and ZIP code)	
APA approved at the time of completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	APPIC approved at the time of completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Inclusive dates of internship (month, day, year) 08/20/2007 - 08/19/2008	Total hours worked
Director of internship training JAMES COMER, Ph.D.	

POST DOCTORAL EDUCATION

Name of school	Department	Title of program
Address (number and street, city, state, and ZIP code)		Dates attended (month, day, year)

POST DOCTORAL INTERNSHIP / FELLOWSHIP

Name of Internship/Fellowship	
Address of Internship/Fellowship (number and street, city, state and ZIP code)	
Inclusive dates of Internship/Fellowship (month, day, year)	Total hours worked
Name of Supervising Psychologist	

PROFESSIONAL IDENTITY BASED UPON DOCTORAL TRAINING

(Check only one or attach explanation)

- | | |
|---|--|
| <input checked="" type="checkbox"/> Clinical Psychology | <input type="checkbox"/> Organizational / Industrial |
| <input type="checkbox"/> Counseling Psychology | <input type="checkbox"/> School |
| <input type="checkbox"/> Experimental | <input type="checkbox"/> Social |
| <input type="checkbox"/> Developmental | <input type="checkbox"/> Other (specify) |

CLAIMED AREAS OF COMPETENCE

ANXIETY, DEPRESSION, TRAUMA, PERSONALITY DISORDERS (ASSESSMENT & TREATMENT) WITHIN ADOLESCENT AND ADULT POPULATIONS. IQ AND PERSONALITY ASSESSMENT.

Do you hold, or have you ever held, a license, certificate, registration or permit to practice any regulated health occupation?

Yes No

List all states, including Indiana, in which you have been licensed to practice any regulated health occupation. Verification of all listed licenses must be submitted directly from the state licensing board.

TYPE OF LICENSE, CERTIFICATE, REGISTRATION OR PERMIT	STATE	NUMBER	DATE ISSUED	CURRENT STATUS

Have you previously taken the Examination for the Professional Practice of Psychology (EPPP)?

Yes No

If "Yes", how many times?

Date of most recent test (month, year)

Where taken (state, country)

Have you previously filed an application for licensure as a psychologist in the State of Indiana?

Yes No

If "Yes", when was the application filed (month, day, year)?

Do you currently hold, or have you ever held, a Basic Certificate or Limited License to practice psychology in Indiana?

Yes No

If "Yes", state the Certificate / License number

Describe the nature of the practice of psychology in which you intend to engage:

CONSULTING THERAPIST FOR PURDUE UNIVERSITY'S STUDENT HEALTH CENTER. PRIVATE PRACTICE (ASSESSMENT & TREATMENT) OF ADULTS, COUPLES, AND ADOLESCENTS.

COURSEWORK INFORMATION

List the course number and course title of the graduate coursework you have completed in the required content areas as they appear on your transcript. If the course titles as stated on your transcript do not clearly reflect the required content areas, you may be requested to provide additional supporting documentation such as course syllabus, term papers, etc. You may use the same course for more than one content area. Also, each content area may contain more than one course.

NAME OF EDUCATIONAL INSTITUTION	COURSE NUMBER	COURSE TITLE	CREDIT HOURS	Semester <input checked="" type="checkbox"/>	Quarter <input type="checkbox"/>
PURDUE UNIVERSITY	59100	BIOLOGICAL BASES OF BEHAVIOR	3.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PURDUE UNIVERSITY	62800	PERCEPTUAL PROCESSES	3.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PURDUE UNIVERSITY	67300	BEHAVIOR DISORDERS	3.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PURDUE UNIVERSITY	69100	ADV. FORENSIC PSYCHOLOGY	3.0	<input type="checkbox"/>	<input type="checkbox"/>
PURDUE UNIVERSITY	67100	PERSONALITY ASSESSMENT	3.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>

If your answer is "Yes" to any of the following, explain fully in a notarized affidavit, including all related details. Describe the event including location, date, and disposition. If malpractice, provide name of plaintiff. Falsification of any of the following is grounds for permanent revocation of a certificate or permit issued pursuant to this application.

1. Has disciplinary action ever been taken regarding any health license, certificate, registration or permit that you hold or have held?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. Have you ever been denied a license, certificate, registration or permit to practice psychology, or any regulated health occupation in any state or country (including Indiana)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3. Are you now, or have you ever been treated for drug or alcohol abuse?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Have you ever been charged with a crime related to drug or alcohol use?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. Have you ever been convicted of, pled guilty or <i>nolo contendere</i> to: A. A violation of any Federal, State or local law relating to the use, manufacturing, distribution or dispensing of controlled substances or drug addiction? B. Any offense, misdemeanor or felony in any state? (Except for minor violations of traffic laws resulting in fines.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6. Have you ever been denied staff membership or privileges in any hospital or health care facility or had such membership or privileges revoked, suspended or subjected to any restrictions, probation or other type of discipline or limitations?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
7. Have you ever been admonished, censured, reprimanded or requested to withdraw, resign or retire from any hospital or health care facility in which you have trained, held staff membership or privileges or acted as a consultant?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. Have you ever had a malpractice judgment against you or settled any malpractice action?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

APPLICATION AFFIRMATION

I hereby swear or affirm under the penalties of perjury that the statements made in this application are true, complete and correct.

Name of applicant (Please print or type - first, middle initial, last)	
MARK STEPHEN CLAFFE, Ph.D.	
Signature of applicant	Date (month, day, year)
<i>Mark Stephen Claffe, Ph.D.</i>	7/14/2011

AUTHORIZATION FOR RELEASE OF INFORMATION

I hereby authorize, request, and direct any person, firm, officer, corporation, association, organization, or institution to release to the Professional Licensing Agency, or the State Psychology Board, any files, documents, records or other information pertaining to the undersigned requested by the Agency, or the Board, or any of their authorized representatives, in connection with processing my application for licensure.

I hereby release the aforementioned persons, firms, corporations, associations, organizations, persons and institutions from any liability with regard to such inspection or furnishing of any such information.

I further authorize the Professional Licensing Agency, or the State Psychology Board, to disclose to the aforementioned organizations, persons and institutions any information which is material to my application, and I hereby specifically release the Agency, and the Board, from any and all liability in connection with such disclosures.

A photostatic copy of this authorization has the same force and effect as the original.

AFFIRMATION

I hereby swear and affirm that I have read the above statements and agree to same.

Signature of applicant	Date (month, day, year)
<i>Mark Stephen Claffe, Ph.D.</i>	7/14/2011

GENERAL AFFIDAVIT

STATE OF INDIANA

COUNTY OF TIPPECANOE



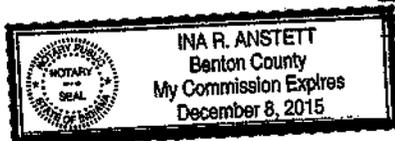
PERSONALLY came and appeared before me, the undersigned notary, the within named MARK STEPHEN GLAFKE, who is a resident of Tippecanoe County, State of Indiana, and makes his statement and General Affidavit upon oath and affirmation of belief and personal knowledge that the following matters, facts and things are set forth to the best of his knowledge:

I, Mark Stephen Glafke, acknowledge that on October 17, 2010, I was charged with operating a vehicle in the state of Indiana with a B.A.C. of 0.08 or greater. This incident occurred in the City of Lafayette, Indiana. On December 15, 2010, I pled guilty to a Class C Misdemeanor for this infraction before Judge Morrissey in Tippecanoe County Court. This incident was a first and only offense on my behalf. I have been in compliance with all requirements set forth by the court and have had no further incidents since this incident. This affidavit references my answers to both questions #4 and #5 on the Application for Licensure to Practice Psychology in Indiana. My answers refer to the single event described herein.

DATED this the 14th day of July, 2011


Signature of Affiant

SWORN to subscribed before me, this 14th day of July, 2011




NOTARY PUBLIC INA R ANSTETT

TIPPECANOE COUNTY PROBATION DEPARTMENT
2ND FLOOR COURTHOUSE
301 MAIN STREET
LAFAYETTE, IN 47901

Mark Stephen Glafke
1204 S 26TH ST
Lafayette, IN 47905

Tuesday, July 26, 2011

Re: CAUSE NUMBER: 79D06-1011-CM-01756

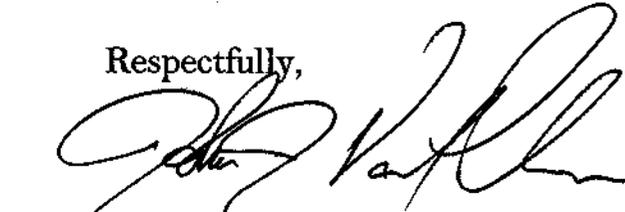
DEAR Mark:

You were sentenced on December 15, 2010, for Operating While Intoxicated. You were ordered to complete an Alcohol Education Class, 40 hours of Community Service, and watch the Victim Impact Panel video.

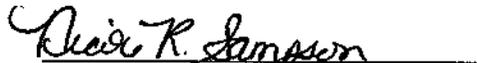
You have completed all the terms of your probation, including payment of fees. As of this date, you have been fully compliant with probation.

Your last day of probation is scheduled for December 14, 2011.

Respectfully,



Joshua J. Vander Plaats
Probation Officer
Tippecanoe County, IN
jvanderplaats@tippecanoe.in.gov



Notary, Nicole Sampson

RECEIVED
JUL 29 2011
Indiana Professional
Licensing Agency



NICOLE R. SAMPSON
Resident of Tippecanoe County, IN
My Commission Expires
September 10, 2017

STATE OF INDIANA)
) SS:
 COUNTY OF TIPPECANOE) IN THE SUPERIOR COURT NO. 6
 TO THE 2010 TERM

FILE
 1204 S 26TH ST
 LAFAYETTE, IN 47905



STATE OF INDIANA vs. MARK STEPHEN GLAFKE
 CASE NUMBER: 79D06-1011-CM-01756

Comes now the State of Indiana by Emily Orsinger, Deputy Prosecuting Attorney, and comes also Defendant in person and by counsel, Michael B. Troemel. Defendant enters plea of guilty to Count I-Operating With a Blood Alcohol Concentration of at Least .08 Grams of Alcohol But Less Than .15 Grams of Alcohol as a Class C Misdemeanor. The Court finds a factual basis for plea and enters judgment of conviction on the charge of **Count I-Operating With a Blood Alcohol Concentration of at Least .08 Grams of Alcohol But Less Than .15 Grams of Alcohol as a Class C Misdemeanor.** Written plea agreement filed. Written advise of rights filed.

The Court accepts plea agreement and imposes a fine of \$500.00 and sentences defendant to 60 days in custody of the Tippecanoe County Sheriff. The Court suspends all of the fine and all of the sentence of imprisonment and places Defendant on unsupervised probation for 364 days upon the terms and conditions THAT THE DEFENDANT:

- A. Maintain good and lawful behavior;
- B. Not use, consume, or possess alcohol or illegal drugs unless prescribed by a practicing physician. Defendant further shall not consume any products that contain alcohol;
- C. Not enter any bars, taverns, or liquor stores during period of probation;

- D. You shall not possess a firearm or other dangerous weapons. Any firearms are to be removed from your possession. If convicted of a felony you must, within three (3) business days, surrender your firearm license to the local State Police Post;
- E. Attend and satisfactorily complete Court Services alcohol education program. Defendant is to contact agency (117 N. 4th Street, 423-1172) within seven (7) days for orientation and satisfactorily complete evaluation and all recommended counseling before June 30, 2011. If placed in the CAT program, violations resulting in termination shall result in immediate issuance of an arrest warrant;
- F. Complete 40 hours Community Service to be supervised by Court Services. Defendant is to contact agency (117 N. 4th Street, Lafayette, Indiana, 423-1172) within seven (7) days and complete service before June 30, 2011;
- G. Attend Victim Impact Panel before June 30, 2011. Defendant to contact Court Secretary in Superior Court No. 6 this date to enroll;
- H. Waive 4th Amendment right against search and seizure and submit to, pass, and pay for random drug and alcohol screens as requested by Probation Department or Community Corrections, with reasonable suspicion, including but not limited to person and/or property;
- I. Notify the Court of any change in address;
- J. Pay Court costs in the sum of \$364.50 to the Tippecanoe County Clerk before June 30, 2011;
- K. Pay Probation Compliance Fee in the sum of \$100.00 to the Tippecanoe County Clerk on or before June 30, 2011,
- L. **SHOW COMPLETION OF ALL TERMS** to the Tippecanoe County Probation Department on or before June 30, 2011;
- M. If a condition of probation is violated during the probationary period a petition to revoke probation may be filed before the earlier of one year after the termination of probation or 45 days after the State receives notice of the violation.

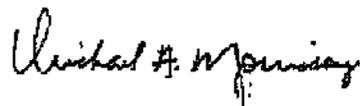
The Court recommends to the Bureau of Motor Vehicles that the defendant's driving privileges be suspended for a period of 30 days followed by restricted



license for a period of 180 days. The Court finds Defendant is entitled to credit for administrative suspension.

Pursuant to plea agreement, all remaining counts herein, if any, are dismissed.
So ORDERED this 15th day of December, 2010.

Copies to: Defendant, State, Probation, Court Services, Counsel



**MICHAEL A. MORRISSEY, Judge
Tippecanoe Superior Court No. 6**



PLEA AGREEMENT

FILED

DEC 15 2011

Defendant: MARK GLAFKE Attorney _____ Date 11/11/10

79D06-1011-CM- 79D06- 79D06-

Defendant pleads guilty to: CT I OPERATING WHILE INTOX. (BAC .08 - .14) M/C

State agrees to dismiss: Any remaining counts

Fine \$ 500 plus Court Costs \$500 fine is suspended upon compliance with all terms.

Jail 60 days months year(s), of which 0 days months year(s) shall be executed (with good time credit) at:

- Tippecanoe County Community Corrections ("TCCC") at a level to be determined by them, or
- Tippecanoe County Jail ("TCJ") or Indiana Department of Corrections ("DOC")

If defendant is not accepted into TCCC, or violates TCCC rules and is removed, Defendant shall serve the TCCC time in the TCJ or DOC.

60 days months year(s) shall be suspended, upon compliance with terms of probation

364 days months year(s) supervised probation OR unsupervised probation

Defendant understands that if illegally present in the United States s/he is not eligible for community corrections or placement on probation. Defendant understands that s/he has a right to contact his/her consulate before pleading guilty, and that pleading guilty to a crime may affect his/her immigration status or result in deportation from the United States of America.

TERMS OF PROBATION:

All standard terms and conditions, including good and lawful behavior.

Attend, satisfactorily complete and pay all fees for:

- Court Services drug/alcohol evaluation/counseling Victim Impact Panel (Call 423-9750 to arrange)
- Court Services 90 day CAT Program Live Victim Impact Panel (Call 423-9750 to arrange)
- Defensive Driving School (Contact BMV to arrange)

Contact Court Services at 117 N. 4th Street, Lafayette, IN at 423-1172 within three (3) days of filing this agreement

Do NOT use or consume alcohol or alcoholic beverages OR illegally use or possess controlled substances

DO NOT enter any bar, tavern, or liquor store

Do 5 actual days in jail OR 180 hours of community service (Call 423-1172 to arrange community service)

Do 10 actual days in jail OR 360 hours of community service (Call 423-1172 to arrange community service)

Serve 40 hours of community service (Call 423-1172 to arrange, and file proof of completion with the Court) 2 days in the TCJ (with good time credit) for each 5 hours of community service not completed

Restitution to: _____

Pay Alcohol/Drug Countermeasures Fee in the amount of \$200.00 to the Tippecanoe County Clerk's Office

If a blood draw warrant issued in this case, Defendant shall reimburse the hospital for the cost of blood draw

License: 30 days suspended; 180 days restricted with _____ days years ignition interlock

Contact S&C Ignition Interlock at 2632 N. 9th Street, Suite D (Call 420-9971 or see <http://www.smartstartinc.com/>)

License: Lifetime suspension.

Waive 4th Amendment Rights to search and seizure: submit to and pay for random alcohol/drug screen(s) as requested by any service provider, the Probation Department or any Law Enforcement Officer

Defendant has read, understands, and agrees with the Court-issued Advice and Waiver of Rights

Reimburse Tippecanoe County for the service of the Public Defender as ordered by the Court

Notify all service providers and the Court within 48 hours of any change of address

Complete all terms and conditions of probation within first six (6) months of probation.

Consecutive to: _____

Other: _____



FINES, COURT COSTS, RESTITUTION MONIES TO BE PAID BY CERTIFIED CHECK, CASH, CASHIER'S CHECK OR MONEY ORDER TO: CLERK'S OFFICE. SEE [HTTP://WWW.TIPPECANOE.IN.GOV/CLERK/](http://WWW.TIPPECANOE.IN.GOV/CLERK/) OR GO TO 2ND FLOOR OF THE COURTHOUSE OR PAY BY MAIL TO: CLERK'S OFFICE - PO BOX 1665, LAFAYETTE, IN 47902. NO PERSONAL CHECKS.

The State may revoke the offer of this agreement prior to its execution for any reason, and for any violation of its terms thereafter. If a condition of probation is violated during the probationary period, a petition to revoke probation may be filed before the earlier of one year after the termination of probation or 45 days after the State of Indiana receives notice of the violation

[Signature]
Deputy Prosecuting Attorney, #28314-64

[Signature]
Defendant
[Signature]
Attorney for Defendant

CRTR5924

79D06-1011-CM-01756

STATE OF INDIANA vs. GLAFKE, MARK STEPHEN

Page: 2

02/03/11

Due to inclement weather, the Court now reassigns this cause for Initial hearing on Petition to Revoke for Tuesday, February 15, 2011 at 10:30 a.m. and Orders the defendant to appear in Magistrate Court, 1st floor Courthouse. If the defendant fails to appear, a warrant will issue for the defendant's arrest.

Copy to: Defendant, Probation and State.

(Tss)

Entered: February 3, 2011

01/14/11

DEFENDANT COMPLETED VIP ON JANUARY 4, 2011.

01/12/11

Comes now Probation and files Petition to Revoke Probation. The Court sets this matter for the following:

Initial Hearing:

FEBRUARY 1, 2011 at 10:30 a.m.

Defendant is ORDERED to appear in person on date listed above. If Defendant fails to appear in Superior Court No. 6, a warrant will issue.

So ORDERED this 12th day January, 2011.

Copies: Defendant, State, Probation, Counsel



01/12/11

Initial Hearing Scheduled

Event: INITIAL HEARING - PTR

Date: 02/01/2011 Time: 10:30 am

Judge: MORRISSEY, JUDGE MICHAEL A Location: SUPERIOR COURT NO.6

01/07/11

COMMUNITY SERVICE FEE 1/5/2011 Receipt: 950006 Date: 05/31/2011

01/07/11

A/D OFFENSE 1/5/2011 Receipt: 926610 Date: 01/28/2011 Receipt: 931929 Date: 02/25/2011 Receipt: 938561 Date: 03/31/2011 Receipt: 944481 Date: 04/29/2011 Receipt: 950006 Date: 05/31/2011

12/17/10

BMV FORM SR16 PREPARED

CERT IND ABSTRACT OF COURT RECORD

Sent on: 12/17/2010 08:13:47

12/17/10

UNSUPERVISED PROBATION FEE Receipt: 954764 Date: 06/23/2011

12/17/10

COUNTERMEASURES FEE Receipt: 954764 Date: 06/23/2011

12/17/10

HIGHWAY WORK ZONE FEE Receipt: 954764 Date: 06/23/2011

12/17/10

CRIMINAL COURT COSTS Receipt: 950006 Date: 05/31/2011 Receipt: 954764 Date: 06/23/2011

12/17/10

SR17/SR16 SENT TO BMV FOR OWI

CRTR5924

7SD06-1011-CM-01756

STATE OF INDIANA vs. GLAFKE, MARK STEPHEN

Page: 3

12/16/10

Comes now the State of Indiana by Emily Orsinger, Deputy Prosecuting Attorney, and comes also Defendant in person and by counsel, Michael B. Troemel. Defendant enters plea of guilty to Count I-Operating With a Blood Alcohol Concentration of at Least .08 Grams of Alcohol But Less Than .15 Grams of Alcohol as a Class C Misdemeanor. The Court finds a factual basis for plea and enters judgment of conviction on the charge of Count I-Operating With a Blood Alcohol Concentration of at Least .08 Grams of Alcohol But Less Than .15 Grams of Alcohol as a Class C Misdemeanor. Written plea agreement filed. Written advise of rights filed.

The Court accepts plea agreement and imposes a fine of \$500.00 and sentences defendant to 60 days in custody of the Tippecanoe County Sheriff. The Court suspends all of the fine and all of the sentence of imprisonment and places Defendant on unsupervised probation for 364 days upon the terms and conditions THAT THE DEFENDANT:

- A. Maintain good and lawful behavior;
- B. Not use, consume, or possess alcohol or illegal drugs unless prescribed by a practicing physician. Defendant further shall not consume any products that contain alcohol;
- C. Not enter any bars, taverns, or liquor stores during period of probation;
- D. You shall not possess a firearm or other dangerous weapons. Any firearms are to be removed from your possession. If convicted of a felony you must, within three (3) business days, surrender your firearm license to the local State Police Post;
- E. Attend and satisfactorily complete Court Services alcohol education program. Defendant is to contact agency (117 N. 4th Street, 423-1172) within seven (7) days for orientation and satisfactorily complete evaluation and all recommended counseling before June 30, 2011. If placed in the CAT program, violations resulting in termination shall result in immediate issuance of an arrest warrant;
- F. Complete 40 hours Community Service to be supervised by Court Services. Defendant is to contact agency (117 N. 4th Street, Lafayette, Indiana, 423-1172) within seven (7) days and complete service before June 30, 2011;
- G. Attend Victim Impact Panel before June 30, 2011. Defendant to contact Court Secretary in Superior Court No. 6 this date to enroll;
- H. Waive 4th Amendment right against search and seizure and submit to, pass, and pay for random drug and alcohol screens as requested by Probation Department or Community Corrections, with reasonable suspicion, including but not limited to person and/or property;
- I. Notify the Court of any change in address;
- J. Pay Court costs in the sum of \$364.50 to the Tippecanoe County Clerk before June 30, 2011;
- K. Pay Probation Compliance Fee in the sum of \$100.00 to the Tippecanoe County Clerk on or before June 30, 2011;
- L. SHOW COMPLETION OF ALL TERMS to the Tippecanoe County Probation Department on or before June 30, 2011;
- M. If a condition of probation is violated during the probationary period a petition to revoke probation may be filed before the earlier of one year after the termination of probation or 45 days after the State receives notice of the violation.

The Court recommends to the Bureau of Motor Vehicles that the defendant's driving privileges be suspended for a period of 30 days followed by restricted license for a period of 180 days. The Court finds Defendant is entitled to credit for administrative suspension.

Pursuant to plea agreement, all remaining counts herein, if any, are dismissed.

So ORDERED this 15th day of December, 2010.

Copies to: Defendant, State, Probation, Court Services, Counsel

11/22/10

Comes now Michael B. Troemel and enters his Appearance as counsel for the Defendant in the above cause of action. On Defendant's motion, the above cause is assigned for Guilty Plea Hearing on December 15, 2010 at 8:30 a.m. The Defendant is ordered to appear in Superior Court No. 6 for said hearing. If the Defendant fails to appear, a warrant shall issue.

