

BOARD OF COUNSELING
QUARTERLY BOARD MEETING
Friday, November 4, 2016 – 10:00 a.m.
Second Floor – Perimeter Center, Board Room 2

10:00 a.m. Call to Order – Kevin Doyle, Ed.D., LPC, LSATP, Chairperson

- I. **Welcome and Introductions**
 - A. Emergency evacuation instructions
- II. **Adoption of Agenda**
- III. **Approval of Minutes***
 - A. Board meeting minutes of August 19, 2016
- IV. **Public Comment**
- V. **Agency Director's Report: David E. Brown, D.C.**
- VI. **Staff Reports**
 - A. Executive Director's Report: Jaime Hoyle
 - B. Deputy Executive Director's Report: Jennifer Lang
 - a. Discipline Report
 - C. Licensing Manager's Report: Charlotte Lenart
 - a. Licensing Report
 - D. Board Counsel Report: James Rutkowski
- VII. **Committee Reports**
 - A. Board of Health Professions Report: Kevin Doyle
 - B. Regulatory Committee Report: Charles Gressard, Ph.D., LPC, LMFT, LSATP
- VIII. **Unfinished Business**
 - A. AMFTRB English Language Learners (ELL) Accommodations
- IX. **New Business**
 - A. Regulatory/Legislative Report: Elaine Yeatts, Senior Policy Analyst*
 - a. Regulatory Actions
 - i. Status of regulations
 - ii. Adoption of final amendments for a fee increase
 - b. Legislative Proposal
 - B. Supervisor Summit Overview/Comments
 - C. Workforce Survey 2016 Results – Elizabeth Carter, Ph.D., Director, DHP Healthcare Workforce Data Center
 - D. Next Meeting

12:00 p.m. Adjournment

Approval of Minutes of
August 19, 2016

THE VIRGINIA BOARD OF COUNSELING
MINUTES
Friday, August 19, 2016

The Virginia Board of Counseling ("Board") meeting convened at 1:07 p.m. on Friday, August 19, 2016, at the Department of Health Professions, 9960 Mayland Drive, Richmond, Virginia. Kevin Doyle, Chair called the meeting to order.

PRESIDING: Kevin Doyle, Ed.D., LPC, LSATP

BOARD MEMBERS PRESENT: Johnston Brendel, Ed.D., LPC, LMFT
Cinda Caiella, LMFT
Charles Gressard, Ph.D., LPC, LMFT, LSATP
Danielle Hunt, LPC
Bev-Freda Jackson, Citizen Member
Sandra Malawer, LPC, LMFT
Phyllis Pugh, LPC, LMFT, CSAC
Vivian Sanchez-Jones, Citizen Member
Holly Tracy, LPC, LMFT

BOARD MEMBERS ABSENT: Terry Tinsley, Ph.D., LPC, LMFT, NCC, CSOTP
Jane Nevins, LPC, LSATP

STAFF PRESENT: David Brown, DC, DHP Director
Lisa Hahn, DHP Chief Deputy
Jaime Hoyle, Executive Director
Jennifer Lang, Deputy Executive Director
Charlotte Lenart, Licensing Manager
Sarah Georgen, Licensing Manager (CSAC & CSAC-A only)
Christy Evans, Discipline Case Specialist
Elaine Yeatts, DHP Senior Policy Analyst

BOARD COUNSEL: Erin Barrett, Assistant Attorney General

WELCOME:

Dr. Doyle welcomed new and returning Board Members for their dedication and service, announced the Emergency Egress procedures, and read the mission statement of the Department of Health Professions, which was also the mission statement of the Board.

ADOPTION OF AGENDA:

The agenda was accepted as written.

APPROVAL OF MINUTES:

Dr. Brendel made a motion to approve the May 20, 2016 meeting minutes as written. The motion was seconded and carried.

PUBLIC COMMENT:

No public comment.

DIRECTOR'S REPORT:

Dr. Brown welcomed Dr. Jackson and Dr. Tinsley to the Board and thanked the current and past Board members for their service and time. Dr. Brown stated that as part of new legislation last year, the Board of Counseling was reduced to twelve members. Dr. Brown recognized and congratulated Ms. Lenart for her new position as licensing manager for the Board of Counseling. In addition, Dr. Brown announced that Corrie Wolf is the new Executive Director for the Boards of Funeral Directors and Embalmers, Long-Term Care Administrators, and Physical Therapy. Dr. Brown reminded Board members about the Board Member training scheduled for Monday, October 24, 2016.

EXECUTIVE DIRECTOR'S REPORT:

Ms. Hoyle congratulated Ms. Lenart on her new position with the Board. Ms. Lenart was previously with the Board of Social Work as the Licensing Specialist for the last five years.

The Behavioral Science Unit is now fully staffed. Ms. Hoyle feels confident that staff will continue to make improvements to the website, applications, forms, and communication.

Ms. Hoyle detailed that staff and Board members have been active over the past couple of months attending meetings and conferences. Ms. Hoyle, Ms. Lang and Ms. Pugh attended the National Board of Certified Counselors (NBCC) Conference held in May in Washington D.C. This conference allowed for networking, discussion regarding mobility, and also identified that the exam registration process is now online. Additionally, Dr. Doyle, Ms. Hahn, and Ms. Hoyle participated in the Department of Medicaid Assistance Services (DMAS) Substance Use Disorder "SUD" Waiver Workgroup to provide input on the role of Certified Substance Abuse Counselors (CSACs). The goal of the Workgroup is to improve and expand substance use services to the Commonwealth. There has also been ongoing discussion regarding the role of peer recovery support specialists and who can provide supervision. DMAS, DHP and the Department of Behavioral Health and Developmental Services (DBHDS) plan to introduce legislation to register peer recovery support specialists and qualified mental health professionals with the Board of Counseling. Requiring registration will ensure accountability and transparency to the public and allow employers and insurers to trust in the qualifications of those providers without having to do the vetting themselves.

Dr. Brown added that when he first became Agency Director, he constantly got complaints about the Board of Counseling and the length of time it took to issue licenses. He said that the Executive Director and staff collaborated to improve processes and now they have eliminated the backlog and improved the process time. The peer and QMHP legislation is just another example of these collaborative efforts. Ms. Hoyle and Ms. Lang worked with DMAS and DBHDS to find a solution to the peer structure and in doing so helped solve a problem with the QMHPs that has existed since before Dr. Brown started his position. Now there will not be competing definitions, there will be accountability and transparency and a streamlined process.

Ms. Yeatts stated that as it stands now, the legislation is just in draft form. The agencies have agreed but it still has to go through the review process. If everything goes as planned, the new legislation would be introduced during the 2017 General Assembly.

DEPUTY EXECUTIVE DIRECTOR'S REPORT:

Ms. Lang stated that she recently presented to the Counselor Education class at Virginia Commonwealth University (VCU) as part of the continuing outreach efforts by the Board.

Ms. Lang presented the Board's disciplinary statistics. There are 103 open cases:

- 9 with the Administrative Process Division (APD)
- 10 in the Informal Conference Committee (IFC)/Formal Hearing process
- 19 in Enforcement under investigation
- 65 ready for probable cause review.

Some of the IFC's are credentials matters and should be heard by the Agency Subordinate in October or November. The recommended decisions by the Agency Subordinate will come to the board for a vote before an Order is entered.

The Board is addressing the backlog of cases, but it will take time to get completely caught up. Specifically, to address the backlog, staff will send cases to each board member once per month and ask that board members review the cases within 30 days, unless otherwise noted. Once the backlog is fully addressed, cases will be sent for review when received.

LICENSING MANAGER'S REPORT:

Ms. Lenart thanked the Board and staff for its support. Ms. Lenart indicated that as of the end of Quarter 4 for the 2016 Fiscal Year (April 1, 2016 – June 30, 2016), the Board of Counseling regulated 7,808 licensees. As of the last Board meeting, the Board licensed 153 individuals. The Board of Counseling staff is very dedicated and working diligently to process applications and respond to emails and phone calls. Since the last Board meeting in May staff has reviewed 1,244 applications and additional documentation related to the application process. This number includes a count for each time an application is incomplete and staff is required to follow-up with an applicant, as well as complete applications that move forward through the credentialing review process.

New regulations will be effective August 24, 2016. Staff is working diligently to update the forms, applications, and license process handbook. To notify applicants and licensees of the changes, the Board of Counseling home page was updated and an email blast will be sent on August 19, 2016 regarding the changes in the requirements.

BOARD COUNSEL REPORT:

No report.

BOARD OF HEALTH PROFESSIONS REPORT:

Dr. Doyle indicated that he attended the Board of Health Professions meeting on August 18, 2016. They reviewed the proposed budget of \$33 million. They discussed the revenue issues with 1 year versus 2 licensure renewals, and revenue flow for two year licensure is a real roller coaster. They discussed the issue of psychological assessments, who can do them, and what this term means. The Board of

Psychology did not have a representative at the meeting, so there was no further movement. Dr. Doyle noted that collaboration had begun with the Board of Psychology around this issue but he has not heard anything more. Ms. Hoyle stated that the Board of Psychology would submit a draft guidance document on psychological assessments and the Board of Counseling would review the document. The goal would be to have agreement between the boards and a joint guidance document issued. Currently, though, the Board of Psychology's meeting was canceled because it was slated to occur when they were in between Board members. The Board member, Dr. Hathaway, who was writing the document, was not reappointed. Ms. Hoyle is going to work with the current chair and vice-chair on developing the guidance document before the next meeting.

REGULATORY COMMITTEE REPORT:

Dr. Gressard has been very busy and has had two subcommittee meetings and one regulatory meeting for the neglected CSAC regulations. He said that CSACs are getting much needed positive attention, and the committee is making progress. Dr. Gressard presented the recommendations from the subcommittee to the regulatory committee. He said the recommendations make much needed improvements.

Dr. Gressard discussed the motion made by Dr. Brendal on the behalf of the Regulatory Committee, that the Board publish a Notice of Intended Regulatory Action ("NOIRA") notice to amend the Regulations Governing the Certification of Substance Abuse Counselors and Substance Abuse Counseling Assistants. Dr. Doyle called for a vote and the motion carried.

Dr. Gressard stated that the Committee discussed the need to clarify the national certifications accepted for endorsement of a Certification of Substance Abuse Counselors certification. Dr. Brendel made a motion that the Committee accept the National Certified Addiction Counselor, Level II (NCAC II) and Master Addiction Counselor with Co-Occurring Disorders Component ("MAC") accreditations from NAADAC, The Association and the Addiction Professionals and the Advanced Alcohol & Drug Counselor ("AADC") accreditation from International Certification & Reciprocity Consortium ("IC&RC") to be published in a guidance document. Dr. Doyle called for a vote and the motion carried

Dr. Doyle asked that the Board and staff look at the by-laws to see if there are changes needed.

UNFINISHED BUSINESS:

Dr. Doyle discussed the upcoming Supervisor Summit. Originally, the Board agreed to hold two summits: an education and a supervisor summit. Because of the strong interest in supervision, the Board decided to hold the education summit in the Spring and hold two summits in September focused on Supervision. At the Summit, the Board members need to present what the regulations state about residency and supervisor qualifications. They also want to address issues staff has identified and recurring questions regarding what it means to supervise. Residents outnumber LPCs. There is an end in time supervision.

Dr. Doyle asked how many Board members could attend on the 9th. Dr. Hunt, Ms. Tracy, Dr. Doyle, maybe Dr. Brendal and Ms. Nevins currently plan to attend.

