CAPA COMMENTARY

The Newsletter of the Capital Area Psychological Association



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PRESIDENT'S COLUMN

Dan Roberts, PhD

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Winter is leaving...according to the calendar. Hopefully the freezing days are past as we approach the beginning of the third year of the COVID-19 pandemic. Some of us have had first-hand experience with the illness and some have lost relatives or friends to it. Most have experienced some trepidation over attending events with crowds, especially indoor crowds. Last month a CAPA survey was taken to determine the advisability of returning to regular monthly indoor lunch meetings. Forty seven members responded. Of those, 1 indicated willingness to attend inperson meetings during COVID Risk Stage 5, 1 was willing at Stage 4, 15 at Stage 3, 11 at Stage 2, and 19 wanted to wait until Stage 1. Recently the city of Austin declared a reduction from Stage 5 to Stage 4, so it appears that we will not be able to fill the space at the AT&T facility in the near future. For the time being, virtual meetings will continue as we search for other solutions or wait for herd immunity. That is the bad news and the good news. Virtual meetings provide the basic information we need to operate, but it is not as easy to visit and network during a virtual meeting. And while our ability to meet in person now is somewhat restricted, more opportunities for Professional Development are available online than ever before.

CAPA's new and improved website is up and running. Please log in and surf it as soon as you get a chance. Overall we think it is more user friendly. If you notice any issues or glitches please let us know by emailing me or Amber Nicholson at CAPA Administration. As I browsed through the website I noticed that the Directory section, which is used to



search for a psychologist by location, specialty, etc., only lists 30 psychologist members. This is a free referral service provided by CAPA which is currently a very valuable resource to our community. If you are not listed here and you have a practice or work for a clinic, please consider adding information about yourself and your practice to your profile and Directory profile. The free advertising alone is more than worth the price of membership in CAPA! CAPA can help fill the vacancies in your calendar! If you have not yet renewed your membership for 2022, now is the best time to do it.

March brings the primary elections in Texas to thin out the field of potential political candidates. I hope all of you took the opportunity to participate in self-governance by voting for your favorites. Voting in the primary and in the general election in November is one of our best chances to shape our world and make our own luck this year. Contacting our representatives in Congress and the Texas Legislature and county and city governments to express our preferences is also useful. They are somewhat responsible to their constituents. With that in mind, if you have ideas, suggestions, or requests involving CAPA, please feel free to call or email me or any other CAPA officer anytime.

Dan Roberts, Ph.D. CAPA President 2022

THE NEW CAPA WEBSITE IS LIVE!

Visit the new CAPA website to renew membership, register for upcoming Professional Development events, update Directory Membership, post a classified and more!



https://www.austinpsychologists.net

MARCH MONTHLY MEETING

"PARENTAL ALIENATION: EVALUATION AND TREATMENT ISSUES" PRESENTER: MARY ALVAREZ, PHD

MARCH 11, 2022 12:00 PM - 1:30 PM

1.5 HOURS PROFESSIONAL DEVELOPMENT AVAILABLE MEETING WILL BE HELD USING ZOOM PLATFORM

Learning Objectives:

- Attendees will learn some of the science and research supporting parental alienation as a construct.
- Attendees will be able to differentiate mild, moderate, and severe alienation.
- Attendees will learn the recognized evaluation method and criteria.
- Attendees will learn about treatment directions for parental alienation.



ABOUT THE SPEAKER:



Mary Alvarez, Ph.D.

Mary Alvarez, PhD earned her doctorate in developmental psychology with an emphasis in cognitive development and neurodevelopment from the University of Houston. Dr. Alvarez, a licensed psychologist for twenty-five years in Texas, has both a forensic and a clinical practice and she specializes in evaluating and treating high conflict families. As a result of her forensic work in family law as a custody evaluator, Dr. Alvarez has evaluated and witnessed the devastating psychological effects on children whose parents are involved in chronic high conflict, including parental alienation. Dr. Alvarez recognized the need to focus on prevention and early intervention of parental alienation, so she co-developed Resetting the Family to evaluate and intervene with high conflict parents and families that include mild and moderate parental alienation as part of the conflict. She is also involved in several research projects with university colleagues concerning parental alienation.