So ORDERED this 22nd day of November, 2010.

Copies to: Defendant, State, Counsel

11/22/10

GUILTY PLEA

Event: Guilty Plea Hearing

Date: 12/15/2010 Time: 8:30 am

Judge: MORRISSEY, JUDGE MICHAEL A Location: SUPERIOR COURT NO. 6

11/22/10

Michael B. Troemel files APPEARANCE. (file marked 11-22-2010)

11/16/10

COURT FINDS PROBABLE CAUSE. CLERK DIRECTED TO FORWARD SAID DETERMINATION TO BUREAU OF MOTOR VEHICLES FOR SUSPENSION OF LICENSE.

PROBABLE CAUSE DETERMINATION SENT TO BUREAU OF MOTOR VEHICLES.



CRTR5924

SUPERIOR COURT NO. 6 of TIPPECANOE COUNTY
Chronological Case Summary

Date: 09/08/2011 09:47:22

Page: 1

Case Number: 79D06-1011-CM-01756

File Status: Decided

Judge: MICHAEL A MORRISSEY

Title of Proceedings: Operating With a BAC at least 0.08 or more

STATE OF INDIANA vs. GLAFKE, MARK STEPHEN

Bench Trial

Parties

Attorneys

GLAFKE, MARK STEPHEN
1204 S 26TH ST
LAFAYETTE, IN 47905

DEFENDT

MICHAEL BRYAN TROEMEL
P O BOX 1496
LAFAYETTE, IN 47902
Atty. No: 0001931
(765)423-2696

SCHAEFER, SEAN

CPLNT

No Lawyer



Comments:

Judicial Events

08/16/11

The Court directs the Clerk of Tippecanoe County to notify the Bureau of Motor Vehicles to terminate the fail to pay suspension previously filed herein.
So ORDERED this 16th day of August, 2011.
Copies to: Clerk of Tippecanoe County/BMV

06/28/11

COURT SERVICES FILES COMPLETION REPORT.

02/22/11

Comes now Probation, by Joshua J. Vander Plaats, and motions the Court to dismiss the Petition to Revoke Probation previously filed herein. Motion granted. The Court shows the Petition to Revoke Probation dismissed. Defendant is to continue to maintain good and lawful behavior.
So ORDERED this 22nd day of February, 2011.
Copies: Defendant, Counsel, State, Probation

02/22/11

Comes now Probation, by Joshua J. Vander Plaats, and motions the Court to dismiss the Petition to Revoke Probation previously filed herein. Motion granted. The Court shows the Petition to Revoke Probation dismissed. Defendant is to continue to maintain good and lawful behavior.
So ORDERED this 22nd day of February, 2011.
Copies: Defendant, Counsel, State, Probation

02/16/11

Comes now Defendant in person, pro se. Court conducts initial hearing and advises defendant of his rights and penalties. Defendant informs the Court that they will be representing themselves. The Court sets this cause for the following dates and events:
Evidentiary Hearing: March 21, 2011 at 2:30 PM
If Defendant fails to appear in Superior Court No. 6 on said dates and events, a warrant shall issue.
So ORDERED this 15th day of February, 2011.
Copies to: Defendant, State, Probation

02/03/11

Initial Hearing Scheduled

Event: INITIAL HEARING - PTR

Date: 02/15/2011 Time: 10:30 am

Judge: MORRISSEY, JUDGE MICHAEL A Location: SUPERIOR COURT NO. 6

19459

CHRISTA COFFEY
Tippecanoe County Clerk of Courts
Courthouse/ 301 Main Street
P.O. Box 1665
Lafayette, Indiana 47902-1665
(765) 423-9326 main number
(765) 423-9345 records
www.tippecanoe.in.gov

9-9-11

FAX

TO LAURIE RUBLE
IPLA

FAX 317 233 4236

PH 317 234 2051

79D06 1011 CM 1756
STATE OF INDIANA VS MARK GLAFKE

***CERTIFIED CASE SUMMARY, CHARGING INFORMATION,
SENTENCING ORDER & PLEA AGREEMENT.***

(10 pages; includes the cover sheet)
If you do not receive all pages, please contact me at the number above.

THANK YOU !
TERESA

CHRISTA COFFEY
Tippecanoe County Clerk

STATE OF INDIANA)
COUNTY OF TIPPECANOE)

IN TIPPECANOE SUPERIOR COURT 6
CAUSE NUMBER 79D06 1011 -CM- 01756

STATE OF INDIANA
v.
MARK STEPHEN GLAFKE
1204 SOUTH 26TH STREET
LAFAYETTE, INDIANA 47905
DOB: 09/18/1972
OLN: 0390-30-2653

INFORMATION FOR: **Operating While Intoxicated**
C Misdemeanor
COUNT 1

Affiant swears under the penalty of perjury as specified in I.C. 35-44-2-1 that on **OCTOBER 17, 2010** in Tippecanoe County, Indiana, **MARK STEPHEN GLAFKE** did:

- (OPERATING WHILE INTOXICATED 9-30-5 et seq.)** operate a vehicle;
 - with an alcohol concentration equivalent to at least eight-hundredths (.08) gram of alcohol but less than fifteen-hundredths (.15) gram of alcohol per 100 milliliters of blood or 210 liters of the person's breath. (9-30-5-1(a)) (C Misd.)
 - with an alcohol concentration equivalent to at least fifteen-hundredths (.15) gram of alcohol per 100 milliliters of blood or 210 liters of the person's breath. (9-30-5-1(b)) (A Misd.)
 - with a controlled substance listed in Schedule I or II of I.C. 35-48-2 or its metabolite in the person's body. (9-30-5-1(c)) (C Misd.)
 - while intoxicated. (9-30-5-2(a)) (C Misd.)
 - while intoxicated and in a manner that endangers a person. (9-30-5-2(b)) (A Misd.)
 - AND while having a previous conviction under 9-30-5 within the last five (5) years, to-wit: (9-30-5-3) (D Felony)
 - while intoxicated, while being at least (21) years of age, and while having a passenger less than (18) years of age. (9-30-5-3(2)) (D Felony)
 - and caused serious bodily injury to another person while operating the motor vehicle:
 - while intoxicated. (9-30-5-4) (D Felony) OR
 - with an alcohol concentration equivalent to at least eight-hundredths (.08) gram of alcohol per 100 milliliters of blood or 210 liters of the person's breath. (9-30-5-4) (D Felony) OR
 - with a controlled substance listed in Schedule I or II of I.C. 35-48-2 or its metabolite in the person's body. (9-30-5-4) (D Felony)

013
FILED
SUPERIOR COURT NO. 6
NOV 15 A 11:11

All of which is contrary to the form of the statute in such case made and provided, and against the peace and dignity of the State of Indiana.

Mr. Schaefer
Affiant

[Signature]
Deputy Prosecuting Attorney, # 2831464

AGENCY CASE# ISP UTT 11857957

WITNESSES:

Trp Schaefer

IFS



CRTR5924

79D06-1011-CM-01756

STATE OF INDIANA vs. GLAFKE, MARK STEPHEN

Page: 4

11/16/10

NOTICE TO APPEAR - INITIAL HEARING

Event: INITIAL HEARING - OWI

Date: 11/22/2010 Time: 8:00 am

Judge: MORRISSEY, JUDGE MICHAEL A Location: SUPERIOR COURT NO.6

*** End of Report ***



**BEFORE THE INDIANA STATE
PSYCHOLOGY BOARD
CAUSE NO: 2011 ISPB 0001**

**IN THE MATTER OF THE)
)
LICENSE OF NICHOLAS J. CONSTANTINE, Ph.D.)
)
LICENSE NUMBER: 20041975A (EXPIRED))**



ORDER

Comes now the State of Indiana (“Petitioner”), by counsel, Michael A. Minglin, Deputy Attorney General, and requests a continuance of the hearing set for September 16, 2011 at 10:30 a.m.

And the Indiana State Psychology Board (“Board”) being duly advised in the premises, now **GRANTS** said motion and continues the hearing and **ORDERS** that this matter is reset for **November 18, 2011 at 10:00 a.m.** Local Time, in Conference Center Room 4, of the Indiana Government Center South, 302 West Washington Street, Indianapolis, Indiana 46204. Additional information pertinent to this matter is as follows:

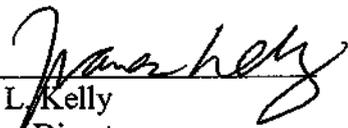
1. The official cause number of this action is: 2011 ISPB 0001.
2. This action is a disciplinary hearing to determine whether or not sanctions should be imposed upon Nicholas J. Constantine’s (“Respondent”) license.
3. The hearing will address the issues contained in the Petitioner’s Complaint which was mailed by certified mail on April 4, 2011.
4. The Board will be presiding as administrative law judge. Tasha Coleman, Board Director, may be contacted to obtain an additional copy of the complaint and information concerning hearing schedules and procedures by mail in care of the Indiana

Professional Licensing Agency, 402 West Washington Street, Room W072, Indianapolis,
Indiana 46204, or may be contacted by telephone at (317) 234-2051.

All of which is ORDERED, ADJUDGED AND DECREED this 15 day
of September, 2011.

INDIANA STATE PSYCHOLOGY BOARD

By:


Frances L. Kelly
Executive Director
Indiana Professional Licensing Agency

Copies to:

Nicholas J. Constantine, Ph.D.
8953 Broadway
Merrillville, IN 46410

CERTIFIED MAIL NUMBER: 91 7190 0005 2720 0011 4003
RETURN RECEIPT REQUESTED

Douglas K. Walker
HOEPPNER WAGNER & EVANS, LLP
Twin Towers South
1000 East 80th Place, 6th Floor
PO Box 10627
Merrillville, IN 46411-0627

Michael A. Minglin, Deputy Attorney General
Office of the Attorney General
Indiana Government Center South
302 West Washington Street, 5th Floor
Indianapolis, Indiana 46204

BEFORE THE INDIANA STATE
PSYCHOLOGY BOARD
CAUSE NUMBER: 2011 ISPB 0001

IN THE MATTER OF THE LICENSE OF:)
)
NICHOLAS J. CONSTANTINE, PH.D)
License No.: 20041975A)



HEARING NOTICE

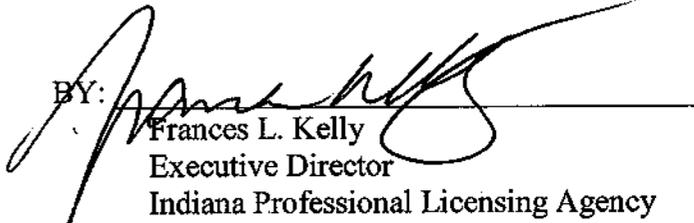
Comes now the INDIANA STATE BOARD OF PSYCHOLOGY ("Board") pursuant to Ind. Code. § 4-21.5-3-20 and issues the following Hearing Notice:

1. This notice is being provided Nicholas J. Constantine, 8953 Broadway, Merrillville, Indiana 46410.
2. This notice is being provided to counsel for Petitioner, State of Indiana, Akia Haynes, Deputy Attorney General, Office of the Attorney General, Indiana Government Center South, 302 West Washington Street, 5th Floor, Indianapolis, Indiana 46204, telephone number (317) 232-6241.
3. The official cause number of this action is: 2011 ISPB 0001.
4. This action is a final hearing to determine whether disciplinary sanctions should be imposed on the Respondent's psychologist license based on the allegations raised in the Complaint.
5. A hearing regarding this matter will be held on **May 13, 2011 at 11:00 a.m.**, Local Time, in Conference Room W064 of the Indiana Professional Licensing Agency, Indiana Government Center South, 402 West Washington Street, Indianapolis, Indiana 46204.

6. The Board is empowered to hold this disciplinary hearing pursuant to the authority of Ind. Code § 25-1-9 and Ind. Code § 4-21.5 *et seq.*
7. The Board will be presiding as administrative law judge in this matter. Tasha Coleman, Director of the Board, may be contacted to obtain information concerning hearing schedules and procedures by mail in care of the Indiana Professional Licensing Agency, 402 West Washington Street, Room W072, Indianapolis, Indiana 46204, by e-mail at tacoleman@pla.in.gov , by facsimile at (317) 233-4236, or by telephone at (317) 234-2051.
8. The hearing will address the issues contained in the Complaint filed April 4, 2011, which is attached hereto and incorporated by reference as Exhibit A.
9. Any party may be advised and represented by counsel at the party's own expense.
10. A party who fails to attend or participate in a pre-hearing conference, hearing, or other later stage of this proceeding may be held in default or have the proceeding dismissed under Ind. Code § 4-21.5-3-24.
11. Pursuant to Ind. Code § 4-21.5-3-34, this Board may afford parties the opportunity to informally settle matters; however, this section does not require any person to settle a matter under this agency's informal procedures.

ORDERED this 15 day of April 2011.

INDIANA STATE BOARD OF PSYCHOLOGY

BY: 

Frances L. Kelly
Executive Director
Indiana Professional Licensing Agency

Copies to:

Nicholas J. Constantine
8953 Broadway
Merrillville, IN 46410

CERTIFIED MAIL NO. 91 7190 0005 2720 0007 4222
RETURN RECEIPT REQUESTED

Akia Haynes, Deputy Attorney General
Office of the Attorney General
Indiana Government Center South
302 West Washington Street, 5th Floor
Indianapolis, Indiana 46204

BEFORE THE INDIANA STATE
PSYCHOLOGICAL BOARD
CAUSE NUMBER: 2011 ISPB 0001

IN THE MATTER OF THE LICENSE OF)
NICHOLAS J. CONSTANTINE, Ph.D.)
LICENSE NUMBER: 20041975A (EXPIRED))



COMPLAINT

The State of Indiana ("Petitioner"), by counsel, Deputy Attorney General Akia Haynes, on behalf of the Office of the Indiana Attorney General, and pursuant to Ind. Code § 25-1-7-7, Ind. Code ch. 25-1-5, Ind. Code § 25-23-1-7, the Administrative Orders and Procedures Act, Ind. Code ch. 4-21.5-3 and Ind. Code ch. 25-1-9, files its Complaint against the Indiana Psychologist license of Nicholas J. Constantine, Ph.D. ("Respondent"), and in support, states the following:

FACTS

1. Respondent is a licensed Psychologist in the state of Indiana, holding license number 20041975A since November 22, 2004. The license expired on August 31, 2010. Respondent's address, as on file with the Indiana Professional Agency is 8953 Broadway Avenue, Merrillville, Indiana 46410.
2. Respondent began seeing Patient A as a client on or about November 2, 2006.
3. On or about January 2007, Respondent took Patient A out to lunch for her birthday. Respondent claimed to have done this because it was his birthday as well.
4. Respondent also began visiting Patient A's home in order to help her clean her kitchen.

Exhibit "H"

5. On or about May 23, 2007, Respondent began having sessions with Patient A outside, specifically, at a fountain near his office.

6. In July 2007, Respondent began having sessions with Patient A at the beach where he and Patient A would sit by a fire until sunset. This continued until August when Respondent would bring dinner, wine, and a movie to Patient A's home.

7. During the last sessions at Patient A's home, Respondent took off his clothes, lay in Patient A's bed, tried to remove Patient A's clothes, and asked Patient A to have sexual relations with him. Respondent also asked Patient A to perform oral sex on him. Patient A complied with the request for several seconds, before stopping. Patient A, disturbed by Respondent's advances, took Xanax after he left her home.

8. At the last visit, Respondent brought a "little hand held vibrator" to Patient A's home. The "object totally disgusted" Patient A who attempted to cease contact with the Respondent. Respondent continued to call Patient A through April 2008 and visited her home around Thanksgiving 2007.

9. Patient A is unclear when the therapeutic relationship between she and the Respondent ended because she continued to discuss and work through her issues with Respondent through August 2007.

10. Patient A filed a civil action against the Respondent. In that action, Respondent signed an affidavit stating the following: "I, Nicholas Constantine, Ph.D., apologize and acknowledge that I inappropriately had an intimate

relationship with [Patient A] shortly after her therapy with me. By doing so I acknowledge that my conduct was unethical."

11. On or about July 30, 2009, Patient A and Respondent entered into a settlement requiring him to be monitored by Dr. Marti O'Danovich for a year and to receive one year of counseling with Carl Moisoff "with the intent to reduce or eliminate similar events from re-occurring."

COUNT I

12. Paragraphs 1-11 are incorporated by reference herein.

13. The Respondent's conduct as described above constitutes a violation of Ind. Code § 25-1-9-4(a)(4)(B) in that Respondent has continued to practice although he has become unfit to practice by failing to keep abreast of current professional theory or practice by violating 868 IAC 1.1-11-4.1(a) and 868 IAC 1.1-11-4.5(a) as evidenced by Respondent entering into an intimate relationship with Patient A and Patient A's confusion as to whether her professional relationship with Respondent had ended prior to beginning the sexual relationship.

COUNT II

14. Paragraphs 1-11 are incorporated by reference herein.

15. The Respondent's conduct as described above constitutes a violation of Ind. Code § 25-1-9-4(a)(4)(B) in that Respondent has continued to practice although he has become unfit to practice by failing to keep abreast of current professional theory or practice by violating 868 IAC 1.1-11-4.5(c) as evidenced by Respondent engaging

**BEFORE THE INDIANA STATE
PSYCHOLOGY BOARD
CAUSE NO: 2011 ISPB 0002**

**IN THE MATTER OF THE
LICENSE OF SHELLEY ANN HASTE, Psy.D.
LICENSE NUMBER: 20042321A**

)
)
)
)
)



ORDER

Comes now Shelley Ann Haste, Psy.D, ("Respondent"), and requests a continuance of the hearing set for September 16, 2011 at 10:30 a.m.

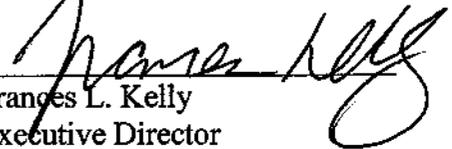
And the Indiana State Psychology Board ("Board") being duly advised in the premises, now **GRANTS** said motion and continues the hearing and **ORDERS** that this matter is reset for **November 18, 2011 at 10:30 a.m.**, in Conference Center Room 4 of the Indiana Government Center South, 302 West Washington Street, Indianapolis, Indiana 46204. Additional information pertinent to this matter is as follows:

1. This action is a disciplinary hearing to determine whether or not sanctions should be imposed upon the Respondent's license.
2. The hearing will address the issues contained in the Petitioner's Complaint which was mailed by certified mail on May 31, 2011.
3. The Board will be presiding as administrative law judge. Tasha Coleman, Board Director, may be contacted to obtain an additional copy of the complaint and information concerning hearing schedules and procedures by mail in care of the Indiana Professional Licensing Agency, 402 West Washington Street, Room W072, Indianapolis, Indiana 46204, or may be contacted by telephone at (317) 234-2051.

All of which is ORDERED, ADJUDGED AND DECREED this 07 day
of October, 2011.

STATE PSYCHOLOGY BOARD

By:


Frances L. Kelly
Executive Director
Indiana Professional Licensing Agency

Copies to:

Shelley Ann Haste, Psy.D
7 Teresa Court
Hamilton, OH 45013

CERTIFIED MAIL NUMBER: 91 7190 0005 2720 0012 0585
RETURN RECEIPT REQUESTED

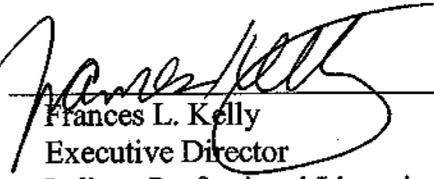
William V. Lawson, Deputy Attorney General
Office of the Attorney General
Indiana Government Center South
302 West Washington Street, 5th Floor
Indianapolis, Indiana 46204

6. The Board is empowered to hold this disciplinary hearing pursuant to the authority of Ind. Code § 25-1-9 and Ind. Code § 4-21.5 *et seq.*
7. The Board will be presiding as administrative law judge in this matter. Tasha Coleman, Director of the Board, may be contacted to obtain information concerning hearing schedules and procedures by mail in care of the Indiana Professional Licensing Agency, 402 West Washington Street, Room W072, Indianapolis, Indiana 46204, by e-mail at tacoleman@pla.in.gov , by facsimile at (317) 233-4236, or by telephone at (317) 234-2051.
8. The hearing will address the issues contained in the Complaint filed May 31, 2011, which is attached hereto and incorporated by reference as Exhibit A.
9. Any party may be advised and represented by counsel at the party's own expense.
10. A party who fails to attend or participate in a pre-hearing conference, hearing, or other later stage of this proceeding may be held in default or have the proceeding dismissed under Ind. Code § 4-21.5-3-24.
11. Pursuant to Ind. Code § 4-21.5-3-34, this Board may afford parties the opportunity to informally settle matters; however, this section does not require any person to settle a matter under this agency's informal procedures.

ORDERED this 03 day of June 2011.

INDIANA STATE BOARD OF PSYCHOLOGY

BY: _____


Frances L. Kelly
Executive Director
Indiana Professional Licensing Agency

Copies to:

Shelley Ann Haste

7 Teresa Court

Hamilton, OH 45013

CERTIFIED MAIL NO. 91 7190 0005 2720 0008 6720

RETURN RECEIPT REQUESTED

Akia Haynes, Deputy Attorney General

Office of the Attorney General

Indiana Government Center South

302 West Washington Street, 5th Floor

Indianapolis, Indiana 46204

BEFORE THE INDIANA STATE
PSYCHOLOGICAL BOARD
CAUSE NUMBER: 2011 ISPB 0002

IN THE MATTER OF THE LICENSE OF)
SHELLEY ANN HASTE, Psy.D.)
LICENSE NUMBER: 20042321A (ACTIVE))



COMPLAINT

The State of Indiana ("Petitioner"), by counsel, Deputy Attorney General Akia Haynes, on behalf of the Office of the Indiana Attorney General, and pursuant to Ind. Code § 25-1-7-7, Ind. Code ch. 25-1-5, Ind. Code § 25-23-1-7, the Administrative Orders and Procedures Act, Ind. Code ch. 4-21.5-3 and Ind. Code ch. 25-1-9, files its Complaint against the Indiana Psychologist license of Shelley Ann Haste, Psy.D. ("Respondent"), and in support, states the following:

FACTS

1. Respondent is a licensed Psychologist in the state of Indiana, holding license number 20042321A since March 10, 2009. The license is currently Active. Respondent's address, as on file with the Indiana Professional Licensing Agency is 7 Teresa Court, Hamilton, OH 45013.

2. On February 1, 2010, Respondent voluntarily entered into a Settlement Agreement ("Settlement") with the Kentucky Board of Examiners of Psychology (herein "Kentucky Board"), admitting to four (4) violations of KRS 319.082(1)(f) and 201 KAR 26:145 § 3(5) for rendering a formal professional opinion in a letter to another psychologist about an individual who was neither a patient nor client of Respondent, with whom the Respondent never performed a formal assessment, and with whom Respondent lacked a direct and substantial professional relationship.

Exhibit "A"

3. In the Settlement, Respondent also admitted to committing an unfair, false, misleading, or deceptive act by stereotyping the aforementioned individual's behavior or values in the previously mentioned letter to another psychologist, based upon Respondent's perception of the individual's sexual and religious preferences, and diagnosing the individual in the letter in violation of KRS 319.082(1)(c).