The summit is a public meeting and notice needs to be posted.

NEW BUSINESS:

Ms. Yeatts provided information on the Public Participation Guidelines (“PPG”) to conform the regulations to the Code of Virginia which allows counsel or other representatives the opportunity to provide online public comment.

Dr. Gressard made a motion to adopt the amendments to PPG Regulations of the Board of Counseling 18VAC140-11-50(A) to conform changes in Regulation to the Code of Virginia by fast-track action be approved as written. The motion was seconded and carried.

Ms Yeatts provided information on the regulatory actions as of August 11, 2016 for the Board of Counseling.

- The CACREP regulations are still in the Governor’s office.
- The regulations that will increase fees have been accepted for publication. The public hearing will be held on September 22, 2016.
- The periodic review regulations become effective 8/24/2016.

Ms. Yeatts discussed House Bill 319 which requires a Board to promulgate regulations allowing for continuing education credit through the volunteer delivery of health care services to low-income individuals receiving health services through a local health department or a free clinic organized in whole or primarily for the delivery of those health services.

Ms. Yeatts recommended that up to two hours of the required 20 hours for annual renewal be satisfied through delivery of counseling services, without compensation, to low-income individuals received health services through a local health department or a free clinic organized in whole or primarily for the delivery of those services. One hour of continuing education may be credited for three hours of providing such volunteer services, as documented by the health department or free clinic. Dr. Doyle called for a vote to adopt the amendment to the regulations as presented. Motioned passed.

Ms. Yeatts discussed the concept of the legislative proposal discussed early to register peer support specialist and qualified mental health professionals. At this stage there are still details to be decided.

Dr. Doyle discussed some of the more significant changes to the Regulations that took effective August 24, 2016.

Ms. Hoyle discussed a letter received from The Association of Marriage and Family Therapy Regulatory Boards (AMFTRB) asking the Board to decide if they would approve special accommodations for English Language Learners. The request was tabled for board staff to review further.

Dr. Doyle announced that the next full Board is scheduled for on November 4, 2016 and reviewed the schedule for 2017.

ADJOURNMENT:

There being no further business to come before the Board, the meeting was adjourned at 3:03 p.m.

Kevin Doyle, Chair

Jaime Hoyle, Executive Director

DRAFT

Executive Director's Report

Virginia Department of Health Professions
Cash Balance
As of September 30, 2016

	<u>109 Counseling</u>
Board Cash Balance as of June 30, 2016	\$ 674,099
YTD FY17 Revenue	81,075
Less: YTD FY17 Direct and In-Direct Expenditures	<u>247,219</u>
Board Cash Balance as September 30, 2016	<u><u>507,954</u></u>

Virginia Department of Health Professions

Revenue and Expenditures Summary

Department 10900 - Counseling

For the Period Beginning July 1, 2016 and Ending September 30, 2016

Account Number	Account Description	Amount	Budget	Amount Under/(Over) Budget	% of Budget
4002400 Fee Revenue					
4002401	Application Fee	40,755.00	42,140.00	1,385.00	96.71%
4002406	License & Renewal Fee	26,015.00	661,645.00	635,630.00	3.93%
4002407	Dup. License Certificate Fee	270.00	450.00	180.00	60.00%
4002408	Board Endorsement - In	795.00	-	(795.00)	0.00%
4002409	Board Endorsement - Out	850.00	1,450.00	600.00	58.62%
4002421	Monetary Penalty & Late Fees	6,015.00	3,410.00	(2,605.00)	176.39%
4002430	Board Changes Fee	6,050.00	-	(6,050.00)	0.00%
4002432	Misc. Fee (Bad Check Fee)	35.00	140.00	105.00	25.00%
4002660	Administrative Fees	150.00	-	(150.00)	0.00%
	Total Fee Revenue	80,935.00	709,235.00	628,300.00	11.41%
4003000 Sales of Prop. & Commodities					
4003020	Misc. Sales-Dishonored Payments	140.00	-	(140.00)	0.00%
	Total Sales of Prop. & Commodities	140.00	-	(140.00)	0.00%
	Total Revenue	81,075.00	709,235.00	628,160.00	11.43%
5011110 Employer Retirement Contrib.					
5011120	Fed Old-Age Ins- Sal St Emp	2,744.94	6,388.00	3,643.06	42.97%
5011140	Group Insurance	417.47	1,094.00	676.53	38.16%
5011150	Medical/Hospitalization Ins.	5,402.50	37,512.00	32,109.50	14.40%
5011160	Retiree Medical/Hospitalizatn	375.13	986.00	610.87	38.05%
5011170	Long term Disability Ins	212.80	552.00	339.20	38.55%
	Total Employee Benefits	13,380.66	57,796.00	44,415.34	23.15%
5011200 Salaries					
5011230	Salaries, Classified	33,816.99	83,494.00	49,677.01	40.50%
5011250	Salaries, Overtime	2,785.03	-	(2,785.03)	0.00%
	Total Salaries	36,602.02	83,494.00	46,891.98	43.84%
5011300 Special Payments					
5011310	Bonuses and Incentives	1,000.00	-	(1,000.00)	0.00%
5011380	Deferred Compnstn Match Prmts	35.00	960.00	925.00	3.65%
	Total Special Payments	1,035.00	960.00	(75.00)	107.81%
5011600 Terminatn Personal Svce Costs					
5011660	Defined Contribution Match - Hy	150.67	-	(150.67)	0.00%
	Total Terminatn Personal Svce Costs	150.67	-	(150.67)	0.00%
5011930 Turnover/Vacancy Benefits					
	Total Personal Services	51,168.35	142,250.00	91,081.65	35.97%
5012000 Contractual Svcs					
5012100 Communication Services					
5012110	Express Services	-	295.00	295.00	0.00%
5012140	Postal Services	3,876.50	8,232.00	4,355.50	47.09%
5012150	Printing Services	-	120.00	120.00	0.00%

Virginia Department of Health Professions

Revenue and Expenditures Summary

Department 10900 - Counseling

For the Period Beginning July 1, 2016 and Ending September 30, 2016

Account Number	Account Description	Amount			% of Budget
		Amount	Budget	Under/(Over) Budget	
5012160	Telecommunications Svcs (VITA)	185.62	900.00	714.38	20.62%
	Total Communication Services	4,062.12	9,547.00	5,484.88	42.55%
5012200	Employee Development Services				
5012210	Organization Memberships	-	500.00	500.00	0.00%
	Total Employee Development Services	-	500.00	500.00	0.00%
5012300	Health Services				
5012360	X-ray and Laboratory Services	-	140.00	140.00	0.00%
	Total Health Services	-	140.00	140.00	0.00%
5012400	Mgmnt and Informational Svcs				
5012420	Fiscal Services	11,487.51	9,280.00	(2,207.51)	123.79%
5012440	Management Services	48.16	134.00	85.84	35.94%
5012460	Public Infrmtnl & Relatn Svcs	402.00	5.00	(397.00)	8040.00%
5012470	Legal Services	175.00	475.00	300.00	36.84%
	Total Mgmnt and Informational Svcs	12,112.67	9,894.00	(2,218.67)	122.42%
5012500	Repair and Maintenance Svcs				
5012530	Equipment Repair & Maint Srvc	169.00	-	(169.00)	0.00%
5012560	Mechanical Repair & Maint Srvc	-	34.00	34.00	0.00%
	Total Repair and Maintenance Svcs	169.00	34.00	(135.00)	497.06%
5012600	Support Services				
5012630	Clerical Services	17,122.70	110,551.00	93,428.30	15.49%
5012640	Food & Dietary Services	374.86	1,075.00	700.14	34.87%
5012660	Manual Labor Services	29.82	1,170.00	1,140.18	2.55%
5012670	Production Services	174.17	5,380.00	5,205.83	3.24%
5012680	Skilled Services	3,947.65	16,764.00	12,816.35	23.55%
	Total Support Services	21,649.20	134,940.00	113,290.80	16.04%
5012800	Transportation Services				
5012820	Travel, Personal Vehicle	1,553.44	4,979.00	3,425.56	31.20%
5012850	Travel, Subsistence & Lodging	349.77	1,950.00	1,600.23	17.94%
5012880	Trvl, Meal Reimb- Not Rprtble	239.50	988.00	748.50	24.24%
	Total Transportation Services	2,142.71	7,917.00	5,774.29	27.06%
	Total Contractual Svcs	40,135.70	162,972.00	122,836.30	24.63%
5013000	Supplies And Materials				
5013100	Administrative Supplies				
5013120	Office Supplies	250.88	597.00	346.12	42.02%
	Total Administrative Supplies	250.88	597.00	346.12	42.02%
5013600	Residential Supplies				
5013630	Food Service Supplies	-	183.00	183.00	0.00%
	Total Residential Supplies	-	183.00	183.00	0.00%
	Total Supplies And Materials	250.88	780.00	529.12	32.16%
5014000	Transfer Payments				
5014100	Awards, Contrib., and Claims				

Virginia Department of Health Professions

Revenue and Expenditures Summary

Department 10900 - Counseling

For the Period Beginning July 1, 2016 and Ending September 30, 2016

Account Number	Account Description	Amount			
		Amount	Budget	Under/(Over) Budget	% of Budget
5014130	Premiums	260.00	-	(260.00)	0.00%
	Total Awards, Contrib., and Claims	260.00	-	(260.00)	0.00%
	Total Transfer Payments	260.00	-	(260.00)	0.00%
5015000	Continuous Charges				
5015100	Insurance-Fixed Assets				
5015160	Property Insurance	-	46.00	46.00	0.00%
	Total Insurance-Fixed Assets	-	46.00	46.00	0.00%
5015300	Operating Lease Payments				
5015340	Equipment Rentals	134.16	540.00	405.84	24.84%
5015350	Building Rentals	15.39	-	(15.39)	0.00%
5015360	Land Rentals	-	60.00	60.00	0.00%
5015390	Building Rentals - Non State	2,882.93	11,046.00	8,163.07	26.10%
	Total Operating Lease Payments	3,032.48	11,646.00	8,613.52	26.04%
5015500	Insurance-Operations				
5015510	General Liability Insurance	-	170.00	170.00	0.00%
5015540	Surety Bonds	-	11.00	11.00	0.00%
	Total Insurance-Operations	-	181.00	181.00	0.00%
	Total Continuous Charges	3,032.48	11,873.00	8,840.52	25.54%
5022000	Equipment				
5022200	Educational & Cultural Equip				
5022240	Reference Equipment	-	77.00	77.00	0.00%
	Total Educational & Cultural Equip	-	77.00	77.00	0.00%
5022600	Office Equipment				
5022610	Office Appurtenances	-	42.00	42.00	0.00%
	Total Office Equipment	-	42.00	42.00	0.00%
	Total Equipment	-	119.00	119.00	0.00%
	Total Expenditures	94,847.41	317,994.00	223,146.59	29.83%
Allocated Expenditures					
20100	Behavioral Science Exec	39,478.54	198,994.00	159,515.47	19.84%
30100	Data Center	34,918.48	172,208.82	137,290.34	20.28%
30200	Human Resources	1,565.03	30,041.86	28,476.83	5.21%
30300	Finance	19,418.93	53,220.18	33,801.25	36.49%
30400	Director's Office	8,718.91	31,302.39	22,583.48	27.85%
30500	Enforcement	33,164.43	141,845.22	108,680.79	23.38%
30600	Administrative Proceedings	5,629.11	34,288.08	28,658.97	16.42%
30700	Impaired Practitioners	80.51	266.04	185.53	30.26%
30800	Attorney General	732.07	2,890.15	2,158.08	25.33%
30900	Board of Health Professions	3,899.35	20,640.36	16,741.02	18.89%
31100	Maintenance and Repairs	-	673.47	673.47	0.00%
31300	Emp. Recognition Program	317.59	384.46	66.87	82.61%
31400	Conference Center	214.75	354.11	139.35	60.65%

