

PRACTICE/ BILLING MONITOR QUARTERLY VERIFICATION FORM

Name of (probationer) licensee:				ractice location where monitoring took place:		
<u>Reporting Period:</u> 1^{st} more 1^{st} March 24^{st}						
1 ^{°°} quarter (January 1 ^{°°} – Mar 2 nd quarter (April 1 st – Jupp 2				31 st) *Mail after Mar. 31st. Due on or before: April 7 th *Mail after June 30th. Due on or before: July 7 th		
	3 rd quarter	r (Julv 1 st –	September	*Mail after Sept. 30th. Due on or before: October 7 th		
1 st quarter (January 1 st – Marc 2 nd quarter (April 1 st – June 30 3 rd quarter (July 1 st – Septemb 4 th quarter (October 1 st – Dece				ber 31 st) *Mail after Dec. 31st. Due on or before: January 7 th		
Date of monitoring	Length of time spent monitoring	Number of Patients Seen by Licensee	Number of Cases Reviewed by Monitor	Notes (include): Area(s) of review, direction by monitor, additional resources suggested to licensee. Note areas of improvement or whether improvement is needed. Include any corrective measures suggested by you, and progress made. (USE ADDITIONAL PAPER IF NECESSARY)		

I certify, under penalty of perjury, that the foregoing information is true and correct and that I completed the above report. I understand that if I discover conduct, during record review, which indicates to me that the licensee is not safe to practice psychology, I must report it to the Board of Psychology. I understand and agree that copies of this Quarterly form, including copies of the signatures of the monitor may be used in lieu of original documents and signatures, and further, that such copies and signatures shall have the same force and effect as originals.

Monitor's Name (please print)	License #	Phone Number
Monitor's Signature		Date

To submit form: mail to address on the letterhead, or email to psychprobation@dca.ca.gov

Revised 9/2016

The monitor's role is to assist the Board in protecting the public. Equally important is the monitor's role in assisting the licensee, who may already be an experienced practitioner, to rehabilitate his/her skills by improving his/her techniques and by discontinuing the activities or behaviors that led to the discipline.

As a practice monitor, you must:

- 1) Have access to all licensee's patient records to ensure that the licensee has informed each of his patients that you may be reviewing their records and that a release is in the file,
- 2) Select, at random from the entire caseload, the patient files to be reviewed,
- 3) Review as many patient files as possible in the time allowed,
- 4) Complete the quarterly reporting form and send it to the Board timely.
- 5) Notify the Board of any conduct you discover, during record review, which indicates to you that the licensee is not safe to practice psychology.

By completing the monitoring form and turning it in on time, you greatly assist the Board in its efforts to ensure consumer safety, and benefit the licensee by complying with his or her probationary order. You should know that it is ultimately the licensee's responsibility to ensure that your reports are submitted timely.

Your cooperation is sincerely appreciated. If you ever have any questions or need to report any concerns, please contact the Board's Probation Program at (916) 574-7235.