4. In response to the aforementioned violations, the Kentucky Board reprimanded Respondent's license by imposing \$5,750.00 in fines. The Kentucky Board also required Respondent to complete eight (8) clock hours of continuing education regarding KRS Chapter 319, 201 KAR Chapter 26, the Board's Code of Conduct at 201 KAR 26:1455, Kentucky mental health law, ethical principles, and professional practice for the behavioral professional. These hours were to be completed at the Respondent's expense and in addition to the continuing educational requirement already imposed as a condition of practicing psychology in the state of Kentucky. Respondent had to request preapproval of each course, in writing, by the Kentucky Board at least forty-five (45) days prior to taking the course.

5. Additionally, the Kentucky Board required Respondent to schedule a meeting of at least two (2) clock hours, in person, (to occur within thirty (30) days after completion of the above continuing education) with a licensed psychologist (appointed in writing by the Board and at the cost of the Respondent) to discuss the Respondent's past and present practice, her understanding of the ethics of the

behavioral professional, and to allow Respondent an opportunity to explain how her practice would not pose a risk to the public in light of her violations.

6. The Kentucky Board further required Respondent to submit a written summary of no less than five (5) typed pages explaining the content of the continuing educational courses Respondent selected to meet the Kentucky Board's requirements and a summary of Respondent's own experiences prior to the aforementioned meeting with the psychologist.

COUNT I

7. Paragraphs 1-6 are incorporated herein by reference.

8. Respondent's conduct, as described above, constitutes a violation of Ind. Code § 25-1-9-4(a)(7) in that Respondent has had disciplinary action taken against her or her license to practice in another state on grounds similar to those in Indiana as evidenced by the disciplinary action taken against Respondent's license by the Kentucky Board of Examiners of Psychology for her act of rendering a formal professional opinion and stereotyping an individual in a letter to another psychologist as well as diagnosing the individual based upon the stereotypes without formally evaluating, assessing, or otherwise having direct and substantial professional contact with the individual.

WHEREFORE, the Petitioner demands an order against the Respondent that:

1. Imposes the appropriate disciplinary sanction;

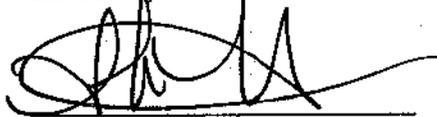
2. Directs Respondent to immediately pay all costs incurred in the prosecution of this case; and

3. Provides any further relief as the Board deems just and proper.

Respectfully submitted,

GREGORY ZOELLER
Attorney General of Indiana
Attorney Number 1958-98

By:



Akia Haynes
Deputy Attorney General
Attorney No.: 27869-49

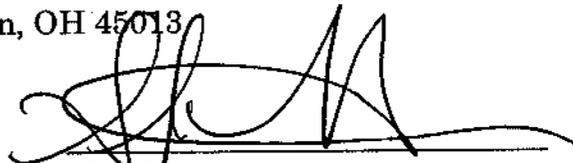
OFFICE OF THE ATTORNEY GENERAL

Indiana Government Center South
302 West Washington Street, Fifth Floor
Indianapolis, IN 46204-2770
Email Akia.Haynes@atg.in.gov
Phone: (317) 234-2598
Fax: (317)-233-4393

CERTIFICATE OF SERVICE

I certify that a copy of the "Complaint" has been duly served upon the Respondent listed below, by United States mail, first-class, postage prepaid, on this 31st day of May, 2011.

Shelley Ann Haste
7 Teresa Court
Hamilton, OH 45013



Akia Haynes
Deputy Attorney General

**BEFORE THE INDIANA STATE
PSYCHOLOGY BOARD
CAUSE NO: 2011 ISPB 0003**

**IN THE MATTER OF THE
UNLICENSED PRACTICE OF:**

BRENDA LYCAN

)
)
)
)



ORDER GRANTING CONTINUANCE

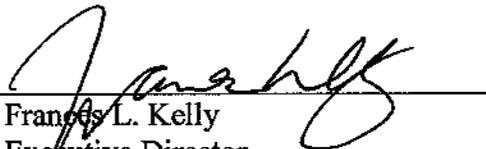
Comes now the Respondent, Brenda Lycan, and requests a continuance of the hearing set for September 16, 2011 at 9:00 a.m. Local Time.

And the Indiana State Psychology Board ("Board") being duly advised in the premises, now **GRANTS** said motion and **ORDERS** that this matter will be reset for hearing on November 18, 2011 at 10:00 a.m. Local Time, in Conference Center Room 4 of the Indiana Government Center South, 302 West Washington Street, Indianapolis, IN 46204. Additional information pertinent to this matter is as follows:

1. The official cause number of this action is: 2011 ISPB 0003.
2. This action is an Order to Show Cause issued by the Board based on the allegations raised in the petitioner's Motion for Order to Cease and Desist.
3. The hearing will address the issues contained in the State of Indiana's Motion for Order to Cease and Desist, filed July 26, 2011.
4. The Board will be presiding as administrative law judge. Tasha Coleman, Board Director, may be contacted to obtain information concerning hearing schedules and procedures by mail in care of the Indiana Professional Licensing Agency, 402 West Washington Street, Room W072, Indianapolis, Indiana 46204, or may be contacted by telephone at (317) 234-2051.

All of which is ORDERED, ADJUDGED, AND DECREED this 15 day
of September, 2011.

INDIANA STATE PSYCHOLOGY BOARD

By: 
Francis L. Kelly
Executive Director
Indiana Professional Licensing Agency

Copies to:

Brenda Lycan
531 Waterford Way
Danville, IN 46122
CERTIFIED MAIL NO: 91 7190 0005 2720 0011 3983
RETURN RECEIPT REQUESTED

M. Kent Newton
NEWTON BECKER BOUWKAMP PENDOSKI, PC
3755 East 82nd Street, Suite #220
Indianapolis, IN 46240-2423

Alan A. Bouwkamp
NEWTON BECKER BOUWKAMP PENDOSKI, PC
3755 East 82nd Street, Suite #220
Indianapolis, IN 46240-2423

Michael A. Minglin, Deputy Attorney General
Office of the Attorney General
Indiana Government Center South
302 W. Washington Street, 5th Floor
Indianapolis, IN 46204

BEFORE THE INDIANA STATE
PSYCHOLOGICAL BOARD
CAUSE NUMBER: 2011 ISPB 0003

IN THE MATTER OF THE)
UNLICENCED PRACTICE OF)
)
BRENDA LYCAN)



MOTION FOR ORDER TO CEASE AND DESIST

The State of Indiana (Petitioner), by counsel, Deputy Attorney General, Akia Haynes, pursuant to Ind. Code § 25-1-7-14, files this motion requesting the Indiana State Psychological Board ("Board") to order Brenda Lycan ("Respondent") to Cease and Desist her practice of psychology without the required license. In support of this motion, the Office of the Attorney General ("Petitioner") alleges and states as follows:

1. The Board is charged with the responsibility of regulating the practice of psychology in the State of Indiana pursuant to Ind. Code § 25-33-1-3.
2. Respondent's mailing address is 531 Waterford Way, Danville, IN 46122.
3. Pursuant to Ind. Code § 25-33-1-2(a), the practice of psychology includes "(1) construction, administration, and interpretation of tests of intellectual and cognitive abilities, aptitudes, skills, interests, attitudes, personality characteristics, perception, emotion, motivation, and opinion; (2) Diagnosis and treatment of mental and behavioral disorders by a health service provider in psychology; (3) Educational and vocational planning and guidance; (4) Personnel selection and management; (5) Arrangement of effective work and learning situations; (5) Arrangement of effective work and learning situations; (6) Resolution of interpersonal and social conflicts; (7)

Techniques used in interviewing, counseling, psychotherapy, and behavior modification of individuals or groups; (8) Supervision of psychological services; (9) Teaching of any of the practices listed in this subsection; (10) The planning and conduct of research on human behavior.”

4. “Psychological services,” as defined under Ind. Code § 25-33-1-2(a), are “acts or behaviors coming within the purview of the practice of psychology (as defined in this article.)”

5. A “Person,” as defined under Ind. Code § 25-33-1-2(a), is “an individual, firm, partnership, association, or corporation.”

6. An individual is prohibited from practicing psychology without a valid license under Ind. Code § 25-33-1-14(b).

7. Respondent has engaged and continues to engage in activities for which a license is required under 25-33-1-14(b). These activities include, but are not limited to counseling a minor child, administering and interpreting psychological testing results for the child, as well as diagnosing and making recommendations for the child’s treatment.

8. Respondent is not currently, and has never been, licensed as a psychologist in the State of Indiana.

9. Moreover, Respondent does not fit within the exemptions listed in Ind. Code § 25-33-1-1.1 which would permit her to practice psychology without a license.

10. By engaging in activities for which a license is required under Ind. Code § 25-33-1-14(b), without falling into the exemptions as listed in Ind. Code § 25-33-1-

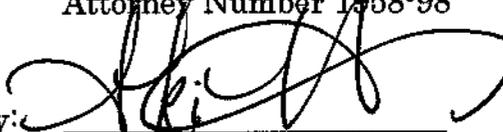
1.1, the Board should issue an order to cease and desist pursuant to Ind. Code § 25-1-7-14(b).

WHEREFORE, Petitioner respectfully requests an order against Respondent that:

1. Directs Respondent to immediately cease and desist any activity that is considered the practice of psychology as defined under Ind. Code § 25-33-1-2(a).
2. Provide any other relief that the Board deems just and proper.

Respectfully Submitted,

GREGORY ZOELLER
Attorney General of Indiana
Attorney Number 1958-98

By: 

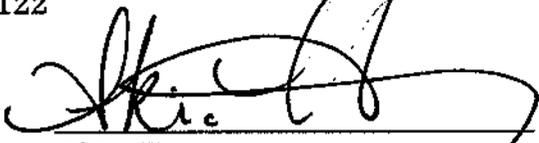
Akia Haynes
Deputy Attorney General
Attorney No.: 27869-49

OFFICE OF THE ATTORNEY GENERAL
Indiana Government Center South
302 West Washington Street, Fifth Floor
Indianapolis, IN 46204-2770
Email Akia.Haynes@atg.in.gov
Phone: (317) 234-2598
Fax: (317) 233-4393

CERTIFICATE OF SERVICE

I certify that a copy of the "Complaint" has been duly served upon the
Respondent listed below, by United States mail, first-class, postage prepaid, on this
26th day of JULY, 2011.

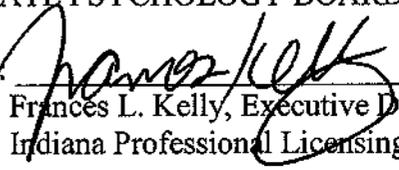
Brenda S. Lycan
531 Waterford Way
Danville, IN 46122


Akia Haynes
Deputy Attorney General

7. The Board will preside as administrative law judge in this matter. Tasha Coleman, Director of the Board, may be contacted to obtain information concerning hearing schedules and procedures by mail in care of the Indiana Professional Licensing Agency, 402 West Washington Street, Room W072, Indianapolis, Indiana 46204, by telephone at 317-234-2051, by facsimile at 317-233-4236, or by email at tacoleman@pla.in.gov.
8. The hearing will address the issues contained in the notice of noncompliance letter dated October 4, 2011 and the petition for review received October 13, 2011, copies of which are attached hereto and incorporated herein by reference as exhibits "A" and "B".
9. Any party may be advised and represented by counsel at the party's own expense.
10. A party who fails to attend or participate in a pre-hearing conference, hearing, or other later stage of this proceeding may be held in default or have the proceeding dismissed under section 24 of Ind. Code § 4-21.5-3.

All of which is ORDERED, ADJUDGED AND DECREED this 18 day of October 2011.

STATE PSYCHOLOGY BOARD

By: 

Frances L. Kelly, Executive Director
Indiana Professional Licensing Agency

Distributed to:

Barry Michael Shear, Ph.D.
562 Woodlawn Drive
Valparaiso, IN 46385

CERTIFIED MAIL NUMBER: 91 7190 0005 2720 0012 3821
RETURN RECEIPT REQUESTED

Elizabeth Brown, Deputy Attorney General
Office of the Attorney General
Indiana Government Center South
402 West Washington Street, 5th Floor
Indianapolis, Indiana 46204

STATE PSYCHOLOGY BOARD

In the matter of:)
)
Barry Michael Shear)
562 Woodlawn Drive)
Valparaiso, IN 46385)
LICENSE NO: 20040363A)

CONTINUING EDUCATION
AUDIT 2010



NOTICE OF NONCOMPLIANCE

Pursuant to Ind. Code § 25-1-4-5, you are hereby given notice that:

1. The State Psychology Board ("Board") conducted a random audit for compliance with the continuing education requirements for psychologists pursuant to Ind. Code § 25-1-4-3(b).

2. The Board has determined that you are not in compliance with the continuing education requirements found in Ind. Code § 25-33-2 and 868 IAC 1.1-15-1 because you failed to submit any documentation showing that you attended an additional twenty (20) hours of acceptable category I continuing education programs and six (6) hours of ethics within the reporting period of September 1, 2008 and August 31, 2010.

3. Based on your noncompliance, pursuant to Ind. Code § 25-1-4-5, you have been assessed a civil penalty in the amount of **ONE THOUSAND DOLLARS (\$1,000.00)**.

4. Pursuant to the Board's determination of noncompliance, you are hereby ordered to:

- a. Complete twenty (20) hours of category I continuing education credit hours and six (6) hours of ethics in order to achieve full compliance within six (6) months from the date of receipt of this Notice and submit proof of compliance to the Board AND

Exhibit "A"

- b. Pay the assessed civil penalty set out in paragraph three (3) within twenty-one (21) days from the date of receipt of this Notice. A check in the amount of the civil penalty assessed should be made payable to the Indiana Professional Licensing Agency and mailed or delivered to the following address:

State Psychology Board
Attn: Tasha Coleman, Director
Indiana Professional Licensing Agency
402 West Washington Street, Room W072
Indianapolis, IN 46204

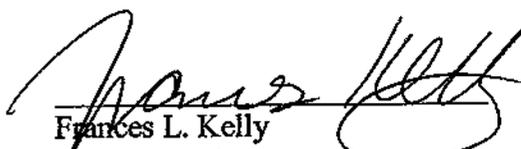
5. Pursuant to Ind. Code § 25-1-4-5(a)(3), you have been issued a conditional license as a result of your noncompliance.
6. Completion of all required continuing education credit hours and payment of the civil penalty under paragraph 4 will result in the renewal of your license with no conditions.
7. Any continuing education credit hours that are obtained in compliance with this notice may not be applied to the period in which the credit hours are acquired (that is, they are obtained to make up a deficiency and may not be counted toward compliance with the current reporting period).
8. Your failure to complete the continuing education credit hours or to pay the civil penalty under paragraph 4 above will result in the **IMMEDIATE SUSPENSION** of your license by the Board pursuant to Ind. Code § 25-1-4-5(c).

So ORDERED,

STATE PSYCHOLOGY BOARD

Date

October 04, 2011


Frances L. Kelly
Executive Director
Indiana Professional Licensing Agency

NOTICE OF RIGHT TO PETITION FOR REVIEW

The recipient of this order is hereby notified that she may petition for review of this action by filing a written petition for review with the Board no later than twenty-one (21) days from the receipt of this Notice of Noncompliance unless such date is a Saturday, a Sunday, a legal holiday under state statute, or a day that the Indiana Professional Licensing Agency's offices are closed during regular business hours in which case the deadline would be the first day that is not a Saturday, a Sunday, a legal holiday under state statute, or a day that the Indiana Professional Licensing Agency's offices are closed during regular business hours. If a petition is properly filed, an administrative proceeding will be conducted by the Board. The petitioner has the burden of proving that the Board was incorrect in its assessment of the civil penalty and number of continuing education hours needed.

Barry Michael Shear
562 Woodlawn Drive
Valparaiso, IN 46385

CERTIFIED MAIL NO: 91 7190 0005 2720 0011 8971
RETURN RECEIPT REQUESTED

BARRY SHEAR PhD, HEALTH SERVICE PROVIDER IN PSYCHOLOGY

562 Woodlawn Drive, Valparaiso, IN 46385
Indiana Psychologist License # 20040363A
Home- 219 - 465-22
Cell 219- 508- 9786
bpshear@comcast.net



State Psychology Board
Attn: Tasha Coleman, Director
Indiana Professional Licensing Agency
402 West Washington Street, Room W072
Indianapolis, IN 46204

Frances L. Kelly
Executive Director
Indiana Professional Licensing Agency

Please accept this letter as my petition for review of my Noncompliance with Continuing Education, stemming from a random audit for compliance. I'm requesting the privilege of attending an administrative proceeding. I understand the burden of proof is my responsibility and that this petition must be properly filed in order to receive consideration.

I am hopeful for a favorable reply regarding my petition.

Thank you,

Barry Shear PhD HSP

Barry Shear, Ph.D., Health Service Provider in Psychology
Licensed Psychologist, Indiana license #, 20040363A



Exhibit "B"

BARRY SHEAR PhD, HEALTH SERVICE PROVIDER IN PSYCHOLOGY
562 Woodlawn Drive, Valparaiso, IN 46385
Office 219 - 464 - 1089
Cell 219- 508- 9786
bpshear@comcast.net

State Psychology Board
Attn: Tasha Coleman, Director
Indiana Professional Licensing Agency
402 West Washington Street, Room W072
Indianapolis, IN 46204

November 5, 2011

Frances L. Kelly
Executive Director
Indiana Professional Licensing Agency

Regarding: MY NON-COMPLIANCE WITH CE THE 2008-2010 REPORTING PERIOD.

Purpose of this letter:

1. I believe I have taken the remedial steps to achieve full compliance of my continuing education responsibilities for 2008-2010.
2. Demonstration of my belief that, if it pleases the board, it may be possible to resolve this matter prior to hearing.

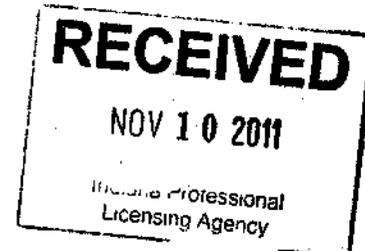
I: SIX HOURS OF ETHICS CE:

I accept full responsibility for the serious mistake regarding 6 hours of ethics credits, missing in the 2008-2010 license period. I remain, embarrassed and took immediate actions to complete the required continuing education and remediate this problem. I am now providing clear indication of my compliance with this requirement by submitting (enclosed with this letter) documentation of the two ethics courses, each for 3 hours, taken since the receipt of your letter.

II: CONSIDERATION, BY THE BOARD THAT:

THE ARTICLE 7 CLASS MAY BE SEEN AS APPROPRIATE CATEGORY 1 CE CREDITS.

- A. I am a graduate of a PhD, School Psychology program at ISU, 1988.
- B. I am very fortunate to be able to use the educational/psychological training received in my undergraduate, masters and graduate training to work as a



Psychologist, a Health Service Provider in Psychology, inside and outside of educational systems.

- C. Employed, full time, as a School Psychologist for approximately 6 years, my employer, Joint Educational Services in Special Education (JESSE), serves 9 school systems, mostly rural, in four Indiana counties. I enjoy my work immensely allowing me to use all of my training, experience and skills as a Psychologist working in a variety of educational settings. I work with children (as young as 2 ½), adolescents, young adults up to the age of 21, their parents and all the educators, administrators, and broader community of service agencies from public and private centers of mental health through children's protective services and other branches of the legal system.

The borders of regular and special education continue to evolve as the vacillation of No Child Left Behind, Americans with Disabilities Act, Response to Intervention, and constantly evolving local, state, federal, regular and special laws continue to develop.

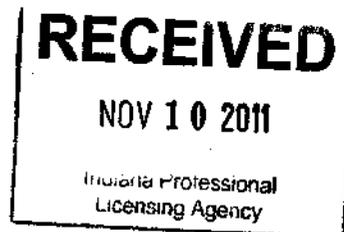
Familiarity with, and adherence to, the laws allow me to take care of APA's, 5 Aspirational Principles:

- Principle A: Beneficence and Nonmaleficence
- Principle B: Fidelity and Responsibility
- Principle C: Integrity
- Principle D: Justice
- Principle E: Respect for People's Rights and Dignity.

My overall concern is: Take care to protect the Children, Adolescents and young adults I work with.

To the extent that I am able to accomplish these tasks, while following the layers of laws, I assist other team members in providing optimal educational experiences for students who face additional or extraordinary challenges. I work with a majority of parents with little education and poor knowledge of their rights in this confusing area. I advocate for the parents as much as for the children to obtain every opportunity the law provides. I also advocate for the school system to be able to function and continue to provide the best services possible under increasing financial pressures. This would not be possible without continuing education in this complex area which is always evolving.

- D: Consideration of waiving the \$1,000.00 penalty fee; pending your assurance that my recent actions and explanations have clearly indicated my intent to remediate any deficiencies so that I have fulfilled and may be in compliance with the laws governing my continuing education responsibilities.



The Board may wish to consider two other factors that are personal problems of my wife and me.

1. We are under a Chapter 13 bankruptcy and continue to struggle, financially. (Documentation submitted with this letter).
2. My wife, Phyllis and I have been educating ourselves regarding endometrial, uterine cancer, since her diagnosis, this summer 2011. She had a radical hysterectomy at University of Chicago, performed by Dr. Seiko Diane Yamada, MD, September 8, 2011.
3. Phyllis and I are waiting for the signal to begin pelvic radiation, which will be Completed at U of C, with Radiation Oncology Associates, of the surgery team. (Documentation of surgery and need for radiation submitted with this letter).

If for any reasons this communication is unclear, incomplete or in need of expansion and/or clarification I am motivated to immediately provide the board with this material.

In the event that I may have provided the board with sufficient information to resolve my deficiencies, I would consider myself extremely fortunate, if my petition could be withdrawn and my appearance before the board cancelled.

If these issues cannot be resolved prior to the Friday, November 18 board meeting, I will be in attendance at the meeting at the specified time.

Thank you for the extra time this is taking, your willingness to accept additional information and to repeatedly communicate with me.