Virginia Department of Health Professions

Revenue and Expenditures Summary

Department 10900 - Counseling

For the Period Beginning July 1, 2016 and Ending September 30, 2016

Account Number	Account Description	Amount	Budget	Amount	% of Budget
				Under/(Over)	
				Budget	
31500	Pgm Devlpmt & Implmentn	4,234.19	15,970.58	11,736.40	26.51%
	Total Allocated Expenditures	<u>152,371.89</u>	<u>703,079.73</u>	<u>550,707.84</u>	<u>21.67%</u>
	Net Revenue in Excess (Shortfall) of Expenditures	<u>\$ (166,144.30)</u>	<u>\$ (311,838.73)</u>	<u>\$ (145,694.43)</u>	<u>53.28%</u>

Virginia Department of Health Professions

Revenue and Expenditures Summary

Department 10900 - Counseling

For the Period Beginning July 1, 2016 and Ending September 30, 2016

Account Number	Account Description	July	August	September	Total
4002400	Fee Revenue				
4002401	Application Fee	12,100.00	13,820.00	14,835.00	40,755.00
4002406	License & Renewal Fee	20,830.00	3,850.00	1,335.00	26,015.00
4002407	Dup. License Certificate Fee	40.00	125.00	105.00	270.00
4002408	Board Endorsement - In	795.00	-	-	795.00
4002409	Board Endorsement - Out	100.00	350.00	400.00	850.00
4002421	Monetary Penalty & Late Fees	4,395.00	1,265.00	355.00	6,015.00
4002430	Board Changes Fee	2,125.00	2,175.00	1,750.00	6,050.00
4002432	Misc. Fee (Bad Check Fee)	-	-	35.00	35.00
4002660	Administrative Fees	150.00	-	-	150.00
	Total Fee Revenue	40,535.00	21,585.00	18,815.00	80,935.00
4003000	Sales of Prop. & Commodities				
4003020	Misc. Sales-Dishonored Payments	-	-	140.00	140.00
	Total Sales of Prop. & Commodities	-	-	140.00	140.00
	Total Revenue	40,535.00	21,585.00	18,955.00	81,075.00
5011000	Personal Services				
5011100	Employee Benefits				
5011110	Employer Retirement Contrib.	1,615.36	1,057.26	1,555.20	4,227.82
5011120	Fed Old-Age Ins- Sal St Emp	939.04	852.67	953.23	2,744.94
5011140	Group Insurance	153.77	105.74	157.96	417.47
5011150	Medical/Hospitalization Ins.	2,276.50	1,563.00	1,563.00	5,402.50
5011160	Retiree Medical/Hospitalizatn	137.61	95.24	142.28	375.13
5011170	Long term Disability Ins	79.92	53.28	79.60	212.80
	Total Employee Benefits	5,202.20	3,727.19	4,451.27	13,380.66
5011200	Salaries				
5011230	Salaries, Classified	12,108.12	10,065.41	11,643.46	33,816.99
5011250	Salaries, Overtime	861.36	593.72	1,329.95	2,785.03
	Total Salaries	12,969.48	10,659.13	12,973.41	36,602.02
5011310	Bonuses and Incentives	-	1,000.00	-	1,000.00
5011380	Deferred Compnstrn Match Prmts	15.00	10.00	10.00	35.00
	Total Special Payments	15.00	1,010.00	10.00	1,035.00
5011600	Terminatn Personal Svce Costs				
5011660	Defined Contribution Match - Hy	47.49	31.66	71.52	150.67
	Total Terminatn Personal Svce Costs	47.49	31.66	71.52	150.67
	Total Personal Services	18,234.17	15,427.98	17,506.20	51,168.35
5012000	Contractual Svcs				
5012100	Communication Services				
5012140	Postal Services	1,621.14	1,683.00	572.36	3,876.50

Virginia Department of Health Professions

Revenue and Expenditures Summary

Department 10900 - Counseling

For the Period Beginning July 1, 2016 and Ending September 30, 2016

Account Number	Account Description	July	August	September	Total
5012160	Telecommunications Svcs (VITA)	55.20	74.07	56.35	185.62
	Total Communication Services	1,676.34	1,757.07	628.71	4,062.12
5012400	Mgmnt and Informational Svcs				
5012420	Fiscal Services	4,155.41	6,799.51	532.59	11,487.51
5012440	Management Services	-	48.16	-	48.16
5012460	Public Infmrtnl & Relatn Svcs	195.00	99.00	108.00	402.00
5012470	Legal Services	-	175.00	-	175.00
	Total Mgmnt and Informational Svcs	4,350.41	7,121.67	640.59	12,112.67
5012500	Repair and Maintenance Svcs				
5012530	Equipment Repair & Maint Srvc	-	169.00	-	169.00
	Total Repair and Maintenance Svcs	-	169.00	-	169.00
5012600	Support Services				
5012630	Clerical Services	4,282.98	5,769.93	7,069.79	17,122.70
5012640	Food & Dietary Services	265.78	63.33	45.75	374.86
5012660	Manual Labor Services	6.84	19.17	3.81	29.82
5012670	Production Services	60.20	90.22	23.75	174.17
5012680	Skilled Services	1,204.08	1,099.91	1,643.66	3,947.65
	Total Support Services	5,819.88	7,042.56	8,786.76	21,649.20
5012800	Transportation Services				
5012820	Travel, Personal Vehicle	69.12	362.88	1,121.44	1,553.44
5012850	Travel, Subsistence & Lodging	-	-	349.77	349.77
5012880	Trvl, Meal Reimb- Not Rprtble	-	-	239.50	239.50
	Total Transportation Services	69.12	362.88	1,710.71	2,142.71
	Total Contractual Svcs	11,915.75	16,453.18	11,766.77	40,135.70
5013000	Supplies And Materials				
5013100	Administrative Supplies				-
5013120	Office Supplies	28.20	36.61	186.07	250.88
	Total Administrative Supplies	28.20	36.61	186.07	250.88
	Total Supplies And Materials	28.20	36.61	186.07	250.88
5014000	Transfer Payments				
5014100	Awards, Contrib., and Claims				
5014130	Premiums	-	-	260.00	260.00
	Total Awards, Contrib., and Claims	-	-	260.00	260.00
	Total Transfer Payments	-	-	260.00	260.00
5015000	Continuous Charges				
5015300	Operating Lease Payments				
5015340	Equipment Rentals	46.00	44.08	44.08	134.16

Virginia Department of Health Professions

Revenue and Expenditures Summary

Department 10900 - Counseling

For the Period Beginning July 1, 2016 and Ending September 30, 2016

Account Number	Account Description	July	August	September	Total
5015350	Building Rentals	-	15.39	-	15.39
5015390	Building Rentals - Non State	914.20	1,054.53	914.20	2,882.93
	Total Operating Lease Payments	960.20	1,114.00	958.28	3,032.48
	Total Continuous Charges	960.20	1,114.00	958.28	3,032.48
	Total Expenditures	31,138.32	33,031.77	30,677.32	94,847.41
	Net Revenue in Excess (Shortfall) of Expenditures Before Allocated Expenditures	\$ 9,396.68	\$ (11,446.77)	\$ (11,722.32)	(13,772.41)
	Allocated Expenditures				
20100	Behavioral Science Exec	17,164.25	11,325.03	10,989.27	39,478.54
30100	Data Center	11,236.76	16,936.25	6,745.47	34,918.48
30200	Human Resources	70.91	1,401.20	92.93	1,565.03
30300	Finance	9,598.81	6,026.91	3,793.22	19,418.93
30400	Director's Office	3,425.77	2,556.14	2,737.00	8,718.91
30500	Enforcement	15,332.56	9,226.20	8,605.67	33,164.43
30600	Administrative Proceedings	302.79	2,533.86	2,792.46	5,629.11
30700	Impaired Practitioners	41.69	19.58	19.24	80.51
30800	Attorney General	-	-	732.07	732.07
30900	Board of Health Professions	1,463.13	1,272.98	1,163.24	3,899.35
31300	Emp. Recognition Program	66.29	251.30	-	317.59
31400	Conference Center	29.09	26.95	158.72	214.75
31500	Pgm Devlpmnt & Implmntn	1,682.78	1,206.45	1,344.95	4,234.19
	Total Allocated Expenditures	60,414.82	52,782.84	39,174.23	152,371.89
	Net Revenue in Excess (Shortfall) of Expenditures	\$ (51,018.14)	\$ (64,229.61)	\$ (50,896.55)	\$ (166,144.30)

Deputy Executive Director's Report



AVERAGE TIME TO CLOSE A CASE (IN DAYS) PER QUARTER

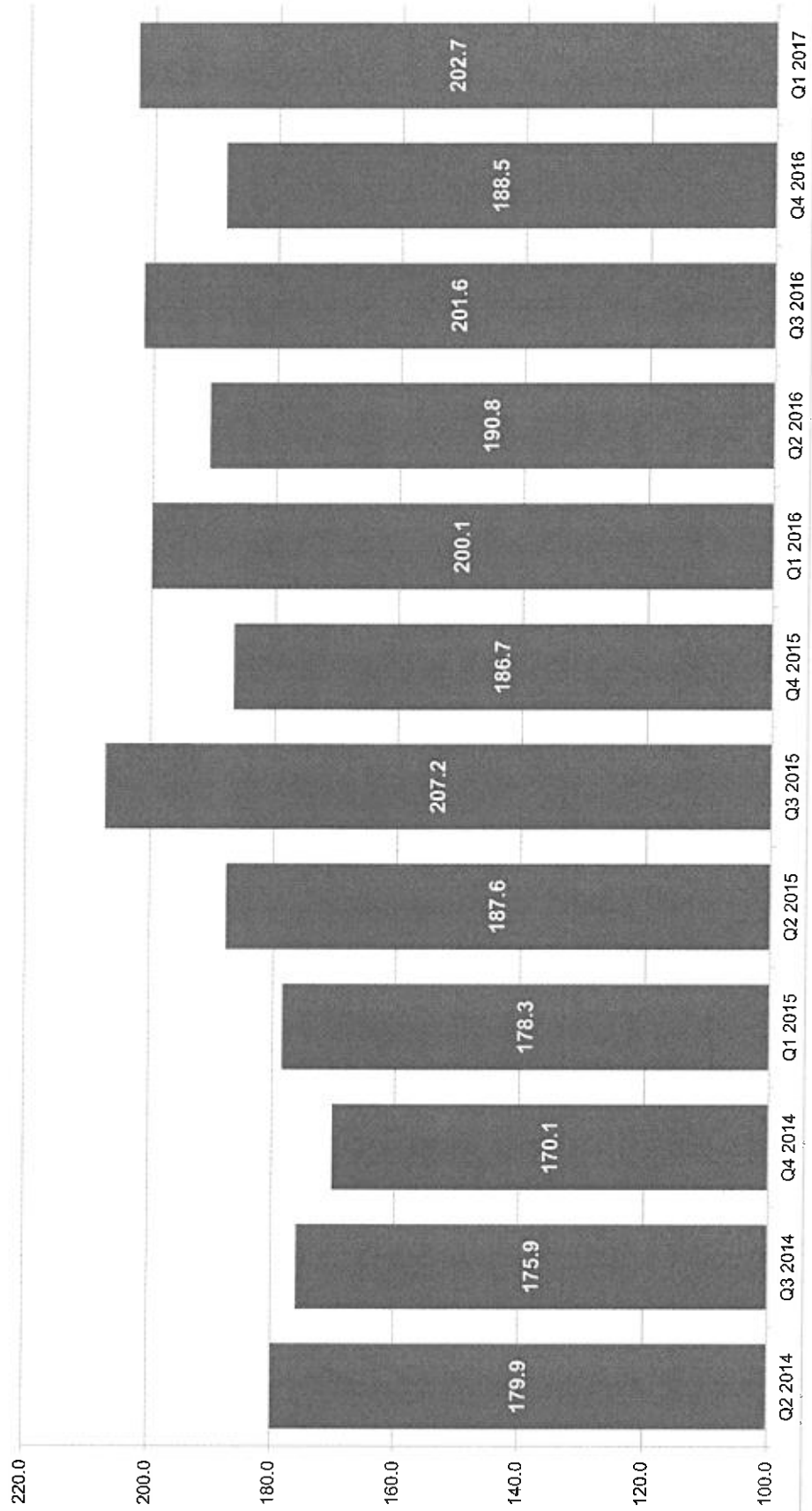
FISCAL YEAR 2017, QUARTER ENDING 09/30/2016