CAPITAL AREA PSYCHOLOGICAL ASSOCIATION MEMBERSHIP FORM

Complete the form below to renew or sign up for membership in the Capital Area Psychological Association

2022 Membership Application

MEMBER INFORMATION			
First Name:	Last Name:		Degree:
Office Address:			
Home Address:			
Work Phone :			
Email:			
Webpage:			
PROFESSIONAL INFORM	MATION		
	IATION		
Current Professional Position:			
Current Licensing Information:	Psychologist Provisional C	ertified Psychological Association	ciate Not Licensed
License Number:			
Memberships in other	American Psychological Association	Texas Psychological Associati	ion
professional associations: Oth	ner:		
MEMBERSHIP CATEGOR	IES		
Full Member- \$95 Those who hold either Fellow o	or Member status in the American Psychological Associ Chologist by the Texas State Board of Examiners of Psyc		ciation, or those who possess
Full Member: Semi-Retired Available to members aged 66 50% of the full annual dues.	I- \$47.50 and older having been active members for the previou	ıs ten years who are working less than	n 20 hours a week. Annual dues is
Full Member: Fully-Retired Available to members aged 66 annual dues.	- \$23.75 and older having been active members for the previou	s ten years who are no longer in pract	tice. Annual fee is 25% of the
Full Member: Special Cons If you are experiencing extrem- membership fee. This must be	e financial difficulties or hardships AND are renewing, y	ou may request special consideration	n for a reduction or waiver in
	nsonant with the purposes of the Association who do n y in the community and (2) have a recommendation fro		
Student Member: \$10 Persons who are enrolled in an	accredited college or university and who are pursuing	an undergraduate or graduate degre	e in Psychology
Life Member: Updating Inf	formation Only		
PLEASE RESPOND TO TH	IE FOLLOWING QUESTIONS:		
Has your license to practice ever l	been suspended, revoked or limited by a state l	icensing board?	Yes No
Have you ever been convicted of	a felony?		Yes No
Have you ever been found guilty ethics committee, professional or	of unethical or unprofessional conduct by a loc rganization, or licensing board?	al, state, or national	Yes No
Have you ever been found guilty	of malpractice?		Yes No

CAPITAL AREA PSYCHOLOGICAL ASSOCIATION

INFORMATION & REFERRAL DIRECTORY

Peer Relationships

Stress

idal Ideation

Teaching

This section is to be completed ONLY by FULL MEMBERS who want to be listed in our information and referral service:

I certify that I am a licensed psychologist in good standing with the Texas State Board of Examiners of Psychologists. I certify that I am qualified and competent in the specialty areas that I have indicated below. I have a current professional malpractice insurance policy and I will maintain liability coverage throughout the membership year. I agree to abide by the Code of Ethics of the American Psychological Association and by the guidelines of the Texas State Board of Examiners of Psychologists.

TREATMENT TECHNIQUES & APPROACHES

Please circle or put a check mark next to your top 4 treatment techniques and approaches:

Acceptance & Commitment Therapy (ACT)	Expressive Arts	Mindfulness-Based Cognitive Therapy (MBCT)	Psychodynamic Therapy
Alderian	EMDR	Mindfulness-Based Stress Reduction (MBSR)	Psychological Testing/Evaluation

Art Therapy Family Systems Motivational Interviewing Psychotherapy

Attachment-Based Family/Marital Therapy Multicultural Rational Emotive Behavioral (REBT)

Behavioral Therapy Feminist Music Therapy Reality Therapy

Biofeedback Freudian Narrative Relational Therapy

Child-Parent Psychotherapy (CPP) Gestalt Neurofeedback Rogerian

Clinical Supervision Gottman Method Neuropsychological Testing Sandtray

Cognitive Behavioral Therapy (CBT) Group Therapy Parent-Child Interaction (PCIT) Somatic