Barry Shear, Ph.D., Health Service Provider in Psychology
Licensed Psychologist, Indiana license #, 20040363A

RECEIVED

NOV 10 2011

Indiana Professional
Licensing Agency

11

Certificate of Attendance

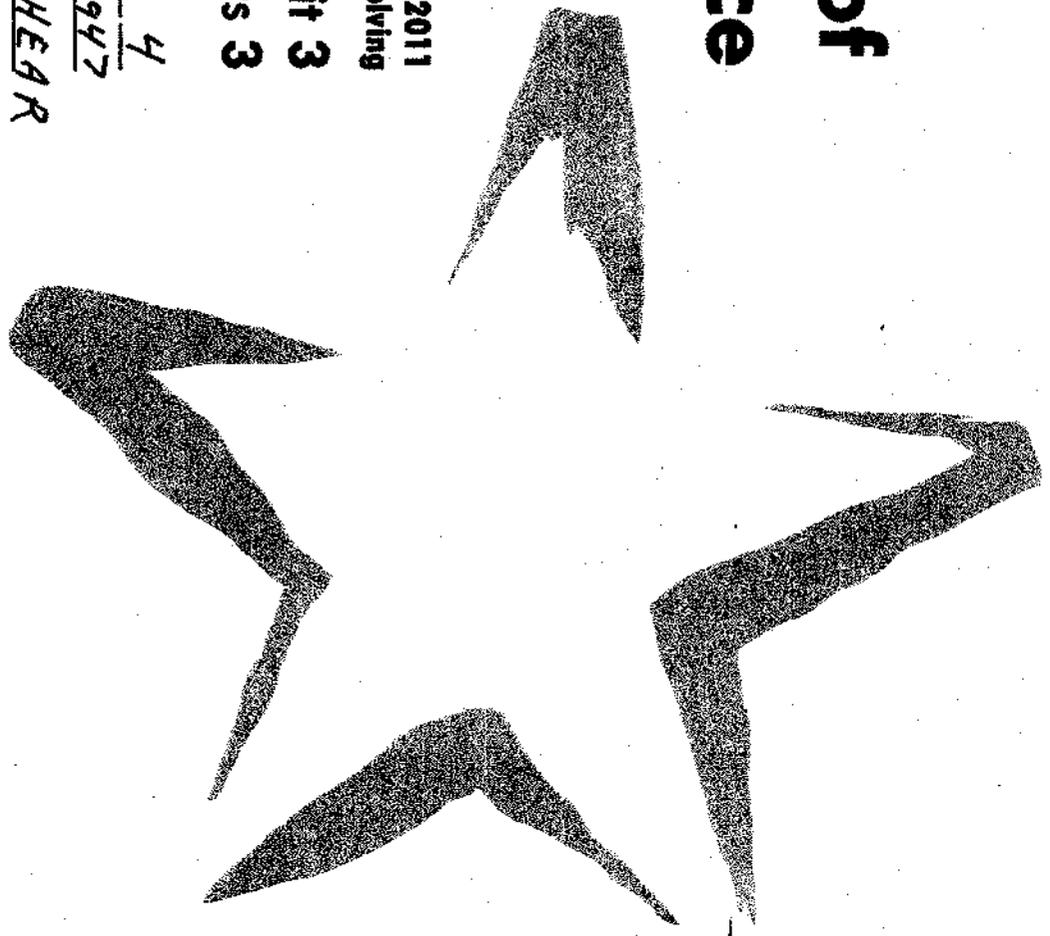
October 9, 2011
Workshop II Ethical Problem Solving

CPD Credit 3
PGP Points 3

Last four digits of social security number: 5334
Date of Birth: 11/6/1947

Participant's Name: BARRY M. SHEAR

Sponsor



NOV 10 2011
Indiana Professional
Licensing Agency

Barry M. Shear
Participant's Name

W. J. [Signature]
IASP President

10/9/2011
Date

10/9/2011
Date

ZUR INSTITUTE, LLC

Ofer Zur, Ph.D., Director
Sonoma Medical Plaza, 181 Andrieux St. Suite 211
Sonoma, CA 95476

Phone: (707) 935-0655
E-Mail: info@zurinstitute.com

Fax: (707) 736-7045
Website: www.ZurInstitute.com

CERTIFICATE OF COMPLETION

Barry Shear, Ph.D.

~ Lic. # IN 20040363A ~

Has completed, in its entirety, the following continuing education activity
sponsored by the Zur Institute, LLC:

Distance Learning Course - Online Course

**Course Title: Digital and Social Media Ethics for Psychotherapists: Clinical
and Ethical Considerations for Psychologists, Counselors, and Clinicians
Using the Internet**

Number of CE Credits: 8

Date of Completion: October 23, 2011

- The Zur Institute is approved by the American Psychological Association (APA) to sponsor continuing education for psychologists. The Zur Institute maintains responsibility for this program and its content.
- This online course meets the qualifications for 8 ce credits for MFCCs and LCSWs as required by the California Board of Behavioral Sciences (BBS). Provider # PCE 6.
- The Zur Institute, provider #1113, is approved as a provider for social work continuing education by the Association of Social Work Boards (ASWB), www.aswb.org, phone: 1-800-225-6880, through the Approved Continuing Education (ACE) program. The Zur Institute maintains responsibility for the program. Social workers participating in this course will receive 8 continuing education clock hours.
- The Zur Institute is recognized by the National Board for Certified Counselors, Provider # 6036, to offer continuing education for National Certified Counselors. We adhere to NBCC Continuing Education Guidelines.
- Provider approved by the California Board of Registered Nursing. Provider # CEP 14826, for 8 Contact Hours. This document to be retained by the licensee for a period of four years after the course concludes.
- Provider approved by the State of Kansas Behavioral Sciences Regulatory Board. Provider # 08-001.
- Provider approved by NAADAC, The Association for Addiction Professionals. Provider # 603.
- Provider approved by CA Board of Vocational Nursing & Psychiatric Technicians.
- Provider approved by the Florida Board of Psychology. Provider # 50-10793.
- Provider approved by the Florida Board of Social Work, Marriage & Family Therapy & Mental Health Counseling. Provider # 50-10794.
- Provider approved by the Texas Board of Examiners of Professional Counselors. Provider # 1020.
- Provider approved by CFAAP/CAADAC. Provider # 4N-08-116-513 for 10CEH.
- Provider approved by the Ohio Counselor, Social Worker & Marriage and Family Therapist Board. Provider # RCST031101.
- Zur Institute has been approved to offer CE credit for Certified Addiction Specialists (CAS) in accordance with the American Academy of Health Care Providers in the Addictive Disorders. Approval # 10-1380.

Ofer Zur

Director, Zur Institute, LLC

RECEIVED

NOV 10 2011

Indiana Professional
Licensing Agency

ZUR INSTITUTE, LLC

Ofer Zur, Ph.D., Director
Sonoma Medical Plaza, 181 Andrieux St. Suite 211
Sonoma, CA 95476

Phone: (707) 935-0655
E-Mail: info@zurinstitute.com

Fax: (707) 736-7045
Website: www.ZurInstitute.com

CERTIFICATE OF COMPLETION

Barry Shear, Ph.D.
~ Lic. # IN 20040363A ~

Has completed, in its entirety, the following continuing education activity
sponsored by the Zur Institute, LLC:

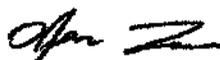
Distance Learning Course - Online Course

**Course Title: Telehealth: The New Standard - Ethical, Legal, Clinical,
Technological, and Practice Considerations**

Number of CE Credits: 13

Date of Completion: October 27, 2011

- The Zur Institute is approved by the American Psychological Association (APA) to sponsor continuing education for psychologists. The Zur Institute maintains responsibility for this program and its content.
- This online course meets the qualifications for 13 ce credits for MFCCs and LCSWs as required by the California Board of Behavioral Sciences (BBS). Provider # PCE 6.
- The Zur Institute, provider #1113, is approved as a provider for social work continuing education by the Association of Social Work Boards (ASWB), www.aswb.org, phone: 1-800-225-6880, through the Approved Continuing Education (ACE) program. The Zur Institute maintains responsibility for the program. Social workers participating in this course will receive 13 continuing education clock hours.
- The Zur Institute is recognized by the National Board for Certified Counselors, Provider # 6036, to offer continuing education for National Certified Counselors. We adhere to NBCC Continuing Education Guidelines.
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- Provider approved by NAADAC, The Association for Addiction Professionals, Provider # 603.
- Provider approved by CA Board of Vocational Nursing & Psychiatric Technicians.
- Provider approved by the Florida Board of Psychology, Provider # 50-10793.
- Provider approved by the Florida Board of Social Work, Marriage & Family Therapy & Mental Health Counseling, Provider # 50-10794.
- Provider approved by the Texas Board of Examiners of Professional Counselors, Provider # 1020.
- Provider approved by CFAAP/CAADAC, Provider # 4N-08-116-513 for 10CEH.
- Provider approved by the Ohio Counselor, Social Worker & Marriage and Family Therapist Board, Provider # RCST031101.
- Zur Institute has been approved to offer CE credit for Certified Addiction Specialists (CAS) in accordance with the American Academy of Health Care Providers in the Addictive Disorders, Approval # 10-1380.



Director, Zur Institute, LLC

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Licensing Agency

- CA Psychologists: Submit a copy of the certificate with a CE report to MCEPAA.

ZUR INSTITUTE, LLC

Ofer Zur, Ph.D., Director
Sonoma Medical Plaza, 181 Andrieux St. Suite 211
Sonoma, CA 95476

Phone: (707) 935-0655
E-Mail: info@zurinstitute.com

Fax: (707) 736-7045
Website: www.ZurInstitute.com

CERTIFICATE OF COMPLETION

Barry Shear, Ph.D.

~ Lic. # IN 20040363A ~

Has completed, in its entirety, the following continuing education activity
sponsored by the Zur Institute, LLC:

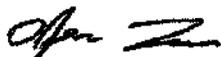
Distance Learning Course - Online Course

Course Title: Psychology of Aging and Positive Psychology

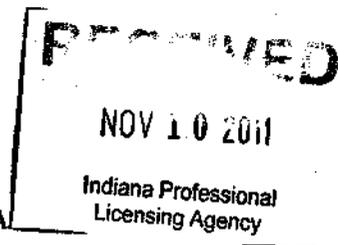
Number of CE Credits: 3

Date of Completion: November 4, 2011

- The Zur Institute is approved by the American Psychological Association (APA) to sponsor continuing education for psychologists. The Zur Institute maintains responsibility for this program and its content.
- This online course meets the qualifications for 3 ce credits for MFCCs and LCSWs as required by the California Board of Behavioral Sciences (BBS). Provider # PCE 6.
- The Zur Institute, provider #1113, is approved as a provider for social work continuing education by the Association of Social Work Boards (ASWB), www.aswb.org, phone: 1-800-225-6880, through the Approved Continuing Education (ACE) program. The Zur Institute maintains responsibility for the program. Social workers participating in this course will receive 3 continuing education clock hours.
- The Zur Institute is recognized by the National Board for Certified Counselors, Provider # 6036, to offer continuing education for National Certified Counselors. We adhere to NBCC Continuing Education Guidelines.
- Provider approved by the California Board of Registered Nursing, Provider # CEP 14826, for 3 Contact Hours. This document to be retained by the licensee for a period of four years after the course concludes.
- Provider approved by the State of Kansas Behavioral Sciences Regulatory Board, Provider # 08-001.
- Provider approved by NAADAC, The Association for Addiction Professionals, Provider # 603.
- Provider approved by CA Board of Vocational Nursing & Psychiatric Technicians.
- Provider approved by the Florida Board of Psychology, Provider # 50-10793.
- Provider approved by the Florida Board of Social Work, Marriage & Family Therapy & Mental Health Counseling, Provider # 50-10794.
- Provider approved by the Texas Board of Examiners of Professional Counselors, Provider # 1020.
- Provider approved by CFAAP/CAADAC, Provider # 4N-08-116-513 for 10CEH.
- Provider approved by the Ohio Counselor, Social Worker & Marriage and Family Therapist Board, Provider # RCST031101.
- Zur Institute has been approved to offer CE credit for Certified Addiction Specialists (CAS) in accordance with the American Academy of Health Care Providers in the Addictive Disorders, Approval # 11-1380.



Director, Zur Institute, LLC



- CA Psychologists: Submit a copy of the certificate with a CE report to MCEPAA

III

ARTICLE 7 CLASS MAY BE SEEN AS APPROXIMATE CATEGORY I CE CREDITS, PSYCHOLOGY IN THIS MAJOR OF PSYCHOLOGY & EDUCATION

AVAILABLE AT
7-1-100-388-0054
SCHOOL OF EDUCATION
INDIANA UNIVERSITY SOUTH BEND
Competent, Rational, and Reflective Professional

Course Title: Understanding and Utilizing Indiana Special Education Law
(How to write an IEP that is legal and appropriate.)
Revised to reflect changes in Indiana Special Education Law effective June 2008

Course Number:
Section:

School of Education Mission Statement:
Through our programs in the School of Education at Indiana University South Bend and our active engagement in the community, we prepare teachers and other school professionals to be competent, ethical, and reflective practitioners. Our candidates and faculty are professionals dedicated to continuous learning in order to address the needs of diverse individuals and prepare them for the complexities of a rapidly changing world. As part of a public comprehensive university and through our services to schools we strive to make a positive difference in the community within and beyond north central Indiana.

Instructor: David Walker MS, LCSW
Phone: 574-836-2627 ext. 211 or 574-780-2004
Associate faculty should list contact information and directions for students to make an appointment
E-mail: dwalker@iesee.k12.in.us
Livemail name (if appropriate):

COURSE DESCRIPTION: (required description from catalog)

Course Goal: Indiana Special Education Law changed significantly on June 4, 2008. Participants will study Article 7 sequentially and in depth. By the end of the course all participants will have a firm and clear understanding of the requirements of Indiana Special Education law.

Course Format: The course will meet twice monthly during the 2008-09 school year. Each week will focus on a different rule(s) of Article 7. There will be lecture and discussion designed to develop a firm and clear understanding of Indiana Special Education law. Each participant is expected to attend at least one outside workshop on the changes to Article 7.

COURSE PREREQUISITES: (required from catalog)
Permission of the instructor

Section Description : The changes in Article 7 were approved by the State Board of Education in June 2008. There are some significant changes that will require schools

COURSE TEXT: Text:

(Required)
Indiana State Board of Education
Special Education Rules
Title 511 Article 7
Rules 32-47

(Required)
Attendance at an independent
workshop related to the changes
in Article 7

SPECIAL STATEMENTS : This course is designed for cumulative knowledge
Therefore regular attendance is required.

Commitment to Professionalism (required statement)
All students in the School of Education are expected to maintain the highest professional and ethical standards. It is your responsibility to familiarize yourself with our Code of Ethics <http://www.dps.iuindiana.edu/Code/>.

Commitment to Diversity(required statement)
The School of Education at IU South Bend is committed to preparing preservice teachers, school leaders, and school counselors to support learning for all students. Each class and learning experience helps candidates develop the knowledge, dispositions, and performance needed to meet the needs of students in today's diverse classroom. One example from the passelator: the knowledge gained from understanding the legal requirements of Special Education will enable teachers to work with students and other school personnel to better serve all students. The ability to "travel all roads with empathy and respect" will improve the educational environment and allow for greater acceptance of students with diverse needs.

Commitment to Technology (required statement)



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COURSE OBJECTIVES (required):

Students will:

Gain an in-depth understanding of the legal requirements of Special Education -- specifically the changes adopted by the Indiana State Board of Education in June 2008.

(IUSB Standard One: Content Knowledge)

Understand and apply learning theories and strategies for Special Education students.

(IUSB Standard Three: Diverse Learners)

Create a learning environment that encourages active engagement in learning for all students.

(IUSB Standard Five: Learning Environment)

Plan and manage instruction based upon knowledge of subject matter, students, the community and curriculum goals.

(IUSB Standard Seven: Instructional Planning)

Monitor student learning and adjust instruction accordingly.

(IUSB Standard Eight: Assessment)

Strive to ensure equity for all students.

(IUSB Standard Nine: Professionalism)

Communicate and interact with parents/guardians, families, school colleagues, and the community to support students learning and well being.

(IUSB Standard Ten: Collaboration)

COURSE Assignments or Performance Tasks (required):

Attendance: Since the information that will be presented will be sequential and cumulative, participants are expected to attend each session.

Reading: Participants are expected to have each assigned reading completed prior to the class session.

Reflections: Participants will complete a one-page reflection paper following each classroom session.

Independent Learning: Participants are expected to attend (and report on) at least one workshop that discusses the changes in Special Education law.

Final Project: Each participant will develop and present a completed IEP that will be subject to a peer review. Any deficiencies identified by peers will be corrected.

University and School of Education policies (required)

Electronic mail (email) is the official means of communication with students at Indiana University South Bend. A student's failure to receive or read official university communications sent to the student's official email address does not absolve the student from knowing and complying with the content of the official communication. It is recommended that students check email messages at least once daily. The university provides a simple mechanism for students to forward email from the official university email address to another email address of the student's choice. However, students who choose to have email forwarded to another email address do so at their own risk.

If you need adaptations or accommodations because of a disability, if you have emergency medical information to share with me, or if you need special arrangements in case the building must be evacuated please make an appointment with me as soon as possible. My office hours are Monday - Friday 8-4:30. My phone # is 574.780.2004. My e-mail is dwalker@ihsse.k12.in.us.

Please Note: (required statement)
Students in the School of Education are required to post select artifacts (assignments) on LiveText. Therefore, students may be required to purchase and utilize LiveText at any time during this course. The instructor will notify you if you are required to post assignments on LiveText.

STUDENT EVALUATION

Required Statement: Students must attain a grade of A 'C' or better in all required education courses.

This is a pass/fail-graded course. Mastery is more important than grades. 90% attendance will be required. The participant will be considered to have passed when they have developed an appropriate and legally defensible IEP.

TENTATIVE CLASS SCHEDULE

Class #1- The course will open with a general discussion of the importance of being able to write a legally defensible IEP. There will be an opportunity for participants to voice what they would like to learn from this course.

Rule 32 - Definitions - It is important to know and understand the legal definitions of terms that will be used throughout this course.

Quiz- Participants will take a short quiz to reinforce their learning from this session.

Class #2 - Reflection paper from class #1 is due

Rule 33 - General provisions - Discussion of the organizational and procedural requirements.

A short quiz will be given to reinforce learning.

Class #3 - Reflection paper from class 2 is due.

Rule 34 - Nonpublic Schools or Facilities - What are the requirements for students who are enrolled in a private school or facility?

Rule 35 - Program Planning and Evaluation - Requirements for data collection.

A short quiz will be given to reinforce learning.

Class #4 - Reflection paper from class 3 is due.

Rule 36 - General Administration of Programs - Personnel certification and training, highly qualified teachers, extended school year, transportation, state and local assessments.

Class #5 - Reflection paper from class 4 is due.

Rule 37 - Procedural Safeguards - Discussion of parent rights.

Rule 38 - Confidentiality - Who has access to student records and how can those records be amended.

Rule 39 - Educational Surrogate Parents - Qualifications and role of ESP.

A short quiz will be given to reinforce learning.

Class #6 - Reflection paper from class 5 is due.

Rule 40 - Identification and Evaluation - Outlines requirements for child find and evaluation procedures.

A short quiz will be given to reinforce learning.

Class #7 - Reflection paper from class 6 is due.

Rule 41 - Eligibility Criteria - What are the guidelines for eligibility?

Rule 42 - Determination of Special Education Services - Case Conference Committee procedures / requirements, IEP components, IEP implementation, LRE, homebound services.

A short quiz will be given to reinforce learning.

Class #8 - Reflection paper from class 7 is due.

Rule 42 continued.

A short quiz will be given to reinforce learning.

Class #9 - Reflection paper from class 8 is due.

Rule 43 - Related Services; Transitions; Transfer of Rights

Rule 44 - Discipline Procedures - An in depth discussion of the legal requirements for discipline, suspension / expulsion, FBA/BIP, manifestation determinations.

Class #10 - Reflection paper from class 9 is due.

Rule 44 - Discipline procedures - continued.

Participants will work in small groups to critique and improve the FBA/BIPs shared by other participants.

There will be a short quiz to reinforce the learning.

Class #11 - Reflection paper from class 10 is due.

Problem solving - Participants are expected to bring an issue to discuss. It may be something that has come up during the year or an issue that is still unclear. The class will attempt to come up with a solution based on Article 7.

Class #12 - Reflection paper from class 11 is due.

Rule 45 - Complaints, Mediation, and Due Process Procedures - Presentation and discussion of procedures for mediation, complaints, due process hearings, and other related topics.

Rule 46 - Child Court and Data Collection- Presentation and discussion of requirements involving child court procedures and required data collection.

Rule 47 - State Funding of Excess Costs

Participants will be required to bring a completed IEP to the next session. The IEP will be critiqued and reviewed by peers.

Class #13 - Final Project

Participants will present a completed IEP. Each IEP will be reviewed by the group to determine if it will withstand a legal challenge.

Class #14 - Final Project - continued

ADDITIONAL REQUIREMENT: All participants are expected to attend one workshop on the changes to Article 7. Dates and times will be provided.

Course requirement --

Attendance and participation -	30 hours
Attendance at outside workshop on Article 7-	8 hours
Outside reading and analysis -	50 hours
Weekly reflections-	15 hours
Development of example IEP -	2 hours

Develop IBA (including data collection) -

10 hours

Develop IEP -

8 hours

Final project -

20 hours

Total for all participants -

143 hours

Additional requirements for participants who wish to receive 3 credit hours from IUSB:

Development of training to share information with other school staff - 10 hours

Evidence of in-service training to other school personnel - 5 hours

Evidence of the completion of 3 complete IEPs 13 hours

Evidence of the development of 3 completed IBA/IBIP 13 hours

All projects must be submitted in portfolio form. Total hours for credit 198 hours

THE INSTRUCTOR CLASS FOR ANZICL 7 CLASS.

David Walker
226 N. Michigan St.
Argos, IN 46501
574-892-9308
dwalker@iessse.k12.in.us

Education:

Indiana University South Bend Teacher certification program
Secondary Social Studies - Seriously Emotionally Handicapped - 2004

Eastern Illinois University MS Education 1983

Indiana State University BS Criminology 1980

Certifications:

Licensed Clinical Social Worker

Teacher License - Secondary Social Studies / Seriously Emotionally Handicapped

Higher Education Professional Experience:

Instructor - Understanding and Utilizing Indiana Special Education Law : 2006-07, 07-08

K-12 Professional Experience:

1994-Present: Coordinator of Programs for Students with Emotional Disabilities
Joint Educational Services in Special Education

2006: Presenter - Indiana Conference on Students with Emotional Disabilities
Nashville, IN

Additional Training / Workshops

National Institute on Legal Issues of Educating Individuals with Disabilities 2007

Member - Indiana Council of Administrators in Special Education (ICASE)
Annual Spring ICASE Conference 2003, 2004, 2006
Annual Fall ICASE Conference 2005, 2004, 2000, 1998

Creative Problem Solving - 2005

IESSSE Autism Team Training - 2004, 2007

Facilitated IEP Training - 2004

Annual Conference on Educational Programs for Students with Emotional Disabilities -
2008, 2006, 2005, 2004, 1998, 1997

Effective Transition Services for Young Adults with Emotional and Behavioral
Challenges - 2004

Academy 2002 - Leadership and Education for Administrators of Special Education

Childhood-Onset Bipolar Disorder Conference - 2002

Improving Student Behavior & Achievement II - 2002

Asperger's Syndrome - Social Language Groups and Successful Teaching - 2002

Working with Kids with Disruptive Behaviors - 2002

Improving Student Behavior and Achievement I - 2001

Positive Behavior Support and Functional Behavioral Assessment- 2000

Crisis Prevention Institute - Instructor Certification 2000

Psychopathic Kids - 2000

School Wide Positive Behavior Support Systems - 2000

Indiana Alternative Education Conference - 2000

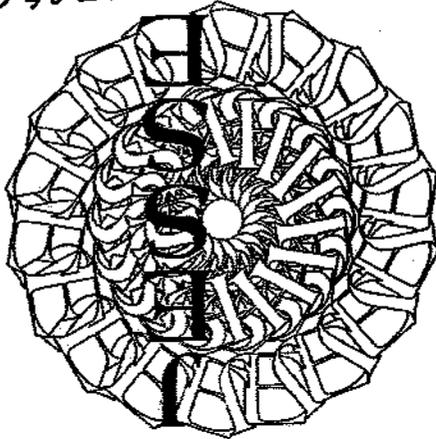
A Practical Approach to Section 504 ... for Public School Administrators - 1996

Assessment of Emotional Handicaps - 1996

Lilly Foundation Teacher Creativity Fellowship - 2008

Joint Educational Services in Special Education
Bob Wise, Director of Special Education
P.O. Box 418
324 N. Kingston Rd.
Plymouth, IN 46563
574-936-2627
1-800-388-0054

DIRECTOR WAS PRESENT AT
ALONG WITH MYSELF AT
THE 11/22/11 CLASS.