Quarter Breakdown	
Quarter 1	July 1st - September 30th
Quarter 2	October 1st - December 31st
Quarter 3	January 1st - March 31st
Quarter 4	April 1st - June 30th

*The average age of cases closed is a measurement of how long it takes, on average, for a case to be processed from entry to closure. These calculations include only cases closed within the quarter specified.

	Q2 2014	Q3 2014	Q4 2014	Q1 2015	Q2 2015	Q3 2015	Q4 2015	Q1 2016	Q2 2016	Q3 2016	Q4 2016	CURRENT Q1 2017
Audiology/Speech Pathology	0.0	53.0	77.5	92.0	66.7	179.0	82.1	134.9	N/A	215.2	152.8	532.0
Counseling	225.4	225.8	170.4	204.6	238.2	315.6	252.2	284.1	193.5	415.6	323.7	375.5
Dentistry	325.1	298.1	394.1	307.5	259.4	222.8	350.3	272.5	292.7	248.3	303.1	250.6
Funeral Directing	164.2	185.7	175.5	175.9	99.4	205.8	140.4	181.3	190.7	134.3	240.6	193.9
Long Term Care Administrator	195.0	291.1	143.8	184.8	154.7	179.7	260.5	247.6	145.4	218.5	232.3	258.3
Medicine	135.9	167.5	151.7	170.8	165.4	219.3	147.3	177.1	181.1	161.6	157.5	139.9
Nurse Aide	167.1	146.6	121.1	116.4	147.2	172.6	145.5	169.6	121.8	154.7	122.9	154.6
Nursing	179.8	184.0	182.9	173.2	214.3	188.1	231.2	191.1	196.3	217.6	193.6	198.1
Optometry	220.5	229.5	289.4	205.5	184.3	122.1	197.2	294.0	154.2	231.0	194.4	121.6
Pharmacy	142.4	130.5	148.4	139.7	102.1	247.3	121.9	200.2	102.6	110.8	122.3	148.7
Physical Therapy	127.0	125.8	123.0	176.4	137.9	120.8	280.5	190.0	117.1	145.3	242.9	403.0
Psychology	177.5	149.5	176.5	210.0	129.0	171.1	181.1	216.0	287.0	437.0	287.3	380.0
Social Work	138.9	216.9	171.2	183.9	314.4	198.9	202.9	199.4	132.5	342.0	226.0	469.7
Veterinary Medicine	243.9	187.2	118.2	214.5	318.2	289.9	158.9	295.7	331.7	332.4	407.3	315.5
AGENCY	179.9	175.9	170.1	178.3	187.6	207.2	186.7	200.1	190.8	201.6	188.5	202.7

Avg Age of Cases Closed for All Boards



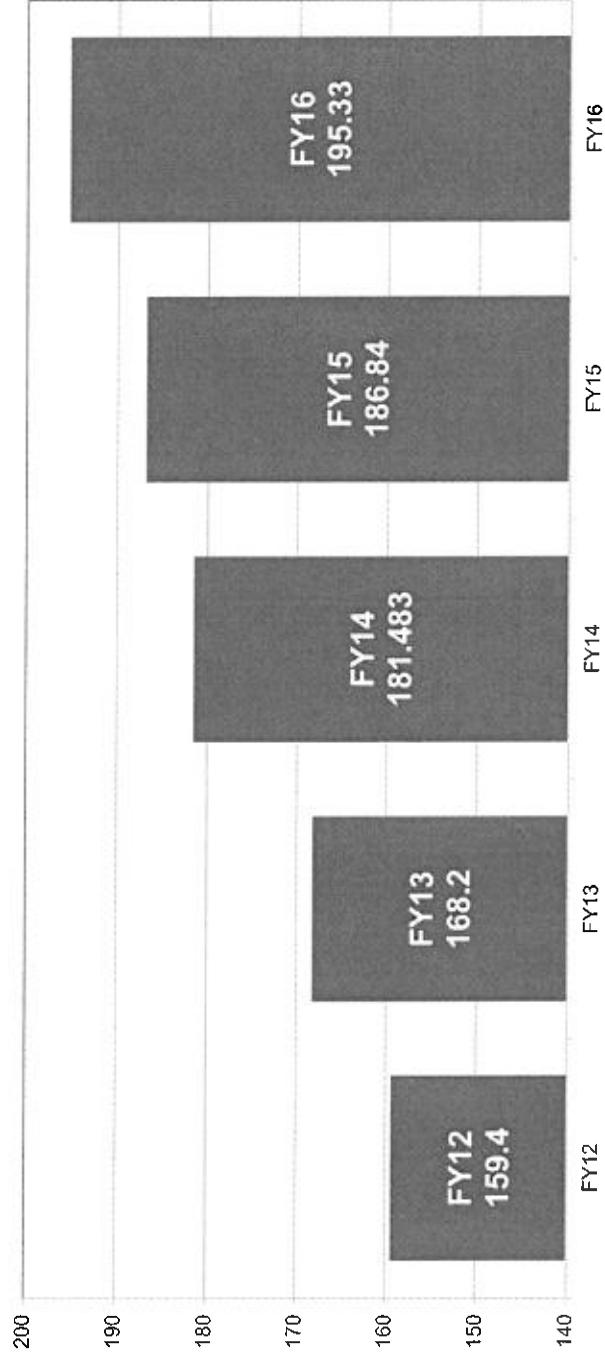
AVERAGE TIME TO CLOSE A CASE (IN DAYS)
PER FISCAL YEAR
LAST FIVE FISCAL YEARS

Quarter Breakdown	
Quarter 1	July 1st - September 30th
Quarter 2	October 1st - December 31st
Quarter 3	January 1st - March 31st
Quarter 4	April 1st - June 30th

*The average age of cases closed is a measurement of how long it takes, on average, for a case to be processed from entry to closure. These calculations include only cases closed within the quarter specified.

Board	FY12	Change Between FY13 & FY12	FY13	Change Between FY14 & FY13	FY14	Change Between FY15 & FY14	FY15	Change Between FY16 & FY15	FY16
Audiology/Speech Pathology	113.4	-31.4%	77.8	-23.1%	59.85	65.4%	99	67.4%	165.75
Counseling	183.7	130.0%	422.6	-49.1%	215.2	20.0%	258.3	22.0%	315.01
Dentistry	213.7	31.1%	280.2	13.5%	317.9	-11.0%	282.92	-1.4%	278.91
Funeral Directing	166.1	6.9%	177.5	0.3%	178	-16.7%	148.27	28.2%	190.1
Long Term Care Administrator	164.6	41.6%	233.1	-24.6%	175.79	7.2%	188.47	12.7%	212.4
Medicine	119.9	7.8%	129.2	21.2%	156.58	9.2%	171.01	-0.9%	169.54
Nurse Aide	174.4	-13.8%	150.3	35.5%	203.71	-29.6%	143.41	0.5%	144.16
Nursing	184.6	-10.8%	164.7	8.4%	178.51	8.7%	194.02	3.4%	200.56
Optometry	138.2	-10.1%	124.2	80.1%	223.64	-23.7%	170.73	19.6%	204.15
Pharmacy	158.9	-3.0%	154.2	-11.4%	136.662	19.0%	162.63	-20.7%	128.97
Physical Therapy	235	-24.6%	177.2	-16.9%	147.2	22.0%	179.65	-5.9%	169.05
Psychology	228.7	30.4%	298.3	-46.9%	158.265	15.4%	182.65	89.0%	345.23
Social Work	129.6	113.3%	276.5	-37.8%	171.975	33.4%	229.43	11.0%	254.68
Veterinary Medicine	153.6	7.7%	165.4	5.7%	174.829	31.6%	230.03	48.4%	341.38
AGENCY	159.4	5.5%	168.2	7.9%	181.483	3.0%	186.84	4.5%	195.33