Court Evaluations Hypnotherapy Person-Centered Strengths-Based

 Dance/Movement Therapy
 Imago
 Play Therapy
 Systems

 Dialectical Behavioral Therapy (DBT)
 Interpersonal
 Prolonged Exposure Therapy
 Transpersonal

 Disability Evaluation
 Jungian
 Psychoanalytic Therapy
 Trauma-focused

Existential

Abandonment

Caregiver Issues

SPECIALTY AREAS

Please circle or put a check mark next to your top 6 specialty areas:

Chronic Illness

Family Conflict

Abuse Survivors	Chronic Pain	Gambling	Personality Disorders	Testing and Evaluation
ACOA	Chronic Relapse	Gender Identity	Phobias	Trauma

Forensic Psychology

ADD/ADHD College Mental Health Grief/Loss Postpartum Depression Transgender Issues

Addiction Compulsive Behavior Group Therapy Pregnancy/Prenatal/Postpartum Traumatic Brain Injury

Adjustment Disorder Consultation HIV/AIDS Prejudice/Discrimination Weight Control
Adoption Coping Skills Hoarding Process Addiction Women's Issues

Pain Management

Aging Couple's Counseling Hypnosis PTSD

Alcohol Use Crisis Intervention Infertility Racial Identity Anger Management Cultural Adjustment Intellectual Disability Rehabilitation Relational Trauma Anorexia Deaf/Hearing Impaired Internet Addiction Antisocial Personality Disorder Depression Learning Disabilities Relationships LGBTQIA+ Anxiety **Developmental Disorders** Schizophrenia

Attachment Issues Disability Determination Life Transitions Seasonal Affective Disorder (SAD)

Autism Spectrum Disorder Disruptive Mood Dysregulation (DMDD) Loneliness Self-Esteem

Avoidant Personality Disorder Dissociation Marital and Premarital Self-Harming Behaviors

Behavioral Issues Dissociative Identity Disorder Medical/Health Psychology Sex Therapy Sexual Abuse Binge Eating Disorder Divorce Men's Issues Bipolar Disorder Domestic Abuse Military/Veteran's Issues Sexual Addiction **Blended Families** Drug Abuse Multicultural Concerns Sleep Disorders **Body Image Disorders Dual Diagnosis** Narcissistic Personality Disorder **Smoking Cessation**

Borderline Personality Disorder Eating Disorders Neuropsychology Social Anxiety

 Bulimia Nervosa
 Elder Care
 Obsessive Compulsive Disorder
 Somatoform Disorders

 Cancer
 Emotional Abuse
 Oppositional Defiance
 Spirituality/Religion

Career Counseling Exercise Addiction Organizational Development Sports Psychology

Child or Adolescent Family Therapy Panic Disorders Substance Use

CAPITAL AREA PSYCHOLOGICAL ASSOCIATION INFORMATION & REFERRAL DIRECTORY

Insurance A	ccepted				
Please circle or pu	it a check mark next to all	accepted insurance plans:			
I do not cur	rently accept insurance.				
Aetna	Beacon	Covenant Management	Medicaid	Optum	Smart HealthAscensi
Ambetter	Blue Cross Blue Shield	Humana	Medicare	Oscar	Tricare
Anthem	Cigna	Magellan	Optima Health Plan	PHCS/Multiplan	United Healthcare
Other:					
PRACTICE D	ETAILS & APPOI	NTMENT OPTIONS	5		
I am currently see	ing clients: (Check all tha	t apply)			
In-Office	Virtual/Telehealth				
am currently offer	ing the following types of	appointments: (Check all th	nat apply)		
Individual	Couples Fam	nily Group	Workshops/Classes	Colleag	ue Consultation
				Colleage	de Consultation
am currently seeir	ng clients in the following	age ranges: (Check all that	apply)		
Children (Unde	r 6) Children (6-12)	Teenagers (12-18)	Young Adults (18-24)	Adults (24+)	Elders (64+)
My practice is locat	ed: (Check all that apply)				
Central	North South	East Northwest	Southwest Northea	st Southeast	Round Rock
Kyle/Buda	Pflugerville Wimber	rley Georgetown	Cedar Park Leande	r Other:	
anguages Spoken	Fluently: (Check all that a	apply)			
English	Spanish French	ASL Other:			
ONATE TO	CAPA				
would like to make	a voluntary contribution	to the Capital Area Psycholo Ionation in the amount of:	ogical Association to sustai	in CAPA programs aı	nd community
\$10.00	35.00 \$20.00	\$25.00 \$50.00	\$75.00 \$100.00	Other: \$	
TTESTATION	N				
		n here is true. I agree to abi s State Board of Examiners o	-	f the American Psyc	hological