Posted 9-4-08 Indiana Dept. of Education Website

SAMPLE COPY

INDIANA DEPARTMENT OF EDUCATION
NOTICE OF PROCEDURAL
SAFEGUARDS AND
PARENT RIGHTS IN SPECIAL
EDUCATION

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Use of public and private ins.

- OK to bill Medicaid/ins. - however
- Parents are not required to: enroll / pay
- Use benefits that decrease lifetime cov...
- Pay for extra services
- Pay increased premiums
- Risk loss of eligibility for waivers

State interagency agreements

- Applies to programs run by:
- In state dept. of health
- FSSA - disability & rehab / MH & Addict...
- DCS / DOC / ISD / ISB
- Private agency (day treatment)
- Interagency agreements (FAPE)
- Medicaid is ok
- If local agency does not provide FAPE...LEA

24
27

Organizational & administrative

- Must provide FAPE to : ages 3-22 *
- SWD / have not received a diploma
- Are not parentally placed in non-pub
- FAPE ends at end of school year of 22 yrs
- Includes elementary / secondary / early ch.
- Many ways to organize for services

Scope

- Ages 3-22 (end of school year)
- Applies to all public schools
- Charter schools
- Sp ED planning districts
- State agencies
- Other public agencies

Rule 33 - General Provisions

Indiana Special Education
Law - 2008 Revision
David Walker MS, LCSW

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SUBSTANTIAL
BANKRUPTCY

MEMORANDUM

Law Offices
Michael E. Halpin
5590 Broadway
Merrillville, IN 46410-2633

Tel: 219.981.1010
Fax 219.981.3132
E-mail mehalpin@juno.com

September 30, 2011

Mr. Barry & Ms. Phyllis Shear
562 Woodlawn
Valparaiso, IN 46385

Re: **Bankruptcy of Shear**
Case No. **09-20128-jpk**

Dear Barry & Phyllis:

I am very sorry to hear about your condition. I hope that the surgery was a success, and that your recovery is progressing.

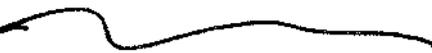
In my capacity as your attorney, I need some practical information on the financial implications concerning this matter. Please advise me if there has been a reduction in pay during this period, and if Phyllis is going to return to work. There are provisions in Bankruptcy for hardship discharges.

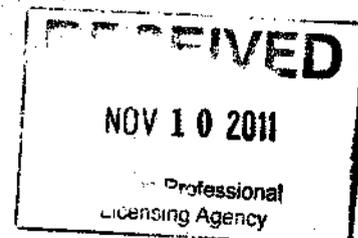
Enclosed is the Trustee's Report for the period of March 1, 2011 through August 31, 2011. In reviewing same, the remaining debt is to Americredit, which I believe is the automobile, the Internal Revenue Service, and the US Department of Education. We could possibly modify the payments if that were required. Based on your current payment plan, it appears you have approximately seven (7) months remaining to complete your Bankruptcy.

I will be reviewing your file to determine if I need to file any motions to avoid judgment liens that would attach to your real estate. When you own real estate and someone obtains a judgment against you, it attaches to the real estate, and becomes a lien on the real estate. Even though you file for Bankruptcy and discharge the debt personally, the lien on your real estate can survive the Bankruptcy, unless you file a motion to avoid the judgment lien. Again, I will be reviewing your file for all of the judgments I can locate, and I will file the motions to avoid liens. Please search your mind for anything you were sued on so we can make sure all the motions that are necessary are filed.

If you have any questions, please feel free to contact me.

Very truly yours,


Michael E. Halpin
ENCLOSURE as stated
MEH/ck



**OFFICE OF THE CHAPTER 13 TRUSTEE
PAUL R. CHAEL**

For Cases Filed Under Chapter 13 in the United States Bankruptcy Court
Northern District of Indiana

Office Address
401 West 84th Drive, Suite C
Merrillville, IN 46410
Tel: (219) 650-4015
Fax: (219) 650-4025

Payment Address
1770 Momentum Place
Chicago, IL 60689-5317
*Include case number
on payment

**TRUSTEE'S REPORT OF RECEIPTS AND DISBURSEMENTS
For the period March 1, 2011 through August 31, 2011**

Case No: 09-20128JPK

Debtor: BARRY SHEAR
562 WOODLAWN DR
VALPARAISO, IN 46385

Joint Debtor: PHYLLIS SHEAR
562 WOODLAWN DR
VALPARAISO, IN 46385

Case Filed: January 16, 2009

Required Plan Payments: \$4,203.33 MONTHLY

Case Confirmed: December 07, 2009

% To Unsecured Creditors: 0%

Attorney: MICHAEL HALPIN
(219) 981-1010

Delinquency: \$11,174.56

RECONCILIATION OF FUNDS RECEIVED AND DISBURSED SINCE CASE FILED

Plan Payments Received:		<u>126,100.00</u>
Disbursements:		
Principal	117,081.64	
Interest	1,275.39	
Attorney Fee	2,573.00	
Trustee Fee	<u>5,169.97</u>	
		126,100.00
Funds on Hand:		<u>0.00</u>
		<u>126,100.00</u>

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Barry/Phyllis Shear - Medical Expenses

Date of Service	Amount Due	Payable to
6/3/2011	\$183.47	Porter Hospital
6/20 & 7/5/2011	\$495.00	Pulmonary Specialists of NWI
6/23/2011	\$212.47	Porter Hospital
8/11/2011	\$658.23	Porter Hospital
8/11/2011	\$33.92	Radiologic Associates NW IN PC
8/12/2011	\$49.03	University of Chicago Medical Center
8/12/2011	\$135.81	University of Chicago Physicians Group
8/22/2011	\$20.00	University of Chicago Medical Center
8/29/2011	\$571.01	University of Chicago Medical Center
TOTAL DUE	<u>\$2,358.94</u>	

THIS LIST IS JUST GETTING GOING
 MOST OF THE BILLS W OUR CO-PAY HAVE NOT
 YET BEGUN TO COME IN. GROWING!

Barry Shear 11/5/2011

SUBSTANTZATES CANCER & SURGERY

University of Chicago Medical Center 5841 S Maryland Chicago, IL 60637

Shear, Phyllis MRN: 3219211 (Acct: 332806421) (62Yrs F)

Status: Authenticated

Operative Report signed by Seiko Diane Yamada, M.D. at 09/13/11 1555

Author: Seiko Diane Yamada, Service: (none) Author Type: ATTENDING
M.D.

Filed: 09/13/11 1559 Note 09/08/11 1755
Time:

Related Original Note by: Seiko Diane Yamada, M.D. filed at 09/08/11 2041

Notes:

Trans 5669736MS-1 Trans Available
ID: Status:

Admission Date: 09/08/2011

Date of Surgery: 09/08/2011

Age: 62 Sex: F

Attending Surgeon: S. Diane Yamada, m.D.

Resident Surgeon: Nidhee Mather, MD

STATEMENT OF ATTENDING SURGEON'S PRESENCE:

I was present for the entire procedure

ASSISTANTS:

Jessica Hunn, MD

PREOPERATIVE DIAGNOSIS:

Grade 2-3 endometrioid adenocarcinoma.

POSTOPERATIVE DIAGNOSES:

Grade 2-3 endometrioid adenocarcinoma.

OPERATIONS PERFORMED:

1. Robotic-assisted vaginal hysterectomy with bilateral salpingo-oophorectomy.
2. Omental biopsy.
3. Bilateral pelvic lymphadenectomy.
4. Right periaortic lymph node dissection and left common iliac lymph node dissection.

ANESTHESIA:

General endotracheal.

COMPLICATIONS:

None.

ESTIMATED BLOOD LOSS:

200 mL.

FLUIDS:

3700 mL of crystalloid.

DRAINS:

Foley draining blue-stained urine to gravity, as we had given an ampere of indigo carmine during the surgery and there was noted to be no extravasation.

COUNTS:

Sponge and needle counts were correct x3.

INDICATIONS FOR SURGERY:

This is a 62-year-old who has a history of 2nd-degree rectocele and stress urinary incontinence who developed postmenopausal bleeding and underwent an endometrial biopsy that revealed grade 2-3 endometrioid carcinoma with squamous metaplasia. She was counseled about undergoing the above-named procedure. She understood the risks and potential complications, which included, but were not limited to, risk of infection, bleeding, damage to adjacent organs, nerves, and vessels, as well as DVT formation, and she was willing to proceed.

OPERATIVE FINDINGS:

1. Omental adhesions to the fundus of the uterus.
2. Very large left lower uterine segment fibroid.
3. Fundal calcified fibroid approximately 5 cm, which made extraction through the uterus through the vagina exceedingly difficult.
4. Grossly normal-appearing ovaries and fallopian tubes bilaterally.
5. No evidence of intraperitoneal disease.
6. No grossly abnormal pelvic or periaortic lymph nodes.

OPERATIVE PROCEDURE:

The patient was taken to the operating room, where general endotracheal anesthesia was administered. She was placed in the dorsal lithotomy position with pneumatic compression stockings in place. She had no pressure points noted. She was secured to the bed and intubated without difficulty. She had been given 5000 units of heparin, as well as antibiotics prior to the start of the procedure. The uterus was sounded. A stitch was placed through the cervix and a standard V-Care device was inserted through the cervical os to the uterine fundus and secured to the V-Care cup. A balloon occluder was also placed in the vagina. A Foley catheter was placed. A 10-mm incision was then made for the camera arm of the robot at approximately 28 cm above the umbilicus. Arms 1 and 3 were then placed right lateral and further right lateral to the camera trocar. Arm #1, which was an 8-mm trocar, was placed approximately 12 cm left lateral to the camera trocar and then a 10/12-mm accessory port was placed just below the left costal margin in the left midaxillary line. These were placed under direct visualization and the camera port was placed under direct visualization using the Visiport device. The patient was then turned in a 45-degree angle. The bed was secured. She was then placed in as steep Trendelenburg as the bed would allow. She was tolerating this adequately. The robot arms were then docked, and the instruments were then placed. The distal aspect of the omentum was removed since it was densely adherent to the uterus and, on the right side, the retroperitoneum was entered lateral to the infundibulopelvic ligament and along the line of Toldt. This was carried superiorly and inferiorly down to the level of the round ligament. The ureter was identified. The pararectal space on the right side and the paravesical spaces were created. The right infundibulopelvic ligament was then transected after creating an avascular window on the right side and ensuring that the ureter was well out of the way. The right infundibulopelvic ligament was then dissected off of the medial leaf of the peritoneum to the level of the right uterine vessels. The incision in the peritoneum was then carried across the vesicouterine fold of the peritoneum and the bladder was retracted inferiorly. On the right side, a right lower uterine segment fibroid needed to be elevated off of its peritoneal attachments in order to allow for identification of the right uterine artery and vein, which were cauterized using the PK device and then transected. This same procedure was then carried out on the left side. There were some sigmoid adhesions that needed to be taken down sharply, but the left retroperitoneum was entered. The left ureter was identified and noted to be well out of the way. An avascular window was created below the

Professor

- DD: 09/08/2011 17:55:10 CST/31/UD22
DT: 09/08/2011 17:55:13 CST/MIS2007/5669736
JOB#: 185126

09/08/11 2041 Transcription: Operative Report By Seiko Diane Yamada, M.D.



APPLICATION FOR APPROVAL OF CONTINUING EDUCATION COURSES FOR PSYCHOLOGISTS

State Form 50257 (R2 / 9-07)

RETURN THIS APPLICATION TO:
INDIANA STATE PSYCHOLOGY BOARD
PROFESSIONAL LICENSING AGENCY
 402 West Washington Street, Room W072
 Indianapolis, Indiana 46204
 Telephone: (317) 234-2051
 E-mail: pla@pta.in.gov

* Disclosure of your Social Security number is MANDATORY according to IC 4-1-8-1 and this application cannot be processed without it.

FOR OFFICE USE ONLY		
Date reviewed (month, day, year)	Decision:	Initials

THIS FORM IS TO BE USED BY LICENSED PSYCHOLOGISTS ONLY. IT IS NOT INTENDED FOR USE BY APPLICANTS FOR APPROVAL AS A SPONSOR OF CONTINUING EDUCATION.

Name of applicant Heather Lampton	License number 20041895A
Address (number and street, city, state, and ZIP code) 41650 Old Cleveland Rd. South Bend, IN 46688	
Telephone number (daytime) (574) 232-8808	E-mail address hlampton@idoc.in.gov

Title of program attended Suicide Prevention Course
--

Name of sponsor IN Department of Correction
--

Name of lecturer Dr. Brad Huffy

Location of program New Castle, IN

Date of program (month, day, year) July 8, 2011
--

Type of program:
<input type="checkbox"/> audio-visual instructional program <input type="checkbox"/> formally organized course <input checked="" type="checkbox"/> workshop <input type="checkbox"/> seminar <input type="checkbox"/> post doctoral institute <input type="checkbox"/> symposia <input type="checkbox"/> other (describe) _____

Number of hours attended 8	Number of credit hours claimed CATEGORY I: 6 CATEGORY II: _____
-------------------------------	--

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APPLICATION AFFIRMATION

I hereby swear or affirm under the penalties of perjury that the statements made in this application are true, complete, and correct.

Signature of applicant 	Date signed (month, day, year) 9/20/11
----------------------------	---

(Continued on the reverse side)

AUTHORIZATION FOR RELEASE OF INFORMATION

I hereby authorize and direct any person, firm, officer, corporation, association, organization, or institution to release to the Professional Licensing Agency, or the Indiana State Psychology Board, any files, documents, records, or other information pertaining to the named applicant requested by the Agency or the Board or any of their authorized representatives, in connection with processing this application for approval of a continuing education course.

I hereby release the aforementioned persons, firms, corporations, associations, organizations, and institutions from any liability with regard to such inspection or furnishing of any such information.

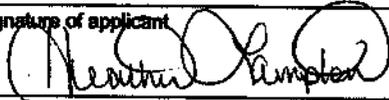
I further authorize the Professional Licensing Agency or the Indiana State Psychology Board to disclose to the aforementioned organizations, persons, and institutions any information which is material to my application, and I hereby specifically release the Agency, and the Board, from any and all liability in connection with such disclosures.

A photostatic copy of this authorization has the same force and effect as the original.

AFFIRMATION

I hereby swear or affirm that I have read the above statements and agree to same.

Signature of applicant



Date signed (month, day, year)

9/20/11

NOTICE

In compliance with IC 4-1-6, this agency is notifying you that you must provide the requested information or your application will not be processed. You have the right to challenge, correct, or explain the information maintained by this agency. The information you provide will become public record.

INSTRUCTIONS

Complete this form for any continuing education activity that you attend or participate in which has not received prior approval by the board. This form cannot be used for approval of professional supervision. There is a separate form for review of professional supervision.

Submit this form with the appropriate documentation including the name of the sponsor, a description of the course as approved by the course sponsor, the date and location of the course, the names of the presenters and their credentials, verification of attendance, and the number of hours for which credit is requested. You must send a copy of the course brochure if one was published. If a brochure was not published, please notify the board of this fact. Do not send the original verification of attendance to the board. You must maintain verification of attendance for five (5) years. If you are audited by the board and do not have verification of attendance, you will not be granted credit for attending the course even if this request form is approved by the board.



STATE OF INDIANA

Department of Correction

Division of Staff Development Emergency Operations



Hereby Certifies That

HEATHER LAMPTON

Has Successfully Completed

T4T SUICIDE PREVENTION COURSE

On this date:

July 8, 2011

Handwritten signature of Nancy Miller in cursive.

Program Supervisor



Handwritten signature of the Executive Director in cursive.

Executive Director, Staff Development Emergency Operations



APPLICATION FOR APPROVAL OF CONTINUING EDUCATION COURSES FOR PSYCHOLOGISTS

State Form 50257 (R2 / 9-07)

RETURN THIS APPLICATION TO:
**INDIANA STATE PSYCHOLOGY BOARD
 PROFESSIONAL LICENSING AGENCY**
 402 West Washington Street, Room W072
 Indianapolis, Indiana 46204
 Telephone: (317) 234-2051
 E-mail: pla6@pla.IN.gov

* Disclosure of your Social Security number is MANDATORY according to IC 4-1-8-1 and this application cannot be processed without it.

FOR OFFICE USE ONLY		
Date reviewed (month, day, year)	Decision:	Initials

THIS FORM IS TO BE USED BY LICENSED PSYCHOLOGISTS ONLY. IT IS NOT INTENDED FOR USE BY APPLICANTS FOR APPROVAL AS A SPONSOR OF CONTINUING EDUCATION.

Name of applicant <i>Heather Lampton</i>	License number <i>20041895A</i>
Address (number and street, city, state, and ZIP code) <i>41650 Old Cleveland Rd. South Bend, IN 46628</i>	
Telephone number (daytime) <i>(574) 232-8808</i>	E-mail address <i>hlampton@idoc.in.gov</i>

Title of program attended <i>Heating volatile children</i>
Name of sponsor <i>Family and Children's Center</i>
Name of lecturer <i>Dr. J. Stuart Ablon</i>

Location of program <i>Mishawaka, IN</i>
Date of program (month, day, year) <i>Sept. 16, 2011</i>

Type of program:	
<input type="checkbox"/> audio-visual instructional program <input type="checkbox"/> workshop <input type="checkbox"/> post doctoral institute <input type="checkbox"/> other (describe) _____	<input type="checkbox"/> formally organized course <input checked="" type="checkbox"/> seminar <input type="checkbox"/> symposia



Number of hours attended <i>8</i>	Number of credit hours claimed CATEGORY I: <i>6</i> CATEGORY II: _____
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APPLICATION AFFIRMATION

I hereby swear or affirm under the penalties of perjury that the statements made in this application are true, complete, and correct.	
Signature of applicant <i>Heather Lampton</i>	Date signed (month, day, year) <i>9/20/11</i>

(Continued on the reverse side)

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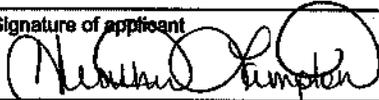
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Date signed (month, day, year)

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The Children's Campus

Hope for kids and families
who need it most.



Certificate of Attendance

Presented to:

Heather Lampton

For Completion of:

Healing Volatile Children

J. Stuart Ablon, PhD

Toni Henke-Wheeler, ACSW, LCSW

John Antonucci, BA, CSAYP

Karen Palmer, MSW, CSAYC

September 16, 2011 ~ South Bend, IN

6 Contact Hours, Category I
LSW, LCSW, LMET, LMHC



Kris Ermeti, LCSW

Kris Ermeti, MSW, LCSW, Executive Director

Parenting, Teaching & Treating
Challenging Kids

J. Stuart Ablon, Ph.D.

Think:Kids
RETHINKING CHALLENGING KIDS



MASSACHUSETTS
GENERAL HOSPITAL

Kids do well if they can...

*...if they can't,
we need to figure out why
so we can help*

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*Your explanation guides your
intervention...*

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Conventional Wisdom

Because of passive, permissive, inconsistent parenting, kids learn that their challenging behavior is effective at getting something (e.g., attention) or escaping or avoiding something (e.g., work).

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Logical Intervention

Train and motivate compliant behavior through intensive, consistent programs of rewards, punishments and ignoring.

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Specific Components of Operant Approach

- List of Target Behaviors (priority is compliance)
- Menu of Rewards and Punishments (differential reinforcement)
- Currency System

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Limits of Operant Strategies

What Operant Strategies Can Do:

- teach basic lessons / information
- facilitate extrinsic motivation

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Limits of Operant Strategies

• facilitate teaching/learning of basic lessons: right from wrong

- It is highly likely that the child already knows the basic lessons (don't hit, don't swear, don't explode), and is already aware of the consequences for these behaviors
- Reward and punishment programs can teach basic lessons but weren't ever intended to teach complicated skills

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Limits of Operant Strategies

• facilitate extrinsic motivation (to perform behaviors one is already capable of consistently performing)

- If a child does not yet have the skills to behave adaptively, adding incentives is unlikely to accomplish the mission
- Motivational programs make the possible more possible, but they don't make the impossible possible
- Motivational programs have side-effects:
 - The more extrinsic motivation is applied, the less intrinsic motivation the child develops
 - The more you motivate someone to do something, the more you teach them that they aren't trying hard enough
- It is highly likely that the child is *already* motivated (not to be miserable)

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Limits of Operant Strategies

• Token economy systems have been mainstays of treatment in therapeutic programs for many years but ...

- There is very little empirical evidence to suggest they are effective in such programs and lots of evidence to suggest that they can actually be counter-productive

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Unconventional Wisdom: It's a Learning Disability

Research in neurosciences has shown that challenging kids are delayed in the development of crucial cognitive (thinking) skills -- in areas like flexibility/adaptability, frustration tolerance, and problem-solving -- or have significant difficulty applying these skills when they are most needed.

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Logical Intervention

Treat challenging behavior like you would any other learning disability:

- Assess which skills are lagging
- Use a different approach to teach them in increments the kid can handle

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Definition of Challenging Behavior

- Lagging skills alone do not cause challenging behavior
- Rather, challenging behavior -- including explosions, implosions and everything else in between -- occurs when a demand placed upon someone requires skills to handle the demand in an adaptive manner that person does not fully possess
- It takes two to tango: the pairing of a skills deficit and a problem that those skills would be required to solve

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Logical Intervention

- Identify the specific *skills deficits* contributing to the challenging behavior and then teach those skills
- Identify the *problems* you want to solve that precipitate the challenging behavior and work towards solving them.

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Logical Intervention

- You only have two levers to pull:
 - The *problems* the kid is having trouble handling
 - The *skill set* the kid has to handle those problems

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Implications

Because research has shown that challenging behavior is the byproduct of a learning disability of sorts, the emphasis should be entirely different...

- **assessment "raw material"** (thinking skills and precipitants, not behavior and aftermath)
 - What's going on in this kid's head that we wish wasn't?
 - What isn't going on in this kid's head that we wish was?
- **goals of intervention** (teaching thinking skills and solving problems, not teaching adults to be more effective at imposing their will and ensuring that kids have the incentive to comply)

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The Elevator Pitch

- Kids do well if they *can* - not if they want to
- Research in neurosciences shows challenging kids lack the *skill* - not the *will* - to behave well
 - What skills? Problem-solving, frustration tolerance and flexibility. In other words, its like a "learning disability"
- So the goal is to teach those skills
- How do we do it? Using a problem-solving process that builds relationships as well

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Behind most challenging behavior is some type of problem to be solved and some type of skills to be trained.