Average Age (in days) of Cases Closed for All Boards





**PERCENTAGE OF CASES OF ALL TYPES
CLOSED WITHIN 365 CALENDAR DAYS***

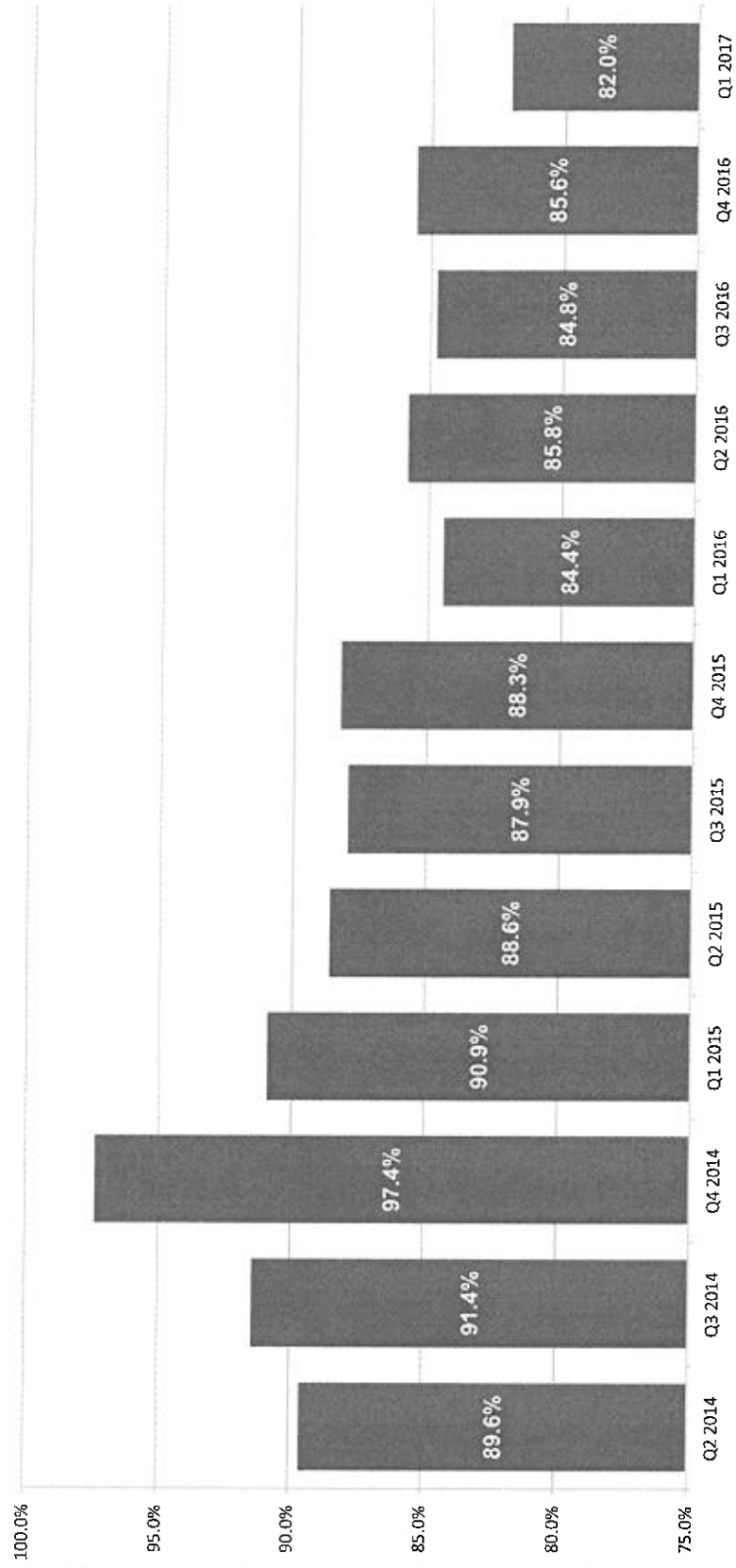
FISCAL YEAR 2017, QUARTER ENDING 09/30/2016

Quarter Breakdown	
Quarter 1	July 1st - September 30th
Quarter 2	October 1st - December 31st
Quarter 3	January 1st - March 31st
Quarter 4	April 1st - June 30th

*The percent of cases closed in fewer than 365 days shows, from the total of all cases closed during the specified period, the percent of cases that were closed in less than one year.

	Q2 2014	Q3 2014	Q4 2014	Q1 2015	Q2 2015	Q3 2015	Q4 2015	Q1 2016	Q2 2016	Q3 2016	Q4 2016	CURRENT Q1 2017
Audiology/Speech Pathology	N/A	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	N/A	100.0%	100.0%	0.0%
Counseling	80.0%	89.5%	96.8%	86.7%	78.6%	75.0%	76.2%	64.3%	72.7%	36.0%	55.6%	45.5%
Dentistry	64.0%	72.9%	52.7%	67.5%	81.2%	83.7%	53.6%	74.0%	69.8%	80.0%	64.0%	69.5%
Funeral Directing	82.4%	95.8%	86.7%	90.9%	100.0%	87.5%	100.0%	88.2%	88.2%	100.0%	81.0%	80.0%
Long Term Care Administrator	75.0%	71.4%	100.0%	84.6%	92.9%	90.9%	84.6%	77.8%	88.9%	80.8%	85.7%	75.0%
Medicine	95.9%	91.6%	92.7%	90.4%	89.9%	87.1%	94.3%	87.8%	87.9%	89.7%	91.2%	32.5%
Nurse Aide	95.7%	96.7%	96.2%	97.9%	96.2%	96.6%	93.0%	91.1%	97.1%	95.9%	92.6%	89.8%
Nursing	91.8%	92.3%	90.1%	94.1%	86.5%	92.4%	87.2%	87.3%	86.2%	84.2%	87.2%	85.3%
Optometry	75.0%	66.7%	75.0%	82.4%	75.0%	100.0%	66.7%	85.7%	100.0%	80.0%	85.7%	100.0%
Pharmacy	90.1%	92.7%	132.9%	95.5%	95.1%	76.7%	62.2%	82.8%	95.4%	93.1%	95.2%	90.3%
Physical Therapy	90.0%	100.0%	100.0%	90.9%	87.5%	100.0%	75.0%	75.0%	100.0%	100.0%	77.8%	25.0%
Psychology	94.1%	92.3%	100.0%	93.3%	100.0%	87.5%	100.0%	75.0%	50.0%	37.5%	50.0%	44.4%
Social Work	100.0%	85.7%	91.7%	95.7%	72.2%	92.3%	77.8%	65.5%	87.5%	46.2%	75.0%	30.7%
Veterinary Medicine	94.7%	96.7%	100.0%	93.5%	66.7%	71.1%	92.7%	65.3%	63.5%	69.1%	54.8%	73.2%
AGENCY TOTAL	89.6%	91.4%	97.4%	90.9%	88.6%	87.9%	88.3%	84.4%	85.8%	84.8%	85.6%	82.0%

Percent of Total Cases Closed Within 365 Calendar Days



**PERCENTAGE OF CASES CLOSED
WITHIN 365 CALENDAR DAYS**

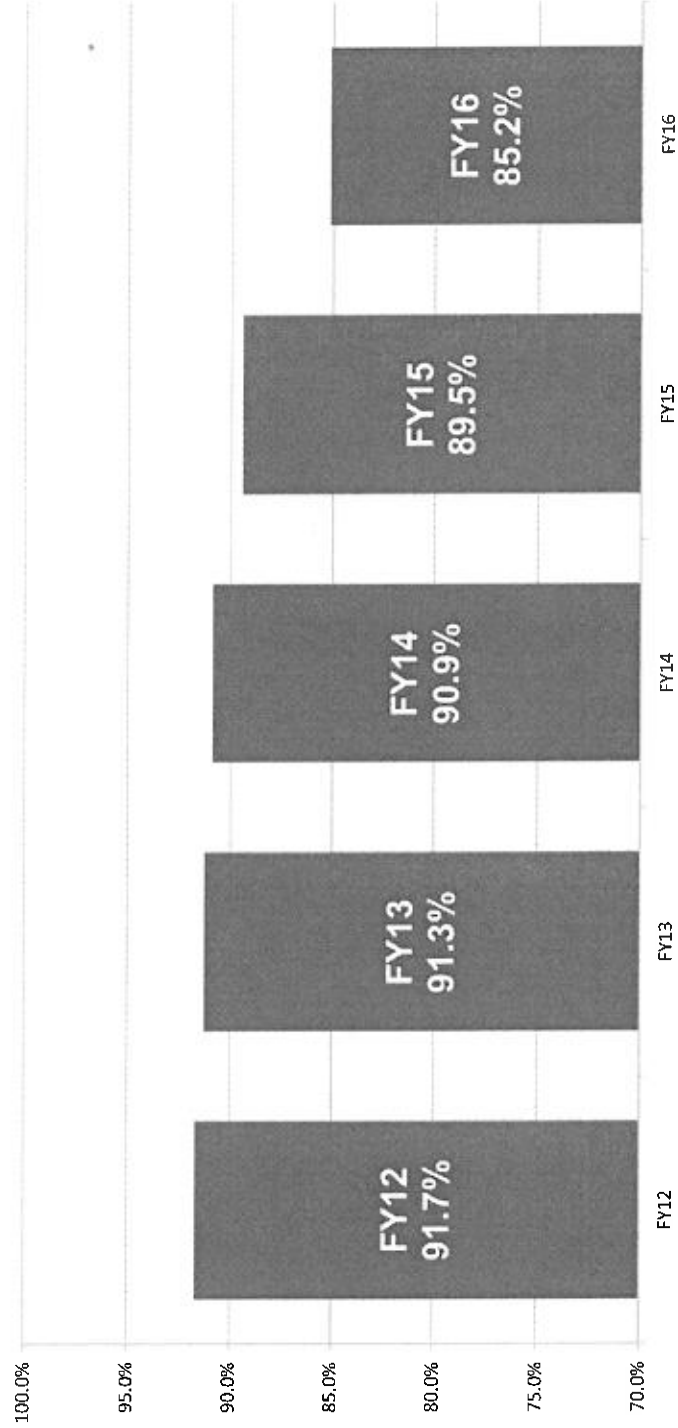
LAST FIVE FISCAL YEARS

Quarter Breakdown	
Quarter 1	July 1st - September 30th
Quarter 2	October 1st - December 31st
Quarter 3	January 1st - March 31st
Quarter 4	April 1st - June 30th

*The percent of cases closed in fewer than 365 days shows, from the total of all cases closed during the specified period, the percent of cases that were closed in less than one year. In comparing two time periods, if the change is positive there was a higher percent of cases closed in under a year in the first period than in the previous period.

Board	FY12	Change Between FY13 & FY 12	FY13	Change Between FY14 & FY 13	FY14	Change Between FY15 & FY 14	FY15	Change Between FY16 & FY 15	FY16
Audiology/Speech Pathology	94.4%	2.1%	96.4%	3.7%	100.0%	-3.2%	96.8%	3.3%	100.0%
Counseling	72.2%	12.5%	81.2%	7.9%	87.6%	-12.6%	76.6%	-25.8%	56.8%
Dentistry	92.4%	-6.4%	86.5%	-24.7%	65.1%	11.1%	72.4%	0.0%	72.4%
Funeral Directing	86.0%	0.3%	86.3%	5.3%	90.8%	5.4%	95.7%	-6.0%	90.0%
Long Term Care Administrator	91.8%	-3.4%	88.7%	-0.1%	88.6%	1.6%	90.0%	-6.4%	84.2%
Medicine	92.6%	-0.6%	92.1%	-0.4%	91.7%	-1.0%	90.8%	-1.7%	89.3%
Nurse Aide	91.7%	0.2%	91.9%	4.6%	96.1%	-0.1%	96.0%	-2.2%	94.0%
Nursing	91.5%	0.3%	91.8%	0.6%	92.3%	-2.2%	90.3%	-4.7%	86.1%
Optometry	100.0%	-8.2%	91.8%	-9.2%	83.3%	4.0%	86.7%	4.9%	90.9%
Pharmacy	92.6%	-1.2%	91.5%	0.5%	92.0%	-4.3%	88.0%	4.4%	91.9%
Physical Therapy	95.8%	-8.0%	88.1%	8.2%	95.4%	-5.6%	90.0%	3.4%	93.0%
Psychology	81.1%	17.4%	95.2%	-1.6%	93.7%	0.1%	93.8%	-49.5%	47.3%
Social Work	87.9%	2.4%	90.0%	3.0%	92.7%	-8.3%	85.0%	-28.4%	60.9%
Veterinary Medicine	94.0%	-3.4%	90.8%	4.8%	95.2%	5.1%	100.0%	-37.6%	62.4%
AGENCY	91.7%	-0.5%	91.3%	-0.4%	90.9%	-1.6%	89.5%	-4.8%	85.2%