Checks and membership applications can be mailed to:
Capital Area Psychological Association
PO BOX 996, Boerne, TX 78006
capitalareapsychassoc@gmail.com
(512) 451-4983
www.austinpsychologists.net

DATE: _

SIGNATURE: _

CAPA EXECUTIVE COMMITTEE MEETING MINUTES FEBRUARY 11, 2022

The CAPA Executive Committee met on Friday, February 11, 2022 with the following members present: Dan Roberts, PhD, John Godfrey, PhD, Corrine Zupanick, PsyD, Elisabeth Middleton, PhD, David Heckler, PhD, Leena Batra, PhD, Kyle McCall, MA, NCC, and Stephen Kolar, PhD.

Dr. Roberts opened the meeting. He has spoken with Amber Nicholson and the new CAPA website is set to launch in two or three days. He will check the website to make sure it's working well. The board talked about changes to the website. Dr. Middleton praised the new CAPA logo. Dr. Zupanick volunteered to revise the opening text on the website to make it more focused and clear that CAPA is by and for psychologists. She will also check to make sure that the content is up-to-date.

The board discussed CAPA virtual meetings versus in-person meetings in the future. Dr. Roberts reported the results of a survey from members regarding when they would feel comfortable returning to in-person meetings. In order to meet the 40 person commitment that the AT&T Conference Center is seeking per meeting, the survey results suggest Austin would need to be in Stage 1 for Covid cases. Dr. Zupanick talked about how members enjoy the camaraderie, networking, and opportunity to share ideas during in-person meetings. Dr. Middleton raised the question that offering an online option for in-person meetings might mean that many members would continue to join online and not return in-person at all. She suggested CAPA send a reminder notice to Texas Psychological Association for each monthly meeting.

Board members talked about membership numbers and ways to increase them. Dr. Godfrey suggested CAPA target new career psychologists. Dr. Zupanick liked the idea of having CAPA members invite their colleagues to attend meetings and join CAPA. Dr. Roberts noted that CAPA has had 27 more members register since January 2022, but that there are only 20 CAPA life members compared to 48 last year.

Dr. Heckler suggested that virtual CAPA meetings could be free for members and they could bring a guest who attends for free. He contended that that the goal is increasing memberships to CAPA and an increase in members by 50% would yield more money than charging for meetings. There was discussion about this topic and some disagreement. Mr. McCall suggested hosting a one-time virtual mixer for people interested in joining. Dr. Middleton proposed charging for meetings but allowing a first time attendee to not have to pay for that meeting. Dr. Godfrey recommended calculating to see how much money CAPA would make if they did not charge for meetings face-to-face and targeted discounted memberships for early career psychologists for their first year or two. Dr. Roberts suggested looking at the numbers of \$0, \$10, and \$20 per attendee for each meeting to examine how much the money raised per meeting would change. He noted that perhaps guests could come free to a first meeting. Dr. Zupanick proposed an idea that certain monthly meeting would be free for members and their quests. Dr. Godfrey made a motion to have Ms. Nicholson create a spreadsheet to see how finances would change with these various options and the motion was passed unanimously. Dr. Heckler agreed to speak with Ms. Nicholson about creating a spreadsheet.