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Mantra

*Don't let any
meltdown go to waste!*

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Approach Ingredients

1. Answer the question, "What skills to be trained and and problems to be solved are setting the stage for the challenging behavior?"
2. Know your options for responding to problems/ unmet expectations and what each option accomplishes
3. Successfully execute Plan B

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Research on Skills Deficits

There is a rich literature linking challenging behavior with deficits in the following areas of thinking skill:

- Executive skills
- Language processing skills
- Emotion regulation skills
- Cognitive flexibility skills
- Social thinking skills

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Can't vs Won't

- Compliance is a skill - not a choice
- It is always safer to assume the problem is a result of lack of skill rather than lack of will

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Why the Emphasis on Skills?

Focusing on the lagging skills helps adults get on the same page to:

- understand that a child's maladaptive behavior is a form of learning disability and not intentional, goal-oriented, manipulative, or attention-seeking
- identify specific skills that need to be trained
- understand why incentive programs haven't made things better - and won't
- understand why they need a different approach
- steer clear of dead-end explanations

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How did the kid get this way?

- What's the cause of skills deficits? Nature? Nurture? Yes, and it probably doesn't matter! - **What does matter is what skills the kid lacks and how we can help him/her develop them**

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Dead-End Explanations

- "He has bipolar disorder"
- "He has fetal alcohol syndrome"
- "She's adopted"
- "He just wants attention"
- "She just wants her own way"
- "He just wants control"
- "He's manipulative"
- "She has a mental illness"
- "He has a bad attitude"
- "She's making bad choices"
- "He won't cooperate"

Definition

Cooperate: collaborate, come together

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Explanation Litmus Test

- Is **something** actionable – something you can work on?
- In six months, we hope s/he will be better at ?

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It Takes Two to Tango:
Problems to be Solved

- Before intervening, you need one more crucial type of information: the situations in which the child tends to have the most difficulty
- Also known as: precipitants, antecedents, contexts, demands, expectations, setting events, triggers, issues or **problems you want to solve**
 - Examples at home: *homework, screen time, diet, getting up in the morning, bedtime, curfew, sibling interactions etc.*
 - Examples at school: *circle time, recess, gym, lunch, riding on the bus, getting down to work, staying on task, writing, etc.*

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It Takes Two to Tango:
Problems to be Solved

- What's the difference between a *problem to be solved* and a *skills deficit*?
 - A *problem to be solved* is the demand placed upon a child that they have difficulty handling (e.g., *homework, getting down to work after lunch etc.*)
 - A *skills deficit* is the reason *why* the child has difficulty handling the demand (e.g., *difficulty handling transitions, difficulty doing things in a logical sequence etc.*)

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Why the Emphasis on
Problems to be Solved?

You can't prevent if you can't predict!

Creating a good list of predictable problems to be solved helps adults:

- Anticipate difficulties before they happen
- Prioritize what they want to work on first
- Shift from reactive to proactive interventions

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Assessing Skills and Problems to be Solved

Goal of assessment is to create two lists:

- 1. A list of problems to be solved**
 - The more specific the problem to be solved, the easier it will be to:
 - Hypothesize about which lagging skills might explain the problem
 - Start a problem solving discussion
- 2. A list of skills to be trained**
 - Don't obsess. Just hypothesize for now to promote a more compassionate helpful view

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What's the Difference?

	Problems	Skills
What are they?	Antecedents, precipitants, triggers, problems you want to solve	The culprits causing the problems
How do you assess them?	Situational analysis: who, what, when, and where (the more specific the better)	Hypothesizing using the Thinking Skills Inventory (the why)
Why create these lists?	Starting point for collaborative problem solving	Fosters understanding and compassion (the shift in thinking)

Skills Deficits and Problems to be Solved

Behavior

↓

Problem to be Solved

↓

Skills Deficit

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Skills Deficits and Problems to be Solved

Challenging behaviors are highly predictable.

Goal: Not to be surprised!

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Getting Ready

- Identifying skills deficits is primarily for the purpose of helping adults understand why the child is exhibiting challenging behavior
- The goal is not to obsess about nailing down specific lagging skills - which may not even be possible early on - but rather to use skills deficits to promote a more accurate and compassionate understanding of the child's difficulties
- Obsess more about your list of problems to be solved because they are the entry point for intervention

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Treatment Ingredients

1. Answer the question, "What skills to be trained and problems to be solved are setting the stage for the child's maladaptive behavior?"
2. Know your options for responding to problems/ unmet expectations and what each option accomplishes (or doesn't)
3. Successfully execute Plan B

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Expectations

- Expectations are a good thing as long as they are clear (taught) and realistic
 - It is hard for a child to meet an expectation that they aren't aware of!
- If your expectations are being met, you're happy
- If your expectations aren't being met, you've got a problem and you need a plan
 - First step is knowing what your options are and what each option accomplishes (or doesn't!)

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Goals of Intervention

1. Pursue high priority expectations
2. Reduce challenging behavior
3. Clarify the skills that needs to be taught and start teaching them
4. Solve chronic problems so they don't keep coming up
5. Create (or restore) a helping relationship

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Three Plans (Your Options for responding to Problems/Unmet Expectations)

- Plan A: Impose adult will**
- Plan B: Solve the problem collaboratively**
- Plan C: Drop it (for now, at least)**

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Three Plans (Common Approaches to Problems/Unmet Expectations)

- Plan A: Impose adult will**
 - e.g., "If you don't then ...", "1-2-3"
 - **What goals are you pursuing:**
 - Pursuing your expectations
 - Reduce challenging behavior
 - Create (or restore) a helping relationship
 - Identify and teach lagging thinking skills
 - Solve problems so they don't keep coming up

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Three Plans (Common Approaches to Problems/Unmet Expectations)

- Plan C: Drop it (for now, at least)**
 - **Being strategic – not giving in**
 - **What goals are you pursuing:**
 - Pursue your expectations
 - Reducing challenging behavior
 - Create (or restore) a helping relationship
 - Identify and teach lagging thinking skills
 - Solve problems so they don't keep coming up

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Three Plans (Common Approaches to Problems/Unmet Expectations)

- Plan B: Solve the problem collaboratively**
 - **Work towards solving the problem in a mutually satisfactory and realistic manner**
 - **What goals are you pursuing:**
 - Pursuing your expectations
 - Reducing challenging behavior
 - Clarifying skills to be taught and teaching them
 - Solving chronic problems so they don't keep coming up
 - Creating (or restoring) a helping relationship

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Goals Achieved by the Three Plans

GOALS	PLAN A	PLAN C	PLAN B
Try to get your expectation met	X		X
Reduce challenging behavior		X	X
Teach skills			X
Solve problem			X
Build relationship			X

Why Plan B?

- The child has shown he needs someone to serve as his "tour guide" for navigating problems and regulating emotions
- Over time, teaches the child skills so he won't need the help for the rest of his life

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Handling Resistance

Follow their affect! What does the person care most about?

- Pursuing their expectations?
- Reduce challenging behavior?
- Teaching skills?
- Solving problems?
- Creating (or restoring) a helping relationship?

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Clearing up Misconceptions

- The Plans aren't needed unless you have an unmet expectation
- Setting an expectation is not the same as imposing your will when your expectation isn't met
- Plan B is not "picking your battles" or the average of Plans A and C
- Plan B is not a "technique"
- Plan B takes much less time than Plan A

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An Important Reminder:

"Any problem/unmet expectation that can be handled using Plan A can also be handled using Plan B."

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What about safety issues?

The more severe or unsafe the behavior, the more important it is to solve the problem or work on the skills deficit causing the behavior in the first place.

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Prioritizing Problems to be Solved

- Once you have identified the problems you want to solve, you will need to prioritize which you want to work on first
- If you have a good relationship with the child, you can work on:
 - *The problems contributing to the most challenging or the most frequent maladaptive behavior*
- If you don't have much of a relationship yet, it needs restoring or you are new to this, you might want to start small with:
 - *The problems most conducive to successful resolution*
 - *Or the problems the child is most invested in resolving*

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Prioritizing

- After you decide which problems you want to work on using Plan B, you will need to decide what Plan you will use for the other problems in the meantime
- Besides Plan B, you only have two other options!
- Neither Plan A nor Plan C will solve the problem, teach a skill or build a helping relationship
- What's more important to you in the meantime: Pursuing your expectation or keeping the kid calm?

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Treatment Ingredients

1. Answer the question, "What thinking skills deficits and problems to be solved are setting the stage for this child's challenging behavior?"
2. Know your options for responding to problems/ unmet expectations and of what each option accomplishes
3. **Successfully execute Plan B**

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Managing Expectations

- Learning disabilities aren't fixed overnight
- The skill development piece of Plan B is going to take time
- You can't rush skill development

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Reminder!

Challenging behaviors are highly predictable.

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Plan B Timing

EMERGENCY B
Takes place in the midst of challenging behavior occurring (yet again); can be useful for solving problems, but more useful for crisis management/ de-escalation

PROACTIVE B
Takes place well before challenging behavior recurs (crisis prevention); gives you time to plan and think; more likely to understand and solve problems

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Plan B Ingredients

1. Empathy / Understanding
2. Define the Problem
3. Invitation / Brainstorming

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Plan B Ingredients

1. Empathy / Understanding
2. Define the Problem
3. Invitation / Brainstorming

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Empathy / Understanding

- **GOAL:** to gather information to achieve as clear an understanding of the kid's concern or perspective about the problem or issue as possible while showing that you care
- **STARTS:** with a *neutral* observation ("I've noticed that..." "It seems like..." or "It looks as if...") followed by an inquiry ("What's up?")
- **THEN WHAT:** continues with attempts at further clarification. Detective work requiring probing and drilling down using a combination of only 4 tools:
 - clarifying questions
 - educated guessing
 - reflective listening
 - reassurance

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Empathy / Understanding

- **TIPS for starting off on the right foot:**
 - Your observation should be about the *problem to be solved* rather than the *maladaptive behavior* you want to reduce
 - Steer clear of mentioning the behavior itself
 - Try not to blame or assume
 - Instead try to stick with the facts or externalize the problem

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Empathy / Understanding

- **TIPS for drilling down:**
 - *Solutions* are not concerns. Unearthing concerns opens up more options for potential solutions.
 - *Behind most maladaptive solutions, are reasonable concerns*
 - Don't rush!
 - If you get information, don't move on. Delve deeper. The more specific the concern the better.
 - If the child does not have a concern, you can be sure s/he has a perspective
 - Empathizing is neither agreeing or disagreeing - it is understanding.
 - Be curious and prepared for surprises.

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Empathy / Understanding

- **EXAMPLES of clarifying questions:**
 - How so? Why? What's going on? How come?
 - I don't quite understand. I'm confused. Can you help me understand?
 - Is there something I'm not understanding?
 - Can you tell me more about that?
- **EXAMPLES of educated guessing (if questions aren't getting you anywhere):**
 - Mind if I take a guess ...
 - Let me know if you think I'm getting warm
 - Some other kids I know ...
 - Play "20 questions"

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Empathy / Understanding

- **EXAMPLES of reflective listening:**
 - Am I right that ...? What I hear you saying is ...?
 - Let's see if I've got this straight ... Sounds like you're saying
- **EXAMPLES of reassurance (if child escalates or shuts down):**
 - I'm not saying no ... I'm not saying you have to.
 - I'm not saying you can't ... You are not in trouble.
 - I just want to understand ...I know there must be an important reason.
 - I know you are trying hard.
 - I really want your opinion, not just what you think I want to hear.

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Empathy / Understanding

- **How do you know when you are READY TO MOVE ON?**
 - Do you have a clear understanding of the child's concern or perspective?
 - Can you envision some possible alternative solutions?
 - Have you learned something new?

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Plan B Ingredients

1. Empathy / Understanding
- 2. Define the Problem**
3. Invitation/ Brainstorming

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RETHINKING CHALLENGING KIDS

Define the Problem

- **GOAL:** to ensure that the adult's *concern / perspective* is on the table
- **STARTS:** with the adult(s) clarifying their concerns / perspective *before* initiating the conversation (requires planning and forethought!)
- **THEN WHAT:** after the child's concern / perspective is clarified, the adult expresses their concern by saying something like: "*The thing is*" or "*My concern is*" or "*What's important to me is*"

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Define the Problem

- **TIPS for clarifying adult concerns before initiating the conversation:**
 - Ask "*What's my / our concern about that? Why do we care about this?*"
 - *Behind most maladaptive solutions, are reasonable concerns*
 - Most adult concerns revolve around: *health, safety, learning or how the child's behavior affects others*
 - The more specific the concern the better
- **TIPS: what do you do if child "doesn't care" about the adult concern?**
 - He doesn't have to! He just needs to take it into consideration

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Define the Problem

- **How do you know when you are READY TO MOVE ON?**
 - You have *two* sets of concerns / perspectives on table
 - Two sets of solutions = a power struggle ("dueling solutions")

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Plan B Ingredients

1. Empathy / Understanding
2. Define the Problem
- 3. Invitation / Brainstorming**

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Invitation / Brainstorming

- **GOAL:** to *brainstorm* solutions together so as to address both concerns
- **STARTS:** with the adult recapping the concerns so as to summarize the problem to be solved ("*I wonder if there's a way that ...*" or "*I bet we can think of something that ...*")
- **THEN WHAT:** Bite your tongue! Give the child first opportunity to generate solutions ("*Do you have any ideas?*") – but resolution of the problem is a team effort (collaborative)

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Invitation / Brainstorming

- **TIPS** for brainstorming
 - Let him/her know you're just as invested in ensuring his/her concerns get addressed as you are in ensuring your concerns get addressed
 - Be optimistic!
 - Get as many ideas on the table as possible: there is no such thing as a bad idea!
 - Combine, expand, modify and build on ideas.
 - If the child does not have any ideas, you can suggest some to consider together
- **TIPS** for evaluating potential solutions
 - Simple litmus test: *Does it work for you? Does it work for me? Is it doable? If we do it, will it bring up any additional concerns?*

Invitation / Brainstorming

- **How do you know when you are READY TO MOVE ON?**
 - When you have a mutually satisfactory and realistic solution
 - Finish with an invitation to revisit the problem if the solution doesn't work

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Plan B Entry Ingredients (Practice)

- 1. Empathy / Understanding**
- 2. Define the Problem**
- 3. Invitation / Brainstorming**

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This is Hard!

- Early on, Plan B will feel like slogging through mud
- It will feel awkward to the child too!
- Over time, a Plan B "rhythm" should develop
- But Plan B is always an adventure – you never know where it may go! Its OK to switch gears mid-Plan B when something you learn trumps what you planned to talk about
- You don't have to finish all 3 ingredients in one discussion
- The first solution seldom solves the problem durably
- Difficult problems may require more than one discussion
- Sometimes it's necessary to take a break from the discussion and return to it later, after both parties have had more time to think
- "Processing" or "debriefing" is not the same as doing Plan B
- Initially, the child may not trust the adult or the process

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Plan B Preparation

- Since Plan B should be proactive you can plan ahead using the Plan B Worksheet
- Ask the following questions:
 - WHO will have the discussion? (considerations: relationship, experience, proximity)
 - WHAT problem to be solved is the focus?
 - WHEN will you have the discussion?
 - WHERE will you have the discussion (and while doing what)?
 - WHY are you having the discussion (what are our concerns)?
 - HOW will you get started?

Skills Taught while Solving Problems using Plan B

Problem solving through skills training

- Many skills are taught implicitly (indirectly) through the problem solving process using Plan B.
 - *Empathy / Understanding* trains identifying, clarifying and expressing concerns, separating affect
 - *Define the Problem* trains taking another's perspective, recognizing impact on others and how one comes across, empathy
 - *Invitation / Brainstorming* trains generation of solutions, anticipating and considering likely outcomes, moving off of original idea
 - **The entire proactive process trains organized, reflective, flexible thinking and problem solving**

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Indirect Skills Training

- Doesn't require child's agreement that they lack certain skills or that they want you to be the one to train them!
- Doesn't require transfer of skills to "real world"
- Trains multiple skills at the same time
- Automatically focuses on the skills that need the most work

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Adult Skills Training

The bad news: we adults have lagging skills too!

The good news: our initial attempts at Plan B usually reveal what skills we lack

- Every time adults try Plan B we are practicing our skills too

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Active Ingredients

Challenging behavior is reduced by:

- Achieving a clear understanding of a kid's skills deficits so as to promote more compassionate views and interactions
- Decreasing use of Plan A
- Increasing use of Plan C
- Attempting Plan B to solve problems and teach skills

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The Power of the Process

- Did Plan B work? While solving a problem using Plan B is an important goal, it is not the only goal
- The other goals (building a helping relationship and assessing and practicing skills) are achieved by the process not the outcome
- Before the problem gets solved, the Plan B process helps pursue expectations and reduces challenging behavior while building a helping relationship and assessing and practicing all kinds of problem solving skills together
- *There's no such thing as failed B!*

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What about Group Plan B?

- Can Plan B be used in a group setting?
 - Yes! Provided you work hard to create a prosocial group environment
- **Key themes:**
 - "Fair does not mean equal"
 - "In our classroom / group ...
 - everyone's working on something.
 - everyone gets what they need.
 - we do different things for different people.
 - we help each other.

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What about Group Plan B?

- **Group problem solving**
 - Good way to solve problems involving / impacting many people at once while everyone practices skills indirectly
- **Group direct skills training**
 - Kids can help each other practice certain skills

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Implementing in Systems: Lessons Learned

- **It's a process not an event or outcome**
- **Takes time (3-5 years!), patience and relentless persistence**
- **Good advice when hiking: "don't mistake a clear view for a short distance!"**
- **Involves some discomfort**
- **Requires commitment and good leadership**

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A Helping Relationship

- Regardless of therapeutic modality, the best predictor of success in helping people change is the **relationship** between helper and helpee
- Helping is messy and takes time
- Helping is a *working alliance*, a two-way collaborative process, a two-person team effort
- Helping is not something you do to kids; rather, it is a process that adults and kids work through together

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Important Themes

- Remain calmly optimistic and relentlessly persistent in the face of all odds
- All change is incremental
- *Even if you are on the right track, you will still get run over if you don't keep moving!* -- Will Rogers
- Don't wait for somebody else to start
- You are never alone...find your allies
- Never forget: It's about the kids

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at...

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www.thinkkids.org

Online at: WWW.THINKKIDS.ORG

- Read introduction to the approach
- View online training videos
- Register for introductory training
- Register for intensive certification training
- Make an appointment in our clinic
- Join or start a support group
- Join our social networking community
- Download research articles
- Download helpful materials
- Help spread the word on facebook and twitter

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REFRAMING CHALLENGING BEG





APPLICATION FOR APPROVAL OF CONTINUING EDUCATION COURSES FOR PSYCHOLOGISTS

State Form 50257 (R2 / 9-07)

RETURN THIS APPLICATION TO:
INDIANA STATE PSYCHOLOGY BOARD
PROFESSIONAL LICENSING AGENCY
 402 West Washington Street, Room W072
 Indianapolis, Indiana 46204
 Telephone: (317) 234-2051
 E-mail: pla6@pla.IN.gov

* Disclosure of your Social Security number is MANDATORY according to IC 4-1-3-1 and this application cannot be processed without it.

FOR OFFICE USE ONLY		
Date reviewed (month, day, year)	Decision:	Initials

THIS FORM IS TO BE USED BY LICENSED PSYCHOLOGISTS ONLY. IT IS NOT INTENDED FOR USE BY APPLICANTS FOR APPROVAL AS A SPONSOR OF CONTINUING EDUCATION.

Name of applicant Dennis R. Olvera, Ph.D. HSPP	License number 20010514A
Address (number and street, city, state, and ZIP code) PO Box 40. Carmel, IN 46082	
Telephone number (daytime) (317) 663-4659	E-mail address dolvera@indy.rr.com

Title of program attended What is Truly Restrictive?
Name of sponsor Indiana Association of Behavior Consultants

Name of lecturer Dennis R. Olvera, Ph.D. HSPP

Location of program Indianapolis, Indiana

Date of program (month, day, year) October 26, 2011

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Type of program:	
<input type="checkbox"/> audio-visual instructional program	<input type="checkbox"/> formally organized course
<input type="checkbox"/> workshop	<input type="checkbox"/> seminar
<input type="checkbox"/> post doctoral institute	<input type="checkbox"/> symposia
<input checked="" type="checkbox"/> other (describe) <u>Invited pre-conference address (Preparation time claimed as Category II credit. See attached documents.)</u>	

Number of hours attended 1.0 hours	Number of credit hours claimed CATEGORY I: _____ CATEGORY II: 2.5
--	---

APPLICATION AFFIRMATION	
I hereby swear or affirm under the penalties of perjury that the statements made in this application are true, complete, and correct.	
Signature of applicant 	Date signed (month, day, year) November 1, 2011

(Continued on the reverse side)

AUTHORIZATION FOR RELEASE OF INFORMATION

I hereby authorize and direct any person, firm, officer, corporation, association, organization, or institution to release to the Professional Licensing Agency, or the Indiana State Psychology Board, any files, documents, records, or other information pertaining to the named applicant requested by the Agency or the Board or any of their authorized representatives, in connection with processing this application for approval of a continuing education course.

I hereby release the aforementioned persons, firms, corporations, associations, organizations, and institutions from any liability with regard to such inspection or furnishing of any such information.

I further authorize the Professional Licensing Agency or the Indiana State Psychology Board to disclose to the aforementioned organizations, persons, and Institutions any information which is material to my application, and I hereby specifically release the Agency, and the Board, from any and all liability in connection with such disclosures.

A photostatic copy of this authorization has the same force and effect as the original.

AFFIRMATION

I hereby swear or affirm that I have read the above statements and agree to same.

Signature of applicant

Date signed (month, day, year)

November 1, 2011

NOTICE

In compliance with IC 4-1-6, this agency is notifying you that you must provide the requested information or your application will not be processed. You have the right to challenge, correct, or explain the information maintained by this agency. The information you provide will become public record.

INSTRUCTIONS

Complete this form for any continuing education activity that you attend or participate in which has not received prior approval by the board. This form cannot be used for approval of professional supervision. There is a separate form for review of professional supervision.

Submit this form with the appropriate documentation including the name of the sponsor, a description of the course as approved by the course sponsor, the date and location of the course, the names of the presenters and their credentials, verification of attendance, and the number of hours for which credit is requested. You must send a copy of the course brochure if one was published. If a brochure was not published, please notify the board of this fact. Do not send the original verification of attendance to the board. You must maintain verification of attendance for five (5) years. If you are audited by the board and do not have verification of attendance, you will not be granted credit for attending the course even if this request form is approved by the board.



Annual Conference Committee
Presents:

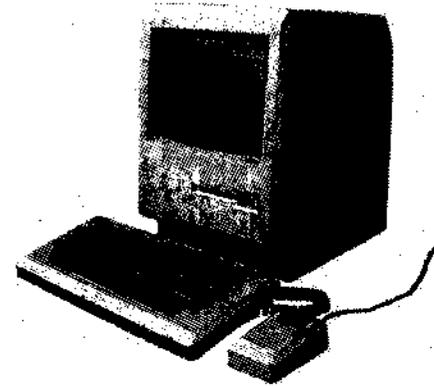
Behavioral Supports 2011: Time for an Upgrade

4th Annual state-wide conference
October 27-28, 2011
Hilton Indianapolis North



Opening Night! Wednesday October 26th
5-8 pm (\$25/person)

We live in a world that changes faster than the speed of 5G's. It doesn't matter if you own an iPhone 4 or barely text, eventually change comes for us all. There is definitely more new than usual this year, and the IN-ABC annual conference would like to offer you a chance to download new information and upgrade to a higher level of service. Join us at the Indianapolis Hilton North on October 27th and 28th as many different and innovative topics will be discussed by industry experts!



