UNIVERSITY OF VERMONT,
COLLEGE OF MEDICINE,
Burlington, Vt., May 27, 1968.

HON. ROBERT STAFFORD,
Congressman for the State of Vermont,
U.S. House of Representatives,
Washington, D.C.

DEAR CONGRESSMAN STAFFORD: I believe there is a bill S1864 before your committee on the District of Columbia. This bill deals with the licensing of clinical psychologists for practice. I just would like to add my voice to that of many others.

We have here in Vermont struggled with such a licensing bill. The crucial factor is that some provision be built in that "no patient may be dealt with by a psychologist who has not had a thorough evaluation from a medical point of view," as psychologists by training are not in a position to perform an adequate differential diagnosis on the basis of which they can decide whether the clients symptoms are due to organic disease or due to psychological disorder.

Sincerely yours,

HANS R. HUESSY, M.D.,
Acting Chairman.

(Correspondence between the District of Columbia Psychological Association and the Washington Psychiatric Society, referred to at page 30, follows:)

DISTRICT OF COLUMBIA PSYCHOLOGICAL ASSOCIATION,
Washington, D.C., February 24, 1965.

LEON YOCHELSON, M.D.
President, Washington Psychiatric Society,
Washington, D.C.

DEAR DR. YOCHELSON: As you are aware, various officials of the D.C. Government have expressed an interest in being able to identify and prosecute those persons who are holding themselves out to the public as psychologists. but who in fact lack education and training in the field of psychology. Twenty-five states have laws which specify who may call himself a psychologist or who may practice as a psychologist. The District of Columbia has no legislation controlling the practice of psychology.

The District of Columbia Psychological Association is presently reviewing this matter through its Legislative Committee. There is a possibility that the DCPA will introduce some type of licensing legislation this year. Before we do this, we wish to solicit the views and suggestions of interested community groups. Such legislation would probably cover all applied psychologists, including those in research and development, social, personal, counseling, industrial, clinical, etc. Obviously such legislation would have great importance in protecting the public from unqualified people offering mental health services. For this reason, we recognize that the Washington Psychiatric Society would have an interest in such legislation, as well as some suggestions concerning it. We would like to have your thinking and views on how such legislation might be written to best serve the community.

If the membership of DCPA indicates a willingness to proceed with a legislative proposal this year, we probably would need to have a Bill before Congress by late April. This is a bit of a rush. Would there be an opportunity to consult with the Washington Psychiatric Society in the near future? How might this best be done? I understand that you also are Chairman of the D. C. Medical Society's Committee on Mental Health. Would it be possible to talk with this group also? Any suggestions you have as to how our two organizations might confer would be appreciated. It is a shame that we did not already follow the advice of our two APA's and set up local joint committees. A vehicle for discussion would then be at hand.

In any case, we would appreciate an opportunity to talk with you about such legislation. I can be contacted at D. C. General Hospital (LI 7-9200, xt 335) during the day. My home phone is 387-7514. I am looking forward to talking with you further about this.

Sincerely yours,

MALCOLM L. MELTZER, PH. D.,
Chairman, Legislative Committee.