The board prepared for today's general meeting and presentation. Mr. McCall volunteered to help with Zoom call technical issues. Dr. Roberts mentioned recent TSBEP proposed rule changes and Dr. Middleton reminded him to tell members of these during the general meeting.

CAPA GENERAL MEETING MINUTES FEBRUARY 11, 2022

TDr. Roberts called the meeting to order on Zoom.

Dr. Roberts opened with a proposed TSBEP rule change, that the board would have the option to waive internship due to extenuating circumstances. David Hill, PsyD, reported that if this rule was passed then an individual who has a life events could petition to have the internship waived for licensure. Dr. Zupanick gave input as well on this issue.

Dr. Roberts told members that CAPA continues to seek new members. Membership has increased by 25 since January but CAPA numbers are still behind where they were last year. The CAPA membership task force will continue to work on this issue. Two new visitors to the meeting were welcomed. Dr. Roberts reminded members to renew if they had not yet done so. Dr. Middleton noted that CAPA needs to meet a quota of attendees at each meeting to have meetings at the AT&T Conference Center, yet another reason to increase membership numbers. Dr. Roberts reported that the majority of members surveyed would like Covid to be in stage 1 in Austin before they would meet in-person for meetings again.

The treasury report was given. CAPA has approximately \$30,000 in checking with almost \$20,000 in savings and a CD valued at \$!0,670.. Dr. Roberts reminded members that CAPA would switch to a new website starting tomorrow.

Dr. Middleton introduced today's speaker, Thomas E. Ellis, PsyD, ABPP. Dr. Ellis is a Clinical Professor of Psychiatry in the Menninger Department of Psychiatry and Behavioral Sciences at the Baylor College of Medicine in Houston, Texas. He previously served as Senior Psychologist and Director of Psychology at the Menninger Clinic. His research and publications focus primarily on the problem of suicide. Dr. Ellis' books include Suicide Risk: Assessment and Response Guidelines, Choosing to Live: How to Defeat Suicide through Cognitive Therapy, and Cognition and Suicide: Theory and Practice. His presentation was titled, "Is it Time to Re-Think "Suicide Prevention" As Top Priority in Psychotherapy?"

Dr. Ellis began by talking about the differences between conventional and new generation approaches to working with suicidal patients. The conventional approach provides steps such as the first priority is to keep the patient alive, then make environment safe, then provide encouragement and inspire hope, etc. The biggest mistake with this approach is assuming that the goal of keeping the patient alive is shared by the patient. Often the patient is not invested in staying alive. The second big issue is that treatment often keeps moving forward even if the patient is not on board with the goal of living.

Dr. Ellis discussed the collaborative priorities of a new approach to working with suicidal patients. This includes building a working alliance, gaining a deep understanding of a patient's suffering and need for relief, and developing a partnership toward shared goals. One question to ask, "If you saw your life as worth living would you still want to die?" The therapist and patient work together and develop a plan to stay alive and safe. This can include emphasizing alternative coping skills and problem solving.

CAPA GENERAL MEETING MINUTES FEBRUARY 11, 2022

A new paradigm to address suicidology involves moving from old to new concepts. We move away from the "suicide as a symptom" model and towards suicide is a free standing problem with its own tailor-made interventions. We move towards developing coping skills and a life worth living through a partnership between therapist and patient. We transition from risk factors to warning signs, contracts to collaborative safety planning, from judgement to acceptance. The move from pathology to a needs model seeks to find what a patient needs from relief from to no longer wish to die.

Dr. Ellis discussed the interpersonal theory of suicide from Thomas Joiner, PhD. This theory states that three factors lead to suicide attempts and two of them are interpersonal. Having a sense of thwarted belongingness coupled with perceived burdensomeness to other produces a desire for suicide. A patient then may attempt suicide if they have acquired capability to overcome their fear of death.