Percentage of Cases Closed within 365 Calendar Days for All Boards



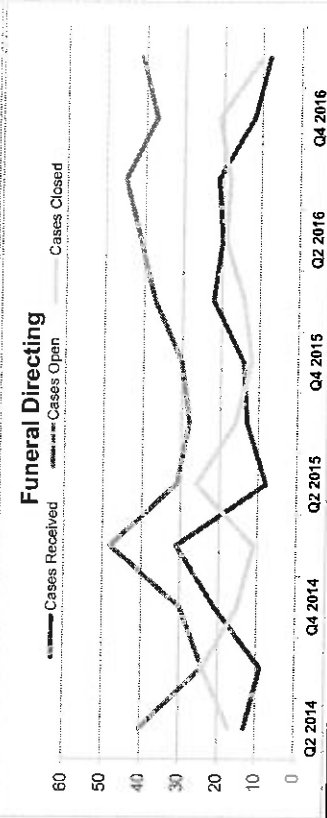
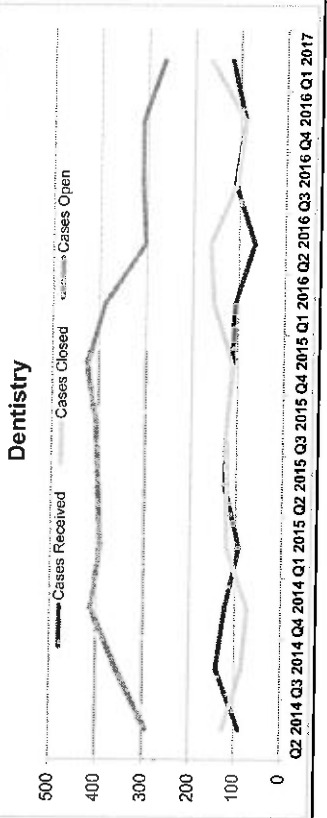
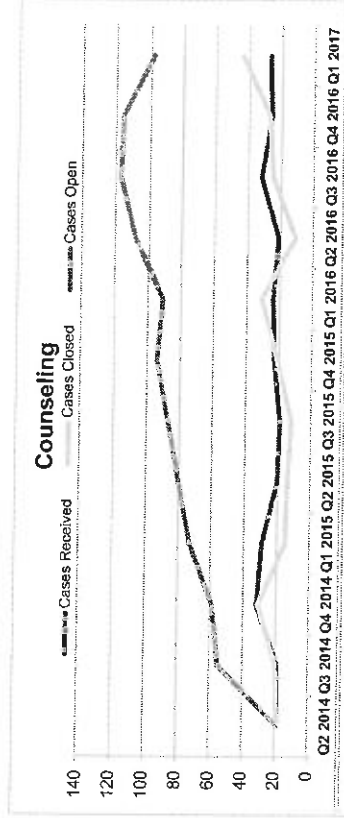
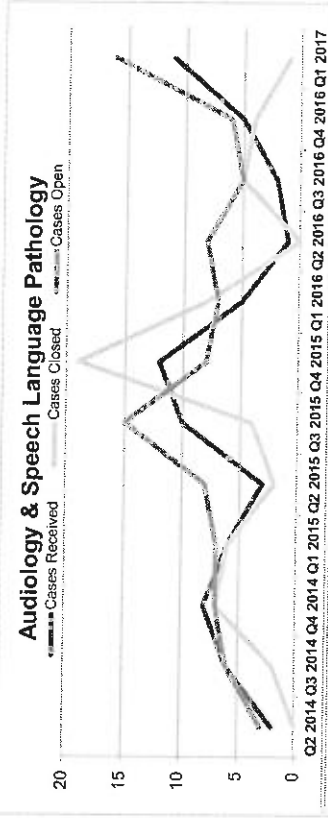
CASES RECEIVED, OPEN, & CLOSED REPORT
SUMMARY BY BOARD

FISCAL YEAR 2017, QUARTER ENDING 09/30/2016

Quarter Breakdown	
Quarter 1	July 1st - September 30th
Quarter 2	October 1st - December 31st
Quarter 3	January 1st - March 31st
Quarter 4	April 1st - June 30th

The "Received, Open, Closed" table below shows the number of received and closed cases during the quarters specified and a "snapshot" of the cases still open at the end of the quarter.

Board Of	CURRENT											
	Q2 2014	Q3 2014	Q4 2014	Q1 2015	Q2 2015	Q3 2015	Q4 2015	Q1 2016	Q2 2016	Q3 2016	Q4 2016	Q1 2017
Audiology/Speech Pathology												
Number of Cases Received	2	6	8	6	3	10	12	5	1	2	5	11
Number of Cases Open	3	6	7	7	8	15	8	7	8	5	6	16
Number of Cases Closed	0	2	7	6	2	4	19	8	0	5	4	1
Counseling												
Number of Cases Received	19	19	32	29	20	19	23	24	21	32	26	27
Number of Cases Open	19	55	59	73	80	87	94	91	108	117	116	98
Number of Cases Closed	19	20	31	15	14	12	21	31	11	25	27	44
Dentistry												
Number of Cases Received	90	140	123	93	126	123	111	107	67	110	89	118
Number of Cases Open	293	356	412	393	399	404	425	388	302	310	310	265
Number of Cases Closed	126	85	74	121	122	123	112	154	162	105	89	164
Funeral Directing												
Number of Cases Received	13	9	21	31	8	13	14	22	20	21	12	8
Number of Cases Open	40	24	30	48	31	28	30	37	41	45	37	41
Number of Cases Closed	17	24	15	11	26	16	12	14	19	18	21	10



Licensing Manger's Report



COUNT OF CURRENT LICENSES* BOARD SUMMARY

FISCAL YEAR 2017, QUARTER ENDING 09/30/2016

Quarter Breakdown	
Quarter 1	July 1st - September 30th
Quarter 2	October 1st - December 31st
Quarter 3	January 1st - March 31st
Quarter 4	April 1st - June 30th

*CURRENT LICENSES BY BOARD AND OCCUPATION AS OF THE LAST DAY OF THE QUARTER

	Q2 2014	Q3 2014	Q4 2014	Q1 2015	Q2 2015	Q3 2015	Q4 2015	Q1 2016	Q2 2016	Q3 2016	Q4 2016	CURRENT Q1 2017
Audiology/Speech Pathology	4093	3936	4104	4418	4674	4653	4840	4944	4992	4720	4802	4951
Counseling	6960	7098	6545	7026	7183	7256	7042	7249	7490	7597	7808	13237
Dentistry	13226	12617	13140	13390	13507	12782	13753	13999	14186	14319	14184	14382
Funeral Directing	2516	2379	2471	2521	2543	2313	2506	2540	2573	2618	2497	2526
Long Term Care Administrators	2079	1968	2054	2107	2176	1922	2058	2115	2165	2206	2087	2141
Medicine	61769	61910	61789	62714	62617	62816	64137	65337	65922	66177	67447	66941
Nurse Aide	53989	53751	53098	54250	54491	53695	53834	54568	54402	54374	54477	54044
Nursing	159067	159315	159974	162346	161891	161569	163058	164128	163594	163637	164199	166107
Optometry	1915	1852	1906	1927	1946	1856	1915	1931	1963	1874	1914	1936
Pharmacy	34800	33321	34398	35424	36750	34226	35476	36365	37218	34741	35972	37125
Physical Therapy	10390	10574	10901	11401	11647	10533	11000	10908	11075	11240	11702	12682
Psychology	3799	3888	3624	3893	4017	4093	3876	4028	4141	4253	4360	4994
Social Work	6076	6242	6350	6481	6590	6741	6306	6544	6690	6828	7057	8900
Veterinary Medicine	6882	6651	6897	7029	7108	6888	7187	7304	7370	7112	7376	7489
AGENCY TOTAL	367561	365502	367251	374927	377140	371343	376988	381960	383781	381696	385882	397455

COUNT OF CURRENT LICENSES
FISCAL YEAR 2017, QUARTER ENDING 09/30/2016

Quarter Breakdown	
Quarter 1	July 1st - September 30th
Quarter 2	October 1st - December 31st
Quarter 3	January 1st - March 31st
Quarter 4	April 1st - June 30th

***CURRENT LICENSES BY BOARD AND OCCUPATION AS OF THE LAST DAY OF THE QUARTER**

Board	Occupation	CURRENT												
		Q2 2014	Q3 2014	Q4 2014	Q1 2015	Q2 2015	Q3 2015	Q4 2015	Q1 2016	Q2 2016	Q3 2016	Q4 2016	Q1 2017	
Audiology/Speech Pathology	Audiologist	500	480	486	506	513	491	501	517	519	497	507	517	
	Continuing Education Provider	0	11	12	0	12	13	14	14	14	14	15	15	
	School Speech Pathologist	127	124	130	221	334	431	475	506	513	475	484	507	
	Speech Pathologist	3466	3321	3476	3691	3815	3718	3850	3907	3946	3734	3796	3912	
Total		4093	3936	4104	4418	4674	4653	4840	4944	4992	4720	4802	4951	
Counseling	Certified Substance Abuse Counselor	1661	1680	1473	1617	1669	1679	1568	1617	1679	1691	1734	1662	
	Licensed Marriage and Family Therapist	825	838	775	817	828	832	808	825	845	856	870	836	
	Licensed Professional Counselor	3821	3944	3700	3950	4036	4123	4072	4188	4333	4435	4567	4512	
	Marriage & Family Therapist Resident												131	
	Registration of Supervisor												5491	
	Rehabilitation Provider	337	307	311	312	313	280	285	286	288	259	266	270	
	Substance Abuse Counseling Assistant	135	146	117	151	157	162	152	163	169	179	192	164	
	Substance Abuse Treatment Practitioner	181	183	169	179	180	180	167	170	176	177	179	170	
	Substance Abuse Treatment Residents													1
	Total		6960	7098	6545	7026	7183	7256	7042	7249	7490	7597	7808	13237
Dentistry	Conscious/Moderate Sedation	174	139	182	193	199	178	189	198	206	210	212	221	
	Cosmetic Procedure Certification	30	29	30	30	32	31	32	33	34	32	36	37	
	Deep Sedation/General Anesthesia	40	30	41	48	50	44	51	56	58	63	51	54	
	Dental Assistant II	3	3	3	3	4	6	10	10	10	12	11	11	
	Dental Full Time Faculty	10	9	9	9	10	11	12	14	14	15	16	12	
	Dental Hygienist	5508	5287	5465	5558	5596	5293	5575	5643	5687	5722	5719	5815	
	Dental Hygienist Faculty	0	0	0	1	0	0	0	1	1	1	1	1	
	Dental Hygienist Restricted Volunteer	-	-	1	0	1	1	1	1	1	1	1	16	
	Dental Hygienist Temporary Permit	0	0	0	0	0	0	0	0	0	0	0	0	
	Dental Hygienist Volunteer Registration	-	-	-	-	-	1	0	1	0	0	1	0	
	Dental Restricted Volunteer	16	17	13	16	14	14	13	14	14	16	20	0	
	Dental Teacher	0	0	0	0	0	0	0	0	0	0	0	0	
	Dental Temporary Permit	1	1	0	0	0	0	0	0	0	0	0	0	
	Dentist	6962	6668	6911	7022	7097	6713	7052	7152	7212	7292	7147	7249	
Dentist-Volunteer Registration	2	2	2	11	0	7	6	9	9	3	7	5		
Entral Conscious/Moderate Sedation	156	113	157	163	164	150	152	163	175	180	166	174		

COUNT OF CURRENT LICENSES *
LAST FIVE FISCAL YEARS

Quarter Breakdown	
Quarter 1	July 1st - September 30th
Quarter 2	October 1st - December 31st
Quarter 3	January 1st - March 31st
Quarter 4	April 1st - June 30th