TOPICS:

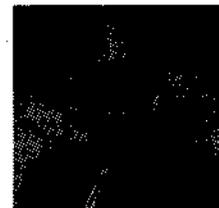
- *What's going on with the state?*
- *Guardianship*
- *Pop Culture Diversity*
- *Risk Management*
- *FBA Development*
- *Training Tools*
- *Sensory Processing*
- *Behavior Approaches*

Keynote Speakers: Kathy Buckley & Dan Baker, PhD

Kathy Buckley—"Her courage will empower you" says Suze Orman. Gifted comedienne, award-winning actress, accomplished author and renowned motivational speaker, Kathy Buckley is a force like no other. Billed as, "America's First Hearing Impaired Comedienne", she is also a five time American Comedy Award Nominee as Best Stand-Up Female Comedienne. As an actress, she is best known for her roles on shows such as *Touched By An Angel* and for her critically acclaimed Off-Broadway show, *Don't Buck With Me/ Now Hear This!* As a motivational speaker, she inspires hundreds of thousands of people around the world, sharing her story of overcoming some of the most difficult obstacles one can imagine in life, and how she met the challenges with dignity, courage and laughter.



Dan Baker, PhD—Dr. Baker is Director of Community Positive Behavior Support, Transition, and Supported Employment Projects, and Associate Professor of Pediatrics at the Elizabeth M. Boggs Center on Developmental Disabilities in New Jersey. He earned his PhD in Educational Psychology in 1992 and a Teaching License in 1990 from the University of Minnesota. Dr. Baker is well published in both edited books and literary journals. He earned the Award for Excellence in Community Support in 2001 from the Institute on Dual Diagnosis. Most of his published work addresses the strategies for teaching direct care staff to work with persons who present challenges. Dr. Baker reviews for the journals Intellectual and Developmental Disabilities and Research in Developmental Disabilities and is very involved with NADD.



Opening Night! Wednesday, October 26th, 5-8 pm

*primarily for direct care providers/2.25 CEUs for pre-conference attendance

ONLY \$25/person

Group Rates Available (5-7 people = \$100; 8-10 = \$150) No extra charge with full conference fee.

Snacks & drinks to follow from 8-9:30 pm.

5-5:45 pm — "Expectations of BSS/Best Practice" open panel; INABC Board Members

6-6:45 pm — Top 5 Dx and how the DD population may present symptoms. Presented by: HSPP, Dr. Kari Kennedy & Dr. Dana Lasek

~~7-7:45 pm — "What is truly repetitive?" Presented by: Dr. Dana Lasek~~



Thursday, October 27th

9-9:30 am — Membership meeting & elections

9:45-10:30 am — "What's going on with the state?"

10:30 am-Noon — Morning Keynote Speaker:
Kathy Buckley

Noon-1:15 — Lunch

1:30-2:30 pm — Afternoon Keynote Speaker:
Dan Baker

2:45-4:45 pm — Small Group Activities, Dan Baker

4.5 CEUs for attendance today!

Friday, October 28th

9:30-11:00 am — Breakout session #1

△ Guardianship (Kim Dodson & Scott Newton)

△ Pop Culture (Dan Brumfield)

△ Risk Management (Dr. James Wiltz)

11am-12:30 pm — Lunch

12:45-2:15 pm — Breakout session #2

△ Nurtured Heart Approach, Part 1
(Heather Meyer)

△ FBA Development (Ann Baloski)

△ Tools for Competency Based Training

△ (Fritz Kruggel/Ken Nelson)

2:15-2:45 pm — Break

2:45-4:15 pm — Breakout session #3

△ Nurtured Heart Approach, Part 2
(Heather Meyer)

△ Creative Replacement Behavior
(Kelly Hartman)

△ Sensory Processing (Kim Strunk)

△ Latest in treatment for ASD (Jennifer Jones)

4.5 CEUs for attendance today!

9 CEUs for attendance both days—no additional expense

Pick the seminars YOU want to attend the day of the conference! Breakout sessions will be arranged to accommodate the first 50 attendee's to arrive, so please BE ON TIME.

Please print form and complete. Print clearly and mail form and payment to: IN/ABC Conference c/o Opportunities for Positive Growth, Inc. 10080 East 121st Street, Suite 112 Fishers, IN 46037

Early registration ends 9/30 and all registrations must be turned in by 10/20

Name: _____ Employer: _____

Address: _____ Phone: _____

E-mail: _____

Select Appropriate Registration Fee:

- IN ABC member before (date) — \$175
- IN ABC member after (date) — \$250
- Non IN ABC member before (date) — \$250
- Non IN ABC member after (date) — \$325

Select events you will be attending:

- Opening Night, October 26th
- Thursday, October 27th (including lunch)
- Friday, October 28th (including lunch)
- Keynote Speaker

Vegetarian meal required: Y / N

Topics & Presenters — 9:30-11:00 am

Guardianship

This presentation will cover the statutory requirements for creating a guardianship, executing Power of Attorney, or preceding as health care representative. Discussions will include the interplay between the above mentioned powers as it relates to the ability to make health care decisions and give health care consent on behalf of others.

Presented by: Kim Dodson & Scott Newton

Kim Dodson currently serves as the Associate Executive Director for The Arc of Indiana. The Arc of Indiana is a state-wide organization which advocates for issues, programs and services important to people with intellectual and other developmental disabilities and their families. She is a graduate of Purdue University with degrees in Political Science and Literature. Her experience includes working for a U.S. Congressman, the Indiana House of Representatives, and the Indiana Chamber of Commerce. She worked as a contract lobbyist for a law firm before joining The Arc of Indiana 13 years ago. Kim's role as Associate Executive Director includes being the registered lobbyist for The Arc of Indiana.

Scott Newton has been a staff attorney in the Office of General Counsel of the Family and Social Services Administration for the past seven years. Within FSSA, he has represented the Bureau of Developmental Disabilities Services as well as the programs under Vocational Rehabilitation Services. Prior to that, he was associated with the Children's Law Center, which conducted CLE accredited seminars throughout the state for the benefit of judges, prosecutors, public defenders, probation officers and others. The Center also published written material and brochures and fielded questions from around the state regarding the rights of juveniles under Indiana Law. Scott has represented Child Advocates, Inc. for ten years as well as the Marion County guardian ad litem agency. He holds degrees in English and Journalism from Indiana University, as well as a law degree from I.U. Law School—Indianapolis.

Pop Culture Diversity

Have you ever wondered why your younger employees "don't know their role"? Been befuddled by a "tweet" a "poke" or a "powerpoint"? Questioned the substance of today's moves, music or television shows? There is help! "Pop Culture Competency 101" will help you overcome the challenges encountered when working with individuals who are defined by the ever-changing landscapes of their generation. This journey across the ages will bring you face to face with a wicked witch who has been scaring children and adults for over a hundred years, a computer that wants nothing more than to replace you and a pop quiz that will try to define you. Together we'll work through these challenges and many more, arriving at our destination with the tools needed to be better leaders for those we serve.

Presented by: Dan Brumfield

Dan Brumfield, MSW, has spent the last fifteen years educating social service professionals about how their own personal biases and ability to stereotype can negatively affect the lives of those around them. Growing up in a culturally diverse, inner-city neighborhood, Dan learned that valuing people as individuals was not only important for personal growth, but also for survival. The skills obtained during this period of his life became the foundation for several training initiatives he has helped to create and implement. These include workshops called, "Meet the Homes," which has been described as, "one of the best diversity awareness trainings" being offered today, and Indiana's first mentor training program for child welfare workers.

Risk Management

The attendees of this presentation will discover the relevance of values and attitudes in decision making on risk. As normalization of services are often in conflict with philosophies and policies to minimize risk, risk management strategies to address this imbalance will be presented.

Presented by: Dr. James Wiltz

Dr. Wiltz received his undergraduate degree in Psychology at Indiana University and his M.A. and Ph.D. from Ohio State University in Clinical & I/DD Psychology. This specialized program is accredited by the American Psychological Association (APA) and focuses on the care of people with intellectual disabilities (ID), which has been the population Dr. Wiltz has worked with for over 15 years. His jobs have included working as a direct-care staff member, a group home manager, and a community based behavior specialist, a provider of psychological services in tow large state institutions, a researcher in a university setting, and Director for Indiana's Crisis Management Service of Southern Indiana. The crisis program served Hoosiers from 2007-2010, when Indiana's fiscal constraints resulted in cancellation of the contract. Since that time, he has worked for AWS on special projects and currently is Director of an ESN program. Dr. Wiltz is licensed as a Psychologist in Indiana with endorsement as Health Service Provider in Psychology. He has served as an at-large member of the Indiana Association of behavior Consultants for the past year.



Behavioral Supports 2011: Time for an Upgrade



Topics & Presenters cont. (12:45 pm-2:15pm)

Nurtured Heart Approach, Part 1 & 2

Do you feel sometimes the best you can do is to get staff to conform to expectations and meet basic client needs and safety? Do you sometimes feel like your job is to put out fires and listen to problems? Do you feel at a loss because, even the best effort by you and your client's team, your client's challenging behavior just won't improve? Would you like to learn a powerful, engaging approach that will give you a new perspective into your work, re-inspire your vision, and profoundly transform your relationships and outcomes with your staff and clients? If so, I have the "thing" for you! The Nurtured Heart Approach (NHA) is an amazing set of strategies and techniques developed by Howard Glaser, M.A.. The approach is being implemented worldwide in homes, schools, community agencies and foster and residential setting for the most challenging of behaviors with outstanding results. Come see how it can work for you. Why conform, when you can transform!

Presented by: Heather Meyer

Heather Meyer, M.S., LMHC has had a steadfast commitment to sparking a desire for change and blazing a trail of transformation for individuals experiencing significant behavioral and life challenges since 1993. She is a recognized leader in producing sustainable positive outcomes for issues such as: ADD/ADHD, trauma and abuse issues, opposition and defiance in children and teens, bipolar disorder and autism spectrum disorders. As a two time Certified Nurtured Heart Approach Advanced Trainer, Heather passionately empowers individuals to recognize and use existing character traits and talents to improve their self worth, facilitate change and develop a new foundation with which to create transformation in their lives. Her extensive clinical experience includes: biophysical assessment, intensive court ordered therapeutic mental health services, as well as ongoing roles in supervision and management. Heather is the proud owner of the company, Dynamic Wisdom, LLC. She provides parent coaching, counseling, consultation, as well as seminars and workshops.

Functional Behavior Assessment Development

Conducting Efficient and Effective Functional Behavioral Assessments is designed to enhance the clinical skills utilized in the development of Functional Behavior Assessment (FBA). The aim of this course is to focus the practitioners skills on the key factors needed to identify the functional relationships contributing to challenging behavior and to develop alternatives that can support

behavior change. The use of data analysis, assessment of stimulus events, and structured assessments will be discussed in detail. As well as, how to interpret the information gathered to yield most effective outcomes. Participants will further be introduced to the FBA Outline that was compiled and endorsed by State initiatives.

Presented by: Ann Baloski

Ann Baloski, is an advocate for best practice in behavioral intervention. She developed and disseminated behavioral curricula for the State of Indiana through her role with Outreach Services and serves as an Expert Consultant to the State during Department of Justice oversight. With over 10 years of clinical experience within multiple treatment settings, Ann has a broad range of skills and experience. She is a graduate from Western Michigan University renowned Behavior Analysis Program and has been Board Certified in Behavior Analysis since 2003. She plays an active role in professional affiliations, serving as founded member of Hoosier Association of Behavior Consultants (2007). She continues to have a profound impact on the individuals she serves through her current role with Cornerstone Autism Center.

Tools for Competency Based Training

A selection of methods and considerations for developing and applying competency based training in accordance with Indiana Medicaid Waiver policy requirements. Attendees will be exposed to several options for delivering competency based training to caregivers and/or administrators of behavior service interventions, as well as a selection of current research regarding the application of competency based measures.

Presented by: Fritz Kruggel & Ken Nelson

Ken Nelson, LMFT, LCSW & BCBA is in private practice and owns Ken Nelson Behavior Services. He has been providing behavior support services since 1995. He has been a co-presenter at the International Association of Behavior Analysis and Indiana Association of Behavior Consultants annual conferences. He is a chairperson for Citizens for a Drug Free Gibson County, the Local Coordinating Committee for Governor's Commission for a Drug Free Indiana and the President of Gibson County Court Appointed Special Advocate Board of Directors.

Fritz Kruggel, M.S., BCBA, has been working with individuals with developmental "differences" for over 16 years. He started in direct care and eventually worked his way up to behavior support services which he has delivered for over 10 years. He has held various positions in the field of residential and day services including: social worker, case coordinator, job coach, residential manager and director. He has served on the Indiana Association of Behavior Consultants Ethics Committee. He is in private practice as the sole practitioner of AFK Services.

Behavioral Supports 2011:

Time for an Upgrade

Indiana Association of Behavioral Consultants

Topics & Presenters cont. (2:45-4:14 pm)

Creative Replacement Behavior

Sick of the same old objectives for replacement behavior? Unreasonable goals that don't produce the desired outcomes for people? Gain a different perspective on replacement behaviors. With a brush up on the why's and what's of PBS101—gain a better understanding of how to replace targeted behaviors. Learn how to provide individuals with tools to achieve outcomes through more effective strategies that make sense. Avoid leading staff into discrete trial learning through step by step goals and transform their behavior approach with teaching that stretches across all environments.

Presented by: Kelly Hartman

Kelly Hartman, named Indy's Best & Brightest Young Professional in Health & Life Services, and honored by YWCA for being a Woman of Achievement. She is President of the Board of Directors at OTB (Outside the Box); Professional Liason for the Indiana Association of Behavioral Consultants (IN-ABC), and President & CEO at Insights Consulting, Inc. a company named Top Workplaces in Indianapolis for the past two years. In her 20 year career of supporting people with developmental disabilities, she has always maintained a focus on individual's capabilities, not their disabilities. In her passion to help people achieve better outcomes in life— Kelly believes on what a person CAN do through teaching a non-aversive, person centered approach to personal success.

Sensory Processing

Those who have sensory integration dysfunction may be unable to respond to certain sensory information by planning and organizing what needs to be done in an appropriate and automatic matter. This may cause a primitive survival technique called, "fright, flight, and fight" or withdrawal response, which originates from the "primitive" brain. This response often appears extreme and inappropriate for the particular situation. This presentation will provide interventions that can be utilized regardless of whatever particular situation inappropriate responses may occur.

Presented by: Kim Strunk. MS OTR

Kim Strunk is the founder and Clinical Director of Homefront Learning Center. She earned her MS degree in Occupational Therapy from the University of Indianapolis in 1996. She has dedicated her career to pediatrics with a focus in sensory processing disorders, feeding disorders and Autism. Following nine years of clinic based and early intervention practice, Kim set out to create a practice that brought together highly trained therapists whose passion was providing hope and support to families living with a child with a disability. Everything found at Homefront Learning Center is the outcome of this passion and effort.

"Tools for your Toolbox" - Behavior Services for individuals with ASD

The first portion of this presentation will be a brief definition of the history of autism. At least three major characteristics of autism will be described in further detail. The second portion will outline assessment tools that can be helpful in behavior planning for someone with Autism with consideration of the characteristic described in the first portion of this presentation. The final portion of this presentation will describe behavioral interventions that can be useful in working with individuals with Autism. Some behavioral interventions that could be cause for further problems will also be discussed. There will be a brief description of medications that are frequently prescribed and other treatment options.

Presented by: Jennifer Haessig Jones, MSW

Jennifer has worked with individuals with developmental disabilities for 25 years in many different capacities including, direct care, social services, QMRP and behavior consultant. She also has many years experience working in both small ICF-MR facilities and group homes and has been a behavior consultant since 1998 for Meaningful Day Services. Jennifer primarily works with children and adults with Autism Spectrum Disorder but also works with people with traumatic brain injury, Downs Syndrome and individuals with dual diagnosis. She spends quite a bit of time as a political activist in order to protect the rights of people with disabilities.



4th Annual IN-ABC Conference to be held at:

Hilton Indianapolis North
8181 North Shadeland Avenue
Indianapolis, IN 46250
Telephone: (317) 849-6668
Fax: (317) 849-4936

Book by September 26th
to receive the special room rate!

Visit the following link to reserve your room at a special rate!

http://www.hilton.com/en/hi/groups/personalized/I/INDINHF-ABC20111026/index.jhtml?WT.mc_id=POG

What is Truly Restrictive?

Dennis R. Olivera, Ph.D.
President, IDDSI

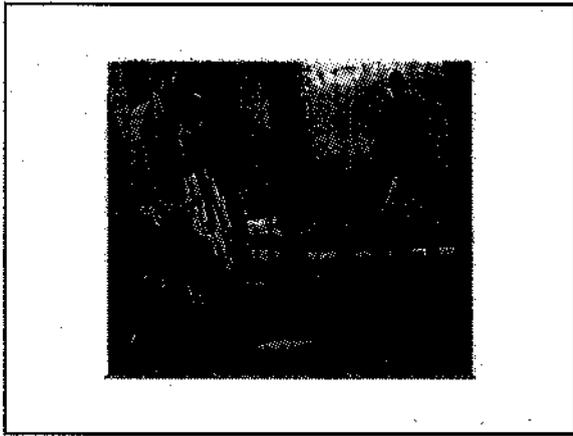
INDIANA ASSOCIATION OF BEHAVIOR CONSULTANTS
Annual Pre-Conference, Indianapolis, IN
October 26, 2011

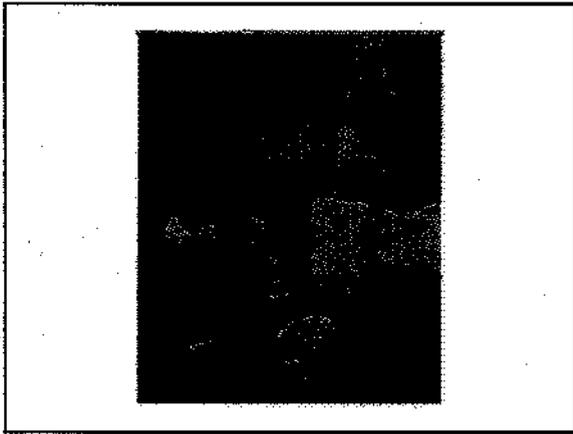
The pictures that follow are from *Christmas in Purgatory: A Photographic Essay on Mental Retardation* by

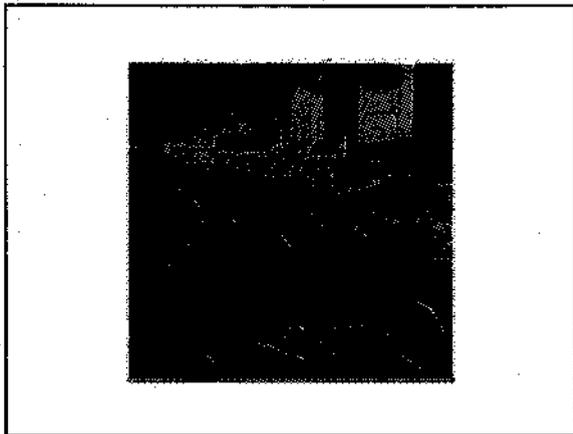
Burton Blatt and Fred Kaplan (1974)

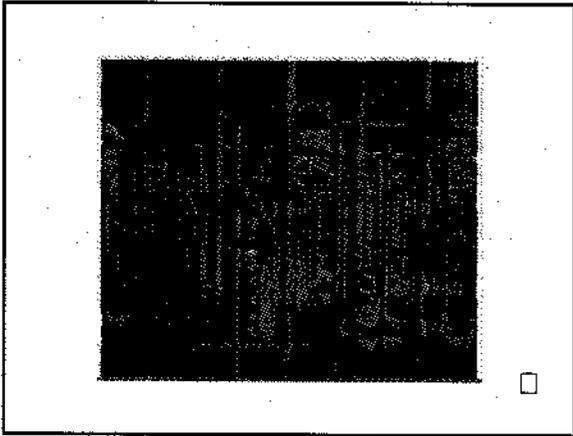
The pictures were taken at four institutions at Christmas 1965

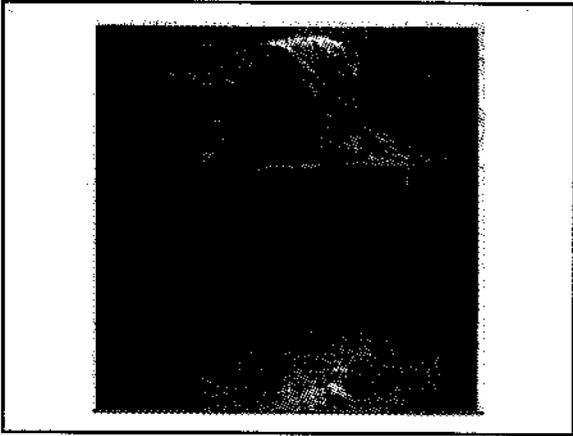


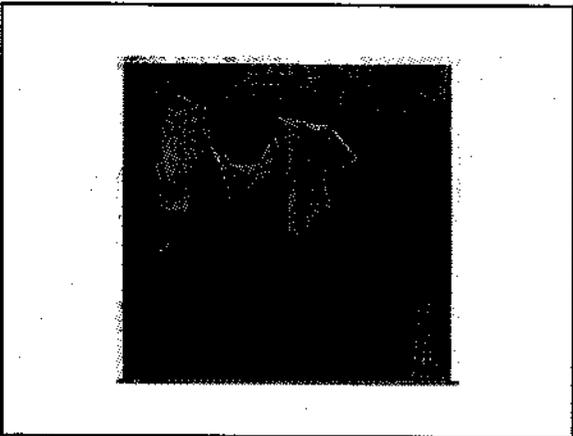












What happened that changed the standards of care and treatment?

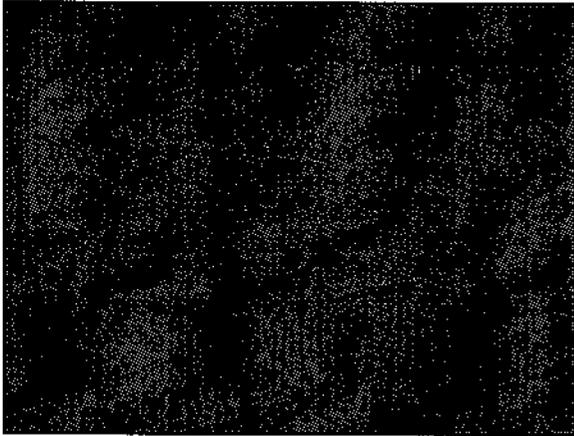
The *Wyatt vs. Stickney* suit was filed in October of 1970 on behalf of Rocky Wyatt, a patient at Bryce Hospital in Tuscaloosa, Alabama. Wyatt's aunt was a Bryce employee who was part of a group facing a mass lay off due to budgetary constraints. She and other mental health employees, including the superintendent, Dr. Stonewall Stickney himself, recognized the fact that lay-offs of professional staff would preclude even minimal treatment of patients at Bryce.