The importance of simple understanding of a patients' life situation can yield large benefits. The therapist wants to gain a specific understanding of what happened hours and minutes prior to the suicide attempt. Identifying the "dominoes falling" that led to the attempt is also called behavior chain analysis by Marsha Linehan, PhD. Two big cautions are that empathy alone isn't sufficient for improvement and relationship building with suicidal patients is difficult. A therapist can accept and understand why a patient would seek suicide without endorsing this behavior. This leads to helping the patient realizes there are other methods to gain relief from their pain. Managing a therapist's own emotions about suicide is important, too. Resisting the urge to change the subject and recognizing that the situation is not hopeless are two key points.

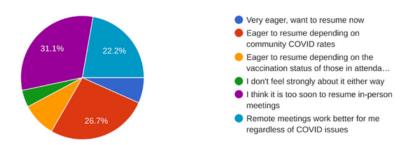
Patients hate reactance and this kills rapport. They do not like being told what to do, especially if they feel like someone is taking away their freedom or autonomy. This can be especially true with young adults and adolescents. There is the concept from Dr. Linehan that people do the best they can under the circumstances, including when they are suicidal. It is natural for a therapist to go into persuasion mode to help a patient. Instead, try saying, "It's really important that I understand why you wish you were dead. Help me understand what makes it difficult for you to find hope?"

Dr. Ellis discussed the collaborative approach from the book Managing Suicidal Risk by David A. Jobes. This book discusses the Collaborative Assessment and Management of Suicidality (CAMS). This method seeks to evaluate suicidal risk and implement a suicide-specific treatment plan that is collaborative and empowering to the patient.

Dr. Ellis addressed questions from the audience. The meeting was adjourned.

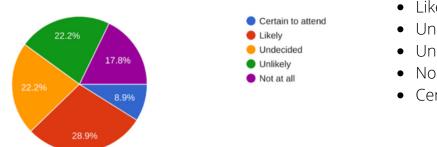
CAPA Membership Survey: Live Versus Virtual Monthly Meetings

Are you ready to return to second Friday luncheon/PD meetings at the AT&T Center? 45 responses



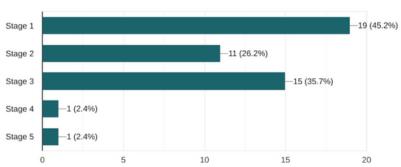
I think it is too soon to resume in-person meetings	14
Eager to resume depending on community COVID rates	12
 Remote meetings work better for me regardless of COVID issues 	10
• Eager to resume depending on the vaccination status of those in attendance	4
 Very eager, want to resume now 	3
I don't feel strongly about it either way	2

How likely are you to attend an in-person event? 45 responses



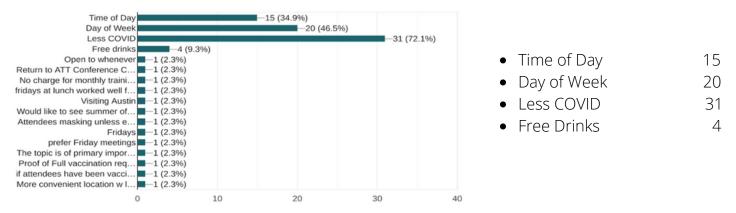
Likely	13
 Undecided 	10
 Unlikely 	10
 No at all 	8
 Certain to attend 	4

At which level of COVID-19 would you be willing to attend such a luncheon? This is a link to the five stages. You can copy and post in your browser: ...3f7l9tuh2v8f52ud2gut22v26sbwl/file/842554812068 $_{\rm 42\,responses}$



•	Stage 1	19
•	Stage 2	11
•	Stage 3	15
•	Stage 4	1
•	Stage 5	1

What might make your attendance at in-person CAPA event more likely? (Check all that apply)