***CURRENT LICENSES BY BOARD AND OCCUPATION AS OF THE LAST DAY OF THE FISCAL YEAR**

Board	Occupation	FY12	Change Between FY13 & FY12	FY13	Change Between FY14 & FY13	FY14	Change Between FY15 & FY14	FY15	Change Between FY16 & FY15	FY16
Audiology/Speech Pathology	Audiologist	451	3.8%	468	3.8%	486	3.1%	501	1.2%	507
	Continuing Education Provider	1	-	0	-	12	16.7%	14	7.1%	15
	School Speech Pathologist	110	5.5%	116	12.1%	130	265.4%	475	1.9%	484
	Speech Pathologist	3022	5.0%	3172	9.6%	3476	10.8%	3850	-1.4%	3796
Total		3584	4.8%	3756	9.3%	4104	17.9%	4840	-0.8%	4802
Counseling	Certified Substance Abuse Counselor	1714	0.6%	1724	-14.6%	1473	5.8%	1558	11.3%	1734
	Licensed Marriage and Family Therapist	790	1.4%	801	-3.2%	775	4.3%	808	7.7%	870
	Licensed Professional Counselor	3538	2.6%	3630	1.9%	3700	10.1%	4072	12.2%	4567
	Rehabilitation Provider	334	-0.3%	333	-6.4%	311	-8.4%	285	-6.7%	266
	Substance Abuse Counseling Assistant	115	11.3%	128	-8.6%	117	29.9%	152	26.3%	192
	Substance Abuse Treatment Practitioner	183	1.1%	185	-8.6%	169	-1.2%	167	7.2%	179
Total		6674	1.9%	6801	-3.8%	6545	7.6%	7042	10.9%	7808
Dentistry	Conscious/Moderate Sedation	-	-	144	26.4%	182	3.8%	189	12.2%	212
	Cosmetic Procedure Certification	27	0.0%	27	11.1%	30	6.7%	32	12.5%	36
	Deep Sedation/General Anesthesia	-	-	32	28.1%	41	24.4%	51	0.0%	51
	Dental Assistant II	-	-	3	0.0%	3	233.3%	10	10.0%	11
	Dental Full Time Faculty	9	0.0%	9	0.0%	9	33.3%	12	33.3%	16
	Dental Hygienist	5021	2.0%	5122	6.7%	5465	2.0%	5575	2.6%	5719
	Dental Hygienist Faculty	1	0.0%	1	-	0	-	0	-	1
	Dental Hygienist Restricted Volunteer	-	-	-	-	1	0.0%	1	0.0%	1
	Dental Hygienist volunteer Registrations	13	-	-	-	0	-	0	-	1
	Dental Hygienist Temporary Permit	-	-	15	-18.8%	13	0.0%	13	53.8%	20
	Dental Restricted Volunteer	3	33.3%	4	-	0	-	0	-	0
	Dental Teacher	3	-33.3%	2	-	0	-	0	-	0
	Dental Temporary Permit	3	-33.3%	2	-	0	-	0	-	0
	Dentist	6293	2.2%	6432	7.4%	6911	2.0%	7052	1.3%	7147
Dentist-Volunteer Registration	-	-	1	100.0%	2	200.0%	6	16.7%	7	
Enteral Conscious/Moderate Sedation	-	-	94	67.0%	157	-3.2%	152	9.2%	166	
Mobile Dental Facility	-	-	7	28.6%	9	44.4%	13	7.7%	14	

AMFTRB English Language Learners (ELL) Accommodation

Lenart, Charlotte (DHP)

From: Lois Paff Bergen, PhD, LMFT <lois@amftrb.org>
Sent: Wednesday, August 10, 2016 1:37 PM
To: lois
Cc: Alabama; Alabama; ALASKA 1; ARIZONA; Arkansas; Arkansas; Arkansas; bdilworth@swmft.ms.gov MS1; bruno.langer@bsrb.state.ks.us; California; Christie; COLORADO; Connecticut 1; DC I; DC Office; Delaware; Diane.Young@doh.wa.gov; District of Columbia; Georgia; Guam; Guam 1; Idaho; Rebolo; Illinois 1; Iowa; Lang, Jennifer (DHP); jennyajohnson@utah.gov; Kansas; Kentucky 1; largie57@bis.midco.net; leslie.allen@bsrb.state.ks.us; Louisiana; Maine; MAINE; Maryland; Maryland; Massachusetts; michael.loos@arkansas.gov; Michigan 1; Mississippi; Mississippi; Montana; Montana; Nebraska; Nevada 1; Nevada I 2016; New Hampshire I; New Jersey; New Jersey; New Jersey; New Mexico; North Dakota; Oregon 1; Oregon I; Pennsylvania; piperfield@cableone.net; Rhode Island I Alana Rodriguez; South Carolina; South Dakota 1; Utah; UTAH; Vermont; Vermont; Board of Counseling; Hoyle, Jaime (DHP); West Virginia; Wisconsin; Wisconsin; Wyoming; Guam 1
Subject: AMFTRB MFT National Exam Update on English Language Learners
Attachments: FINAL English Language Learner Special Arrangements Request Form.docx

Dear Licensing Board Executive,

AMFTRB has received a response from 11 states regarding the English Language Learners (ELL) special accommodation for the MFT National Examination.

Thus far SIX states have decided to APPROVE ELL special arrangement requests. These states are: Florida, Indiana, Minnesota, Ohio, Oklahoma, and Tennessee.

FIVE states have decided NOT to APPROVE a special arrangement: Hawaii, Missouri, New York, North Carolina, and Washington.

AMFTRB and PTC are beginning to receive inquiries regarding ELL special arrangements, therefore it is important for us to have accurate information about what states are approving this and what states are not. Below is the original email sent regarding the special arrangement for ELL and the form is attached.

PLEASE let us know ASAP what your state board has decided about the ELL special arrangement.

Respectively,

Lois

Lois Paff Bergen, PhD, LMFT
AMFTRB Executive Director
1843 Austin Bluffs Parkway
Colorado Springs, CO 80918
719.388.1615
lois@amftrb.org

From: "Lois Paff Bergen, PhD, LMFT" <lois@amftrb.org>
Sent: Monday, February 1, 2016 7:38 AM

Good Morning State LMFT Board Executive,

At AMFTRB's September 2015 Annual Meeting of State Delegates, the delegate body passed a motion creating a committee to develop a process for English Language Learner (ELL) candidates to be able to request a Special

Arrangement for taking the MFT National Examination. The committee completed their study and work by January 1, 2016. On January 18 during AMFTRB's Board of Directors' winter conference meeting the board unanimously voted to adopt the ELL Special Arrangement form and process that the committee developed.

The form containing a description of the process is attached. PTC (Professional Testing Corporation), our exam vendor, is ready to process these state approved, candidate paid for, Special Arrangement requests. The process is outlined below.

AMFTRB knows that there is not universal acceptance of a provision for ELL special arrangements for candidates. At present we know that the Minnesota state licensing board is going to provide their candidates with the possibility for an arrangement and the New York state licensing board will not provide or accept this non-standardized exam arrangement.

AMFTRB will create a list of which states provide for this special arrangement and accept these exam scores, and which states will not. While PTC is now prepared to accept these Special Arrangement request forms and the candidate's payment for the Special Arrangement, please know that your board has time to consider adopting or not adopting this Special Arrangement. Please let AMFTRB know as soon as you know what your state board decides to do.

After the delegate body presentations and discussion in September, the committee studied what the behavioral health regulatory associations who provide licensing examinations for psychology, social work, and professional counselors have learned from their work on ELL candidates and exams; what these groups are considering; and what they have developed for use. AMFTRB's committee work resulted in the following process and the attached form.

Process for requesting a Special Arrangement

1. The state board determines if a candidate seeking an ELL Special Arrangement is approved by reviewing the completed request form the state board has provided to the candidate and then notifies the candidate of the state board's approval.
2. The candidate completes the request form with documentation for the state board, indicating their choice of which arrangement for extra time, either one hour or two hours, they would like. After receiving the approved form back from their state board, the candidate uploads the state approved form to AMFTRB/PTC during their regular application process for the exam, and the candidate pays for the special arrangement online at that time.

Please note

1. Not all states will allow this Special Arrangement, nor accept an exam score earned with an ELL Special Arrangement. In order for a state board office to know when a candidate has tested with an ELL Special Arrangement, all state monthly score reports will have a notation which reflects an exam score earned with an ELL Special Arrangement.
2. Candidates requesting this Special Arrangement will need to allow for 8 weeks to process their exam date requests with PTC.
3. AMFTRB's committee will be gathering information from candidates who used this arrangement after their exam date for continued study and consideration of what might be appropriate arrangements beyond extra time.

Thank you,

Lois

Lois Paff Bergen, PhD, LMFT
AMFTRB Executive Director
1843 Austin Bluffs Parkway
Colorado Springs, CO 80918

English Language Learner (ELL) Special Arrangements Request

The ~~(STATE NAME GOES HERE)~~ Board of Marriage and Family Therapy will authorize an approved applicant who is an English Language Learner (ELL) up to two (2) extra hours of testing time when taking the AMFTRB National Examination in Marriage and Family Therapy (AMFTRB National Examination). The applicant must pay the expense of the additional testing time. If this request is approved by the Board, the applicant must file the approval form with the testing company administering the AMFTRB National Examination at least eight (8) weeks prior to applicant's testing date to allow time to process the request. Payment for approved additional time shall be made to the testing company at time of test registration.

To apply for AMFTRB National Examination special testing arrangements based upon ELL status, please complete the following:

Legal Name: _____ Email: _____ Primary Telephone: _____	Date of Birth: _____ <table border="1" style="margin-left: auto; margin-right: auto; text-align: center;"> <tr> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> </tr> <tr> <td colspan="2">Month</td> <td colspan="2">Day</td> <td colspan="2">Year</td> </tr> </table> Your primary (first) language: _____							Month		Day		Year	
Month		Day		Year									
<p>ELL Special Arrangements Requested: Extra testing time (Check one box.) <input type="checkbox"/> 1 hour (\$45 extra time + \$350 exam fee = \$395 total paid to testing company; do <u>not</u> submit payment to the Board) <input type="checkbox"/> 2 hours (\$90 extra time + \$350 exam fee = \$440 total paid to testing company; do <u>not</u> submit payment to the Board)</p>													
<p>APPLICANT STATEMENT: In support of my request for ELL special testing arrangements, I am providing one or more of the following documents (check all that are provided; must check at least one):</p> <p>_____ (1) A Test of English as a Foreign Language (TOEFL) certification score of eight-five (85) or below, sent by Educational Testing Service directly to the Board. The TOEFL must have been taken within the previous five (5) years prior to application;</p> <p>_____ (2) Documentation, to the satisfaction of the Board, from the applicant's qualifying master's degree program that the program had granted an English as a second language arrangement to applicant while enrolled in the program. Such arrangements must have been provided within the previous five (5) years prior to application;</p> <p>_____ (3) Documentation, to the satisfaction of the Board, that applicant's qualifying master's degree was obtained from an educational institution outside the United States, and that coursework was presented primarily in a language other than English. Enrollment in this educational institution must have occurred within the previous five (5) years prior to application; OR</p> <p>_____ (4) A written statement from applicant in support of the ELL special testing arrangement request. Applicant may use Page 2 of this request form for this statement or attach a separate document. (Note: Such statement should address applicant's spoken language history from childhood to present day, language primarily utilized in educational settings from childhood to present day, and any other information the applicant believes relevant to the request for ELL Special Arrangements.)</p>													
<p>APPLICANT ATTESTATION: Under penalty of perjury, I declare that the information provided on this form and in support of my English Language Learner Special Arrangements Request is true. I understand that false information may be cause for denial of my application, cancellation of my AMFTRB National Examination score, or denial or loss of my license. I hereby certify that I personally completed this application and that I may be asked to verify the above information at any time. I FURTHER UNDERSTAND that (1) other licensing jurisdictions may not accept an AMFTRB National Examination score obtained with the use of an ELL Special Arrangement and I may be required to pass the AMFTRB National Examination again, without the benefit of extra testing time, to obtain licensure in that jurisdiction; and (2) use of an ELL Special Arrangement in taking the AMFTRB National Examination will be noted on my score report.</p>													
Applicant Signature _____ Date _____													
<p>FOR BOARD USE ONLY The ELL Special Arrangements Request for the above-named applicant is hereby APPROVED.</p>													
Authorized Signature _____ Date _____ Print Name: _____ Title: _____													

Please MAIL, FAX or EMAIL Request To:

~~YOUR STATE INFORMATION GOES HERE~~

Retain a copy of this form and all other application documents for your records.
 The Board reserves the right to modify or suspend this ELL Special Arrangement policy at any time without notice.