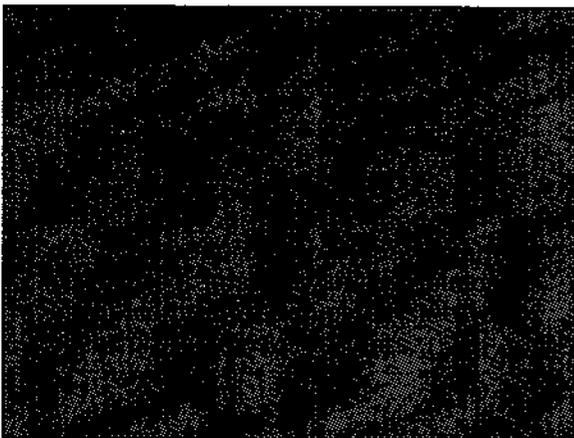
The case eventually assumed a "patients rights" posture and was transferred to Federal Court. It later became a class action suit that included patients at Searcy State Hospital and Parlow State School as plaintiffs.

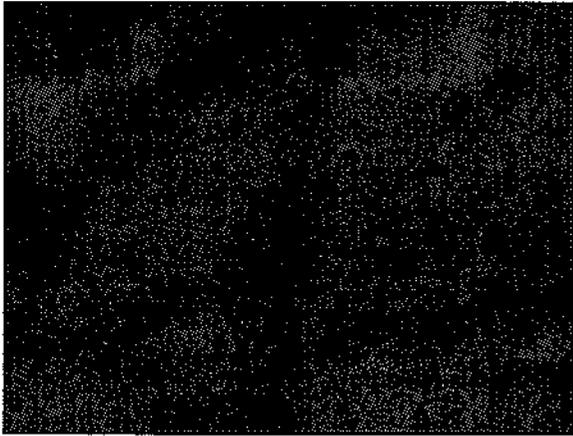
In his order issued on April 13, 1972, Judge Johnson identified 35 standards containing the minimal constitutional treatment standards for persons with mental disabilities. These standards, later referred to as the Wyatt Standards, rested on three principles: individualized treatment plans, qualified staff in numbers sufficient to administer adequate treatment, and humane psychological and least restrictive environments.

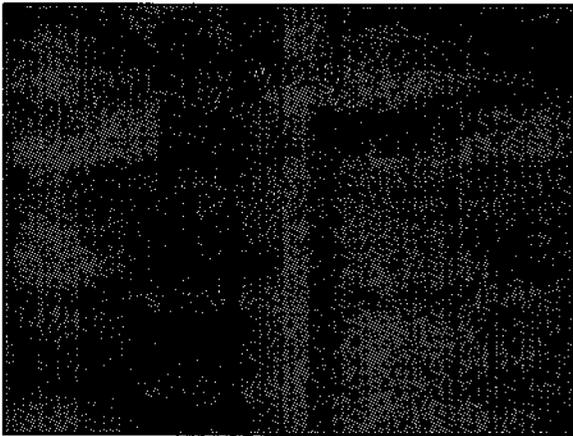
In the 2003 order that ended *Wyatt v. Stickney*, Judge Thompson said:

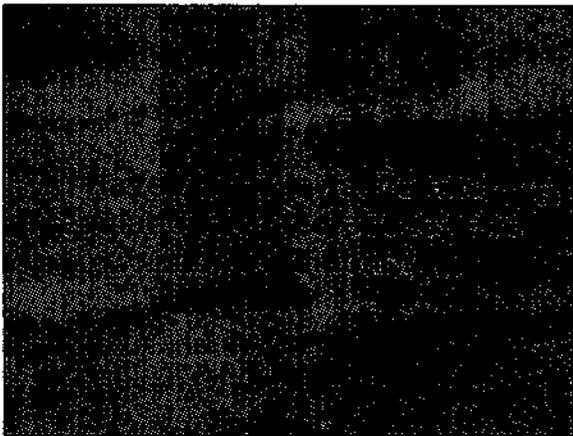
"The enormity of what this case has accomplished cannot be overstated. The principles of humane treatment of people with mental illness and mental retardation embodied in this litigation have become part of the fabric of law in this country and, indeed, international law."

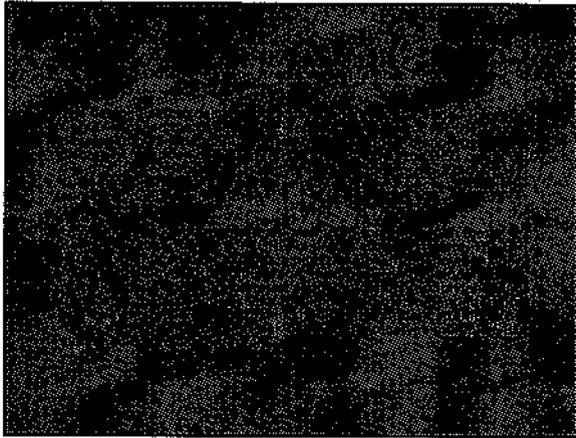








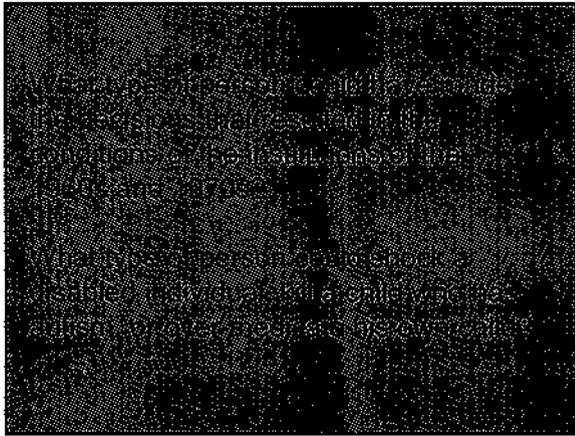












In 1963 Hannah Arendt published a book entitled *Eichman in Jerusalem*, in which she coined the phrase, "the banality of evil". Her thesis was that great evil isn't necessarily perpetrated by fanatical sociopaths, but often comes at the hands of the most ordinary individuals. Citing the Holocaust as an example of how great evil can be wrought by even the most mundane of individuals, Ms. Arendt's book should serve as a reminder to civilized individuals worldwide that today's intensely evil people can be quite unremarkable.

What Can We Do?

- Set standards for care.
- Monitor to uphold standards.
Report substandard care and staff behavior promptly.
- Be careful of approaches used to treat problem behavior.

An Oversimplified way to Understand Behavioral Procedures

		EFFECT ON BEHAVIOR	
		STRENGTHEN	WEAKEN
Staff Action	Give	1 Positive Reinforcement	2 Punishment
	Remove	3 Negative Reinforcement	4 Timeout Response Cost

Rewarding Replacement Behaviors

- After identifying the reinforcer that maintains TPB, select another appropriate behavior the person already displays and provide reinforcement following its occurrence.
- Select an alternative behavior that is physically incompatible with the TPB and reward its occurrence.

Noncontingent Reinforcement

- Identify the reinforcer that maintains TPB.
- Provide the reinforcer on a schedule that is independent of the TPB.
- Fixed interval scheduling is effective
- Reinforcers different than those maintaining TPB can be effective – even when the TPB is followed by natural reinforcers.
- Implies that simply enriching the setting with relevant stimulation can produce improvements in behavior.

DDRS Policy on Aversive Techniques (Prohibited)

BOX 2

- Contingent exercise
- Contingent noxious stimulation
- Corporal punishment
- Negative practice
- Overcorrection

BOX 4

- Seclusion
- Visual or facial screening

DDRS Policy on Behavioral Support Plan

“Restrictive intervention” means an action or procedure that limits an individual’s movement or access to other individuals, locations or activities; or that restricts an individual’s rights. (BOX 4)

DDRS Policy on Use of Restrictive Interventions

1. When data from a Behavioral Support Plan (BSP) focused on positive supports, in conjunction with feedback from the Individualized Support Team (IST), confirms danger to the individual or others due to the individual's challenging/dangerous behavior,
2. and after the IST has concurred and documented that no other reasonable or feasible alternatives are available ...

a BSP with restrictive interventions may be developed by the individual's behavioral support services provider.

DDRS Policy on Use of Restrictive Interventions 2

A BSP containing restrictive interventions shall be developed with the understanding that the restrictive interventions should be temporary and should be eliminated as quickly as possible, with the exception of medications used to ensure the health and safety of an individual, reviewed annually at a minimum.

DDRS Policy on Use of Restrictive Interventions (Behavior Analytic Techniques)3

EXAMPLES FROM POLICY

- a. exclusionary time out; (BOX 4)
- b. limited access or contingency access to preferred items or activities naturally available in the individual's environment; (BOX 4)
- c. reprimand; (BOX 3)
- d. response cost; (BOX 4)

**DDRS Policy on Use of
Restrictive Interventions
(Non-BA Techniques)₄**

- a. restraint, including:
 - i. chemical restraint;
 - ii. manual restraint;
 - iii. mechanical restraint;
- b. alarms added to an individual's natural environment including doors, windows, refrigerators, cabinets, and other home appliances and fixtures;
- d. intensive staffing for control of behavior;
- h. use of psychotropic medications to control the occurrence of an unwanted behavior.

October 28, 2011

Ronald Ruff, Ph.D.
18901 Jonathan Lane
Homewood, Illinois 60430



Ms. Tasha Coleman, Director
Indiana Professional Licensing Agency
402 West Washington Street, Room W072
Indianapolis, Indiana 46204

Dear Director Coleman:

Enclosed please find the information which you requested to complete my HSPP application. I have included completed forms A and C. Those forms are signed by Dr. Marcus with his letters of verification attached per your request.

Thank you for your assistance.

Sincerely

A handwritten signature in cursive script that reads "Ronald Ruff". The signature is written in dark ink and is positioned above the typed name.

Ronald Ruff, Ph.D.

Sander I. Marcus, Ph.D., CPRW

Practice Leader, Career and Educational Assessment Services
Licensed Clinical Psychologist, Certified Professional Résumé Writer
Center for Research and Service, College of Psychology
Illinois Institute of Technology (IIT)
3101 S. Dearborn, Suite 226, Chicago, IL 60616
312-567-3358 (direct line), 312-567-3861 (front desk), 312-567-8948 (fax)
marcus@iit.edu

October 27, 2011

Tasha Coleman, Director
Indiana State Psychology Board
402 W. Washington, Room W072
Indianapolis, IN 46204

Re: Follow-up on letter (October 25, 2010) in support of Dr. Ronald Ruff's application for licensure.

Dear Ms. Coleman:

This is to validate Dr. Ronald Ruff's successful completion of the 2-year Clinical Psychology Internship at the IIT (Illinois Institute of Technology) Clinical Psychology Department's Graduate Program (1972-1974).

I hope these comments clarify and validate Dr. Ruff's qualifications to your satisfaction. I am pleased to recommend him as an outstanding professional in every way.

Thank you once again.
Very truly yours,



Sander Marcus, Ph.D.



APPLICATION FOR ENDORSEMENT AS A HEALTH SERVICE PROVIDER IN PSYCHOLOGY (HSPP) (continued)

State Form 20231 (R14 / 1-11)

VERIFICATION OF INTERNSHIP EXPERIENCE FORM A

INSTRUCTIONS - ALL APPLICANTS:

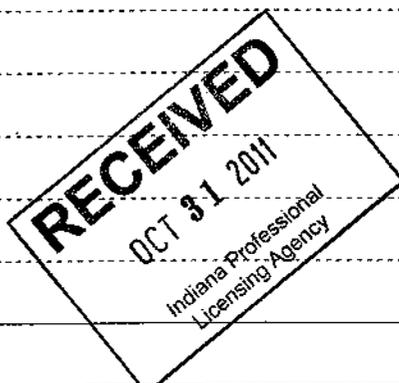
1. Complete the top section.
2. Make copies and send this form to the Director of Training of your experience (internship).
3. Direct the individual(s) to send this form directly to the Professional Licensing Agency.
4. If the Director of Training is not available, another psychologist associated with the internship may complete the form.
5. If a psychologist is not available, you must provide a written explanation to the Board.

1. Name (last, first, middle, maiden) Ruff, Ronald			
2. Home address (number and street or rural route) 18901 Jonathan Lane		City Homewood	State IL
3. License number 20040500A 071001913 IL.		Date of issuance (month, day, year) 6-27-1990	ZIP code 60430
I authorize Sander I. Marcus, Ph.D.		to furnish the Indiana State Psychology Board / Professional Licensing Agency with the following information.	
Signature of applicant Ronald Ruff, Ph.D.			Date of signed (month, day, year) 10-24-2011

TO: **Sander I. Marcus, Ph.D.**

Please verify that **Ronald Ruff, Ph.D.** has received acceptable, supervised experience (internship) by providing the following information.

1. Name and address of the agency providing the training program IIT (Illinois Institute of Technology) - Clinical Psychology Program	
2. Your name and current address Sander Marcus, Ph.D., 3101 S. Dearborn, Suite 226 IIT College of Psychology, Chicago, IL 60606	
3. Your title at the agency at the time the applicant was in the program Adjunct Faculty, Asst. Counseling Center Director	
4. What role did you play in the internship? Supervisor	
5. Did you directly supervise the applicant? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, what was your relationship to the applicant?</i>	
6. Type of patient / client population University Students	
7. When did the applicant receive training in your program / internship? (please provide exact beginning and ending dates) FROM: 1972 TO: 1974	
a. Was the internship APA approved at the time of completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b. Was the internship APPIC approved at the time of completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
c. Number of hours per week applicant worked in this setting 15-20	
d. Number of hours per week applicant received individual, not group, supervision Maximum 2	
e. Duration of the supervision (number of weeks or months) Entire Internship	
f. Total number of hours the applicant worked in this setting about 1,000 per year	
8. Number of interns in the program when the applicant was in the program maximum of 10	



9. NAME AND DEGREES OF SUPERVISING PSYCHOLOGISTS

Name	Degree (at the time the applicant was in the program)	State Where Certified / Licensed
Sander Marcus, Ph.D.	Ph.D.	Illinois
Harris Berenbaum, Ph.D.	Ph.D.	Illinois
Robert Roth, Ph.D.	Ph.D.	Illinois

10. Please give a description of the applicant's internship experience

- Individual and group psychotherapy
- Psychological assessment (interviewing & testing)
- Consultation
- Psychological evaluations and reports
- Research

11. Was the internship satisfactorily completed?

Yes No

If No, please attach an explanation.

12. At the time of supervision

A. Were you licensed or certified in Indiana?

- Licensed in Illinois

Yes No

B. If you were licensed or certified in Indiana, were you endorsed as a health service provider in psychology?

- National Register

Yes No

If you were not licensed or certified in Indiana and HSPP, or were not listed in the National Register, has your resume been attached?

Yes No

VERIFICATION FORM AFFIRMATION

I hereby swear or affirm, under the penalty of perjury, that the statements made in this verification are true, complete and correct.

Signature

Sander L. Marcus, Ph.D.

Date signed (month, day, year)

10/27/2011

Please respond as soon as possible so that the application may be completed without delay.

Please send all responses to:

INDIANA STATE PSYCHOLOGY BOARD
 PROFESSIONAL LICENSING AGENCY
 402 West Washington Street, Room W072
 Indianapolis, Indiana 46204

Thank you for your assistance in this matter.



Sander I. Marcus, Ph.D., CPRW

Practice Leader, Career and Educational Assessment Services
Licensed Clinical Psychologist, Certified Professional Résumé Writer
Center for Research and Service, College of Psychology
Illinois Institute of Technology (IIT)
3101 S. Dearborn, Suite 226, Chicago, IL 60616
312-567-3358 (direct line), 312-567-3861 (front desk), 312-567-8948 (fax)
marcus@iit.edu

October 27, 2011

Tasha Coleman, Director
Indiana State Psychology Board
402 W. Washington, Room W072
Indianapolis, IN 46204

Re: Follow-up on letter (October 25, 2010) in support of Dr. Ronald Ruff's application for licensure.

Dear Ms. Coleman

I understand you have requested additional information to support Dr. Ruff's clinical internship as valid. Unfortunately, Dr. Wayne Anderson is no longer with us and I am in a position to vouch for Dr. Ruff's activities during those years.

I was the Assistant Director of IIT's Counseling Center through the early and mid-1970's, and became the Director in 1977 (until 1986). When Dr. Ruff received his training and his Doctorate, I was also a part-time faculty member of IIT's Psychology Department, and was in fact a member of Dr. Ruff's Doctoral dissertation committee. Therefore, I am well familiar with his training and performance record through all of those years.

I can indeed validate his post-doctoral Clinical Internship under the direct supervision of the late Wayne Anderson, Ph.D. (Psychological Resources Center for Personal and Family Life), following Dr. Ruff's completion of his Clinical Psychology Doctorate at IIT in 1974. His Internship with Dr. Anderson did indeed consist of intensive supervised training in a full range of professional clinical skills, and did extend well over 2,000 hours for the two year period.

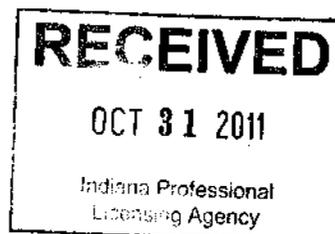
I hope these comments clarify and validate Dr. Ruff's qualifications to your satisfaction.

Thank you once again.

Very truly yours,

Sander Marcus

Sander Marcus, Ph.D.



APPLICATION FOR ENDORSEMENT AS A HEALTH SERVICE PROVIDER IN PSYCHOLOGY (HSPP) (continued)

State Form 20231 (R14 / 1-11)

**VERIFICATION OF POST-INTERNSHIP EXPERIENCE
FORM C**

INSTRUCTIONS - ALL APPLICANTS:

1. Complete the top section.
2. Make copies and send this form to each individual who supervised your experience in a health service setting (post-internship).
3. Direct the individual(s) to send this form directly to the Professional Licensing Agency.

1. Name (last, first, middle, maiden) RUFF Ronald			
2. Home address (number and street or rural route) 18901 Jonathan Lane		City Homewood	State IL
		ZIP code 60430	
3. License number 20040500A IN 071001973 IL		Date of issuance (month, day, year) 6/27/90 3/16/76	Date of birth (month, day, year) 3-11-1945
I authorize Sander I. Marcus, Ph.D. to furnish the Indiana State Psychology Board / Professional Licensing Agency with the following information.			
Signature of applicant Ronald Ruff, Ph.D.			Date of signed (month, day, year) 10-24-2011

TO: **Sander I. Marcus, Ph.D.**

Please verify that **Ronald Ruff, Ph.D.** has received acceptable, supervised experience (post-internship) by providing the following information.

1. Name and address of the facility in which the experience was obtained IIT (Illinois Institute of Technology) - Clinical Psychology Program
2. Your name and current address Sander Marcus, Ph.D. 3101 S. Dearborn, Suite 226 IIT College of Psychology, Chicago, IL 60616
3. Your title in the health service setting during the time you supervised the applicant Adjunct Faculty, Asst. Counseling Center Director
4. Type of patient / client population supervisor University Students

5. INCLUSIVE DATES AND NUMBER OF HOURS PER WEEK THE APPLICANT WORKED IN THIS SETTING

Dates (month, day, year)	Hours
1972-1974 (2 year period)	~ 2000

a. Number of hours per week you directly supervised applicant (individual, not group, supervision) ~ 1, Also served as advisor on dissertation committee
b. When did you supervise the applicant? (provide exact beginning and ending dates) Throughout the Internship
c. Number of hours of experience completed by the applicant while under your supervision 2,000
d. Number of hours of direct patient contact by the applicant while under your supervision 40 hrs/week



6. Briefly describe the nature of the applicant's work

- Individual and group psychotherapy
- Psychological assessment (interviewing and testing)
- Consultation
- Psychological evaluations and reports
- Research

7. Was the supervised experience satisfactorily completed by the applicant?

Yes No

If No, please attach an explanation.

8. At the time of supervision:

A. Were you licensed or certified in Indiana?

- Licensed in Illinois

Yes No

B. If you were licensed or certified in Indiana, were you endorsed as a health service provider in psychology?

- National Register

Yes No

If you were not licensed or certified in Indiana and HSPP, or were not listed in the National Register, has your resume been attached?

Yes No

VERIFICATION FORM AFFIRMATION

I hereby swear or affirm, under the penalty of perjury, that the statements made in this verification are true, complete and correct.

Signature of supervisor

Sander I. Marcus, Ph.D.

Printed name of supervisor

Sander I. Marcus, Ph.D.

Date signed (month, day, year)

10/27/2011

Please respond as soon as possible so that the application may be completed without delay.
Please send all responses to:

**INDIANA STATE PSYCHOLOGY BOARD
PROFESSIONAL LICENSING AGENCY
402 West Washington Street, Room W072
Indianapolis, Indiana 46204**

Thank you for your assistance in this matter.



ILLINOIS INSTITUTE OF TECHNOLOGY
REGISTRAR'S OFFICE CHICAGO, ILLINOIS 60616

Sex **M**

Ruff, Ronald

Address 22425 York Court, Richton Park, IL 60471	
Degree PhD in Psychology	Date 5/12/74
Date of entrance 9-7-71	Name of parent or guardian
Transferred from	Address
Birthday 3-11-45	High school

PhD French Exam passed **3/8/73**
PhD Comprehensive Exam passed **10/11/73**

GRADE SYSTEM -

A - Excellent	E - Failure
B - Good	I - Incomplete
C - Fair	WP - Withdrew passing
D - Passing	WF - Withdrew failing

COURSE	Sem Hrs	Grade	COURSE	Sem Hrs	Grade
GRADUATE DIVISION					
RUFF RONALD	1ST SEM 71-72				
PSYC 524 PRIN PROJECT TESTING	3	B			
	5 9 3.00				
RUFF RONALD	2ND SEM 71-72				
PSYC 534 ADV PROJECTIVE TEST	3	B			
	5 6 18 3.00				
RUFF RONALD	1ST SEM 72-73				
PSYC 535 GROUP THERAPY	3	A			
PSYC 547 COMMUNITY PSYCHOLOGY	3	A			
PSYC 537 ADV PSYCHODIAGNOSIS	3	B			
PSYC 601 COUNSEL INTERN I	4	A			
	3 19 67 3.53				
RUFF RONALD	2ND SEM 72-73				
PSYC 538 GROUP THER PRACTICUM	3	A			
PSYC 582 PRACT COMMUN PSYC	3	A			
PSYC 602 COUNSELING INTERN II	4	A			
PSYC 597 GRAD. SPECIAL PROBLEMS	3	A			
	3 (32) 32 119 3.72				
RUFF RONALD	1ST SEM 73-74				
PSYC 586 CONCEPTS SUPERVISION	3	A			
PSYC 691 RESEARCH & THESIS PHD	6	S			
PSYC 604 COUNSELING INTERN IV	2	A			
PSYC 597 SPECIAL PROBLEMS	2	B			
	3 (45) 39 145 3.72				
RUFF RONALD	2ND SEM 73-74				
PSYC 587 PRACTICUM SUPERVISION	3	A			
PSYC 691 RESEARCH & THESIS PHD	7	S			
PSYC 597 SPECIAL PROBLEMS	1	A			
PSYC 604 COUNSELING INTERN IV	2	A			
	3 (58) 45 169 3.76				

RECEIVED
OCT 25 2010
Illinois Professional
Licensure Agency

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