OTHER RESPONSES

- Proof of full vaccination required, outdoor venue, large high-ceiling room, hybrid virtual attendance as an option. Sitting in close quarters, indoor space with a group is not recommended by experts at this time.
- Return to AT&T Center
- I prefer Friday meetings
- Open to whenever
- No charge for monthly trainings, if held virtually
- Fridays at lunch worked well for me
- Visiting Austin
- Would like to see summer offerings also
- Attendees masking unless eating or drinking; distance seating
- Fridays
- Prefer Friday meetings
- The topic is of primary importance to me
- if attendees have been vaccinated
- More convenient location w less traffic at garage
- Assume there is money in savings to cover overhead
- Topic
- "Free Drinks" made me laugh :)
- I live in Colorado
- Event outdoors
- Covid risk is my main concern. Indoor group events is not an option at this stage of Covid, Omicron, and predicted future variants of unknown risk, unknown vaccine efficacy
- Fridays work well, am or lunch, would like an option to continue on zoom (bc I have small kids...) for the flexibility

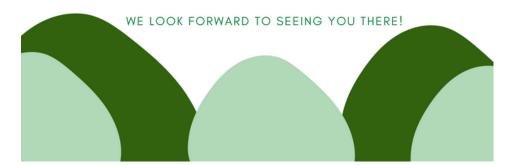
COMMENTS

- I really miss the CAPA meetings. I look forward to coming back when I feel more secure about not contracting Covid.
- It might be a good idea to request that anyone coming to meetings needs to be vaccinated.
- I miss the buffet lunches and seeing everyone. But I will only go if it's a buffet. I am picky about food.
- Would it be possible to have a hybrid of Zoom and in-person so people could have both options?
- We need to have some months of consistent Stage 2-3 for me to believe it is safe enough.
- Speaker
- I know it is such a challenge to figure out this question. One of the lovely things about the zoom meetings is that it has saved on travel time and navigating central Austin traffic. I have appreciated that. Good luck!
- Luncheons don't work well with my testing clients. Evenings would be better.
- It's time to start moving back to "normal" activities.
- I think that all in-person attendees must be required to be vaccinated for the safety of all. Friday at noon continues to be the best day for me to meet.
- The relatively higher potential for transmission with Omicron and with the next variant coming, warrant continued precautions, in my opinion. Further, as we know, hospitals and healthcare workers are maxed out with admissions due to Covid. I feel CAPA can join other organizations who are maintaining precautions, both setting an example and doing what we can to get more of a handle on the virus. Thank you for inviting our input.
- My schedule often does not afford me the opportunity to join in-person meetings, so keeping a virtual option would be nice.
- I much prefer in-person, but realize we need to be flexible with Covid numbers.
- Andy Slavitt's podcast, "In the Bubble" features varied experts who are guiding my risk assessment. I
 have loved-ones who are high risk (Compromised immunity) so my fears are real. Thanks for asking
 these questions and taking stock in members' concerns.
- If we are out of stage 5, attendees were all vaccinated and wore masks, I would attend.
- I'm looking forward to in-person events to better get to know everyone, but I'm ok with zoom until the pandemic is going down. Even if you resume in-person, I think having zoom would also be great! Having 2 small kids and juggling it all makes it helpful to have that option if they need to stay home from school or the class is on a mandated quarantine, etc.
- A combination of virtual and in-person would be best, providing a greater chance of increasing membership and attendance from those further away from the university area.

DID YOU KNOW?

CAPA MEETINGS ARE HELD ON THE SECOND FRIDAY OF EACH MONTH.

JOIN US FOR NETWORKING AND PROFESSIONAL DEVELOPMENT



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CAPA CLASSIFI



Office Space & Opportunities

If you are interested in submitting a classified on CAPA's website, please submit the following information to capitalareapsychassoc@gmail.com

Classified Title Classified Description Contact Name Contact Phone Number

End date for posted classified

Office space ads can be posted for free for up to 3 months. The cost for all other classified listings on the CAPA web site is \$30/up to 3 months. All nonoffice space ads must be prepaid before they will be approved for display. Once you have submitted your classified request, someone from site administration will contact you for payment.