English Language Learner (ELL) Special Arrangements Request

Applicant Name: _____

STATEMENT IN SUPPORT OF ELL SPECIAL ARRANGEMENTS REQUEST:

Chart of Regulatory Actions

Agenda Item: Regulatory Actions - Chart of Regulatory Actions

Staff Note: Attached is a chart with the status of regulations for the Board as of October 21, 2016

Board		Board of Counseling
Chapter	Action / Stage Information	
[18 VAC 115 - 11]	Public Participation Guidelines	<u>Conforming to APA</u> [Action 4631] Fast-Track - At Secretary's Office for 31 days
[18 VAC 115 - 20]	Regulations Governing the Practice of Professional Counseling	<u>Requirement for CACREP accreditation for educational programs</u> [Action 4259] Proposed - At Governor's Office for 135 days
[18 VAC 115 - 20]	Regulations Governing the Practice of Professional Counseling	<u>Fee increase</u> [Action 4443] Proposed - Register Date: 8/22/16 Final regulation to be adopted 11/4/16
[18 VAC 115 - 20]	Regulations Governing the Practice of Professional Counseling	<u>CE for volunteer service</u> [Action 4630] Fast-Track - DPB Review in progress
[18 VAC 115 - 30]	Regulations Governing the Certification of Substance Abuse Counselors	<u>Updating and clarifying regulations</u> [Action 4691] NOIRA - At Secretary's Office for 7 days

Adoption of Final Amendments for a Fee Increase

Agenda Item: Adoption of Final Amendments for a Fee Increase

Included in the agenda package:

A copy of the proposed stage posted on Townhall

(No public comment on the NOIRA or proposed regulations)

Proposed regulations previously adopted

Action:

Adoption of final amendments to regulations



Logged in as

Elaine J. Yeatts

Agency Department of Health Professions

Board Board of Counseling

Chapter Regulations Governing the Practice of Professional Counseling [18 VAC 115 - 20]

Action: Fee increase


Action 4443 / Stage 7455

Proposed Stage

- [Edit Stage](#)
- [Withdraw Stage](#)
- [Go to RIS Project](#)

Documents		
Proposed Text	8/11/2016 9:47 am	Sync Text with RIS
Agency Statement	2/24/2016	Upload / Replace
Attorney General Certification	3/1/2016	
DPB Economic Impact Analysis	4/15/2016 (modified 5/16/2016)	
Agency Response to EIA	4/27/2016	Upload / Replace
Governor's Approval Memo	8/1/2016	
Registrar Transmittal	8/1/2016	

Status	
Incorporation by Reference	No
Exempt from APA	No, this stage/action is subject to article 2 of the <i>Administrative Process Act</i> and the standard executive branch review process.
Attorney General Review	Submitted on 2/24/2016 Review Completed: 3/1/2016 Result: Certified
DPB Review	Submitted on 3/2/2016 Economist: Amy Hunter Policy Analyst: Melanie West Review Completed: 4/15/2016 <i>DPB's policy memo is "Governor's Confidential Working Papers"</i>
Secretary Review	Secretary of Health and Human Resources Review Completed: 6/8/2016

Governor's Review	Review Completed: 8/1/2016 Result: Approved
Virginia Registrar	Submitted on 8/1/2016 The Virginia Register of Regulations Publication Date: 8/22/2016  Volume: 32 Issue: 26
Public Hearings	09/22/2016 10:00 AM
Comment Period	📌 Last Day for Comments! Ends Today! (10/21/2016) Currently 0 comments

Contact Information	
Name / Title:	Jaime Hoyle / <i>Executive Director</i>
Address:	9960 Mayland Drive Suite 300 Richmond, VA 23233
Email Address:	jaime.hoyle@dhp.virginia.gov
Telephone:	(804)367-4406 FAX: (804)527-4435 TDD: (-)

This person is the primary contact for this board.

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Project 4525

BOARD OF COUNSELING

Fee increase

18VAC115-20-20. Fees required by the board.

A. The board has established the following fees applicable to licensure as a professional counselor:

Active annual license renewal	\$105 <u>\$130</u>
Inactive annual license renewal	\$55 <u>\$65</u>
Initial licensure by examination: Application processing and initial licensure	\$140 <u>\$175</u>
Initial licensure by endorsement: Application processing and initial licensure	\$140 <u>\$175</u>
Registration of supervision	\$50 <u>\$65</u>
Add or change supervisor	\$25 <u>\$30</u>
Duplicate license	\$5 <u>\$10</u>
Verification of licensure to another jurisdiction	\$25 <u>\$30</u>
Late renewal	\$35 <u>\$45</u>
Reinstatement of a lapsed license	\$165 <u>\$200</u>
Replacement of or additional wall certificate	\$15 <u>\$25</u>
Returned check	\$35
Reinstatement following revocation or suspension	\$500 <u>\$600</u>

B. All fees are nonrefundable.

C. Examination fees shall be determined and made payable as determined by the board.

18VAC115-30-30. Fees required by the board.

A. The board has established the following fees applicable to the certification of substance abuse counselors and substance abuse counseling assistants:

Substance abuse counselor annual certification renewal	\$55 <u>\$65</u>
--	-----------------------------

Substance abuse counseling assistant annual certification renewal	\$40 <u>\$50</u>
Substance abuse counselor initial certification by examination: Application processing and initial certification	\$90 <u>\$115</u>
Substance abuse counseling assistant initial certification by examination: Application processing and initial certification	\$90 <u>\$115</u>
Initial certification by endorsement of substance abuse counselors: Application processing and initial certification	\$90 <u>\$115</u>
Registration of supervision	\$50 <u>\$65</u>
Add or change supervisor	\$25 <u>\$30</u>
Duplicate certificate	\$5 <u>\$10</u>
Late renewal	\$20 <u>\$25</u>
Reinstatement of a lapsed certificate	\$100 <u>\$125</u>
Replacement of or additional wall certificate	\$15 <u>\$25</u>
Returned check	\$35
Reinstatement following revocation or suspension	\$500 <u>\$600</u>

B. All fees are nonrefundable.

18VAC115-40-20. Fees required by the board.

A. The board has established the following fees applicable to the certification of rehabilitation providers:

Initial certification by examination: Processing and initial certification	\$90 <u>\$115</u>
Initial certification by endorsement: Processing and initial certification	\$90 <u>\$115</u>
Certification renewal	\$55 <u>\$65</u>
Duplicate certificate	\$5 <u>\$10</u>
Late renewal	\$20 <u>\$25</u>
Reinstatement of a lapsed certificate	\$100 <u>\$125</u>
Replacement of or additional wall certificate	\$15 <u>\$25</u>
Returned check	\$35
Reinstatement following revocation or suspension	\$500 <u>\$600</u>

B. Fees shall be paid to the board. All fees are nonrefundable.

18VAC115-50-20. Fees.

A. The board has established fees for the following:

Registration of supervision	\$50 <u>\$65</u>
Add or change supervisor	\$25 <u>\$30</u>
Initial licensure by examination: Processing and initial licensure	\$140 <u>\$175</u>
Initial licensure by endorsement: Processing and initial licensure	\$140 <u>\$175</u>
Active annual license renewal	\$105 <u>\$130</u>
Inactive annual license renewal	\$55 <u>\$65</u>
Penalty for late renewal	\$35 <u>\$45</u>
Reinstatement of a lapsed license	\$165 <u>\$200</u>
Verification of license to another jurisdiction	\$25 <u>\$30</u>
Additional or replacement licenses	\$5 <u>\$10</u>
Additional or replacement wall certificates	\$15 <u>\$25</u>
Returned check	\$35
Reinstatement following revocation or suspension	\$500 <u>\$600</u>
One-time reduction for renewal of an active license due on June 30, 2010	\$52
One-time reduction for renewal of an inactive license due on June 30, 2010	\$27

~~B. Fees shall be paid to the board or its contractor or both in appropriate amounts as specified in the application instructions. All fees are nonrefundable.~~

C. Examination fees shall be determined and made payable as determined by the board.

18VAC115-60-20. Fees required by the board.

A. The board has established the following fees applicable to licensure as a substance abuse treatment practitioner:

Registration of supervision (initial)	\$50 <u>\$65</u>
Add/change supervisor	\$25 <u>\$30</u>
Initial licensure by examination: Processing and initial licensure	\$140 <u>\$175</u>

Initial licensure by endorsement: Processing and initial licensure	\$140 <u>\$175</u>
Active annual license renewal	\$105 <u>\$130</u>
Inactive annual license renewal	\$55 <u>\$65</u>
Duplicate license	\$5 <u>\$10</u>
Verification of license to another jurisdiction	\$25 <u>\$30</u>
Late renewal	\$35 <u>\$45</u>
Reinstatement of a lapsed license	\$165 <u>\$200</u>
Replacement of or additional wall certificate	\$15 <u>\$25</u>
Returned check	\$35
Reinstatement following revocation or suspension	\$500 <u>\$600</u>
One-time reduction for renewal of an active license due on June 30, 2010	\$52
One-time reduction for renewal of an inactive license due on June 30, 2010	\$27

~~B. Fees shall be paid directly to the board or its contractor, or both, in appropriate amounts as specified in the application instructions. All fees are nonrefundable.~~

C. Examination fees shall be determined and made payable as determined by the board.

Workforce Survey 2016 Results

Virginia's Licensed Professional Counselor Workforce: 2016

Healthcare Workforce Data Center

August 2016

Virginia Department of Health Professions
Healthcare Workforce Data Center
Perimeter Center
9960 Mayland Drive, Suite 300
Richmond, VA 23233
804-367-2115, 804-527-4466(fax)
E-mail: HWDC@dhp.virginia.gov

Follow us on Tumblr: www.vahwdc.tumblr.com

3,905 Licensed Professional Counselors voluntarily participated in this survey. Without their efforts the work of the center would not be possible. The Department of Health Professions, the Healthcare Workforce Data Center, and the Board of Counseling express our sincerest appreciation for your ongoing cooperation.

Thank You!

Virginia Department of Health Professions

David E. Brown, D.C.
Director

Lisa R. Hahn, MPA
Chief Deputy