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STATE OF WISCONSIN
BEFORE THE PSYCHOLOGY EXAMINING BOARD

IN THE MATTER OF THE DISCIPLINARY
PROCEEDINGS AGAINST:

GERALD J. DELOYE, PH.D.,
RESPONDENT

FINAL DECISION AND ORDER
LS0110183PSY

The parties to this action for the purposes of § 227.53, Stats., are:

Gerald J. DeLoye, Ph.D.
4010 House Road, Apt. 4
Eau Claire, WI 54701

Wisconsin Psychology Examining Board
P.O. Box 8935
Madison, WI 53708-8935

Department of Regulation and Licensing
Division of Enforcement
P.O. Box 8935
Madison, WI 53708-8935

The parties in this matter agree to the terms and conditions of the attached Stipulation as the final decision of this matter, subject to the approval of the Psychology Examining Board. The Board has reviewed this Stipulation and considers it acceptable.

Accordingly, the Board in this matter adopts the attached Stipulation and makes the following:

FINDINGS OF FACT

1. Gerald J. DeLoye, Ph.D., Respondent, date of birth May 5, 1936, is licensed by the Wisconsin Psychology Examining Board as a psychologist in the state of Wisconsin pursuant to license number 1899, which was first granted May 11, 1995.
2. Respondent's last address reported to the Department of Regulation and Licensing is 4010 House Road, Apt. 4, Eau Claire, WI 54701.
3. During the events of this matter, Respondent was and is currently the Clinical Director of Lutheran Counseling & Family Services of Wisconsin (LCFS). As Clinical Director, Respondent provides clinical supervision to all masters level therapists employed by LCFS in its branch offices located in Wauwatosa, Shawano, Sheboygan, Wausau, Park Falls and Eau Claire, Wisconsin.
4. Respondent was physically present to provide clinical supervision at the Wauwatosa office approximately one day each month.
5. The clinic and branch offices used printed forms which contained blanks for the therapists to complete after seeing clients. As part of his clinical supervision of master's level therapists, Respondent was to review and sign the forms, after the therapists completed them. These forms included:

a. "Psychosocial History/Assessment," which contained the language "Reviewed, Evaluated and Approved," immediately above the line for the psychologist's signature. By signing this form, a psychologist represents that he has reviewed, evaluated and approved the history and assessment completed by the therapist.

b. "Psychologist Referral," by which the psychologist refers a patient for psychotherapy as required by § HFS 61.97(5), Wis. Adm. Code. By signing this form, a psychologist represents that he has determined that the patient requires psychotherapy.

c. 90-day review forms. § HFS 61.97(3)(b), Wis. Adm. Code, requires supervision and review of patient progress by the supervising psychologist at least at 30-day intervals for patients receiving 2 or more therapy sessions per week and once every 90 days for patients receiving one or less therapy sessions per week. By signing a 90-day review form, a psychologist represents that he has performed the supervision and review on that date and within the required 90-day period.

6. Respondent signed and provided to the therapists at the Wauwatosa office Psychosocial History/Assessment, Psychologist Referral and 90-day review forms, with the blanks incomplete. It was Respondent's expectation that after seeing clients, the therapists would complete the forms, which Respondent had already signed.

7. By pre-signing the forms before the therapists had performed their tasks and recorded the information on the forms, Respondent failed to accomplish the supervision required by the Wisconsin Administrative Code and which the forms represented had occurred.

CONCLUSIONS OF LAW

1. The Psychology Examining Board has jurisdiction over this matter pursuant to § 455.09, Stats.

2. The Wisconsin Psychology Examining Board has authority to enter into this stipulated resolution of this matter pursuant to § 227.44(5), Stats.

3. Respondent, by providing therapists under his supervision with pre-signed clinical forms, which represented that he had performed tasks required of him by § HFS 61.97, Wis. Adm. Code, which he in fact had not done, has violated laws the circumstances of which substantially relate to the circumstances of the professional practice of psychology, which constitutes unprofessional conduct as defined by § PSY 5.01(5), Wis. Adm. Code, and subjects Respondent to discipline pursuant to § 455.09(1)(g), Stats.

4. Respondent, by providing therapists under his supervision with pre-signed clinical forms, has reported distorted, erroneous, or misleading psychological information, which constitutes unprofessional conduct as defined by § PSY 5.01(7), Wis. Admin. Code, and subjects Respondent to discipline pursuant to § 455.09(1)(g), Stats.

ORDER

NOW, THEREFORE, IT IS HEREBY ORDERED:

1. Respondent, Gerald J. DeLoye, Ph.D., is hereby REPRIMANDED for the conduct set out above.

2. Respondent shall not sign clinical forms until the forms have been completed and Respondent has performed the represented tasks.

3. Respondent shall, within one hundred twenty (120) days of the date of this order, take and complete an ethics course or courses on the subject of ethics totaling a minimum of 16 contact hours, which course(s) shall first be approved by the Board or its designee. Respondent shall, within 30 days of completion of such course or courses, provide evidence of compliance with this paragraph to the Department Monitor.

4. Respondent is prohibited from applying any of the 16 hours completed to satisfy the terms of this order toward satisfaction of the continuing education required during the October 1, 2001 through September 30, 2003 registration biennium.

5. If Respondent is unable to take or complete the course or courses required by the preceding paragraph within 120 days because of illness or other circumstances acceptable to the Board or its designee, Respondent shall, within six months of the date of this order, take and complete the required course or courses, which shall first be approved by the Board or its designee. Respondent shall, within 30 days of completion of such course or courses, provide evidence of compliance with this paragraph to the Department Monitor.

6. Requests for approval of educational programs and notification of completion of educational programs shall be mailed, faxed or delivered to:

Department Monitor

Department of Regulation And Licensing

Division of Enforcement

1400 East Washington Ave.

P.O. Box 8935

Madison, WI 53708-8935

Fax: (608) 266-2264

7. Violation of any term or condition of this Order may constitute grounds for revocation of Respondent's license to practice psychology in Wisconsin. Should the Board determine that there is probable cause to believe that Respondent has violated the terms of this Order, the Board may order that Respondent's license be summarily suspended pending investigation of and hearing on the alleged violation.

The rights of a party aggrieved by this Decision to petition the Board for rehearing and to petition for judicial review are set forth on the attached "Notice of Appeal Information".

Dated at Madison, Wisconsin this 18th day of October, 2001.

Barbara A. Van Horne, Ph.D.

Chairperson

Psychology Examining Board