Please note that posting in the CAPA Commentary is a separate process. You should email your ad to the editor for review.

FT South Austin Office Space in 78748 (150sf, \$850)

Contact Name: Ann Stoneson at 512-850-6781 (email preferred at ann@labyrinthhealing.com)

We have one unfurnished 150 sf office in south Austin coming available January 1, 2022. Yes, the office has windows! This office is large enough to run small groups if desired. Rent includes all utilities, paper products, and weekly cleaning service in common areas. The office suite common areas are furnished and designed for practices serving adult clients.

This office is full of amenities, including: two large windows with lots of natural light, soundproofed walls and doors, high ceilings, crown molding, laminate wood floors, 9 foot ceilings, spacious, furnished lobby that seats 6, in suite bathroom, kitchen with full sized fridge and microwave, with pantry room to store your snacks, a peaceful, wooded trail within walking distance, free, ample parking, single story, ADA compliant building, secure, keypad entry lock provides additional privacy for clients and therapists, filtered water offered in the lobby, sound system for ambiance, high speed internet (200/mbps)

Our practice has covid-19 policies in place regarding use of masks in common areas, deferred use of the lobby by clients for the time being, use of a large HEPA air filter in the office common areas, and frequent changes of medical grade return air vents.

The office is a great option for someone seeking a lower-risk and low traffic office space for seeing clients in person.

Ready to come take a look? Have a question? Contact Ann at ann@labyrinthhealing.com or go here for more pictures: https://labyrinthhealing.com/office-space-available

University of Texas at Austin is currently hiring for an Outpatient Psychologist position.

Apply Here: https://faculty.utexas.edu/career/87977

Description

The Department of Psychiatry and Behavioral Sciences at The University of Texas at Austin Dell Medical School, in conjunction with UT Health Austin (UTHA), seeks a wellqualified psychologist to provide time-limited, evidence-based mental health services in their Outpatient Psychotherapy Integrated Practice Unit (IPU). This full-time position includes a non-tenure track Assistant Professor appointment within the Department's Division of Psychology. Opportunities exist to provide psychotherapy supervision and training to psychiatry residents and psychology externs.

Responsibilities

- Provide psychological assessment and short-term individual and group psychotherapy for adults referred from other UTHA clinics in an academic outpatient clinical setting
- Utilize culturally-informed, evidence-based treatment approaches to treat a variety of presenting mental health concerns, including substance misuse
- Develop effective treatment plans and monitor on-going treatment progress
- Coordinate clinical interventions with other interprofessional treatment team members
- Assess and manage mental health emergencies
- Facilitate community referrals as appropriate
- Timely completion of all clinical documentation and submission of required information for billing within the UTHA electronic medical record system
- Participate in program improvement and/or academic efforts to support Department and organizational initiatives
- Compliance with UTHA policies and procedures
- Compliance with all relevant professional, ethical and legal standards

Oualifications

- Doctoral degree from an APA-accredited program in clinical or counseling psychology
- Completion of an APA-accredited psychology internship
- Unrestricted license to practice psychology in the State of Texas, or the ability to obtain prior to appointment
- Demonstrated commitment and competence in providing culturally-informed, evidence-based clinical services for a wide variety of presenting mental health concerns in the outpatient clinical setting
- Competence in providing clinical services both in-person and virtually
- Eligibility and commitment to pursue board certification through the American Board of Professional Psychology
- Eligible for appointment as an assistant professor in the Department of Psychiatry and Behavioral Sciences
- Bilingual in Spanish and English preferred
- Prior experience working in an academic medical setting preferred



CAPA Officers & Chairs:

President: Dan Roberts, PhD drroberts78681@gmail.com (512) 669-2799

President Elect: Corinne Zupanick, PhD drcez2@gmail.com

Past President: John Godfrey, PhD johng23447@gmail.com (737) 202-5789

Vice President: Elisabeth Middleton, PhD elisabeth@emiddletonphd.com (512) 517-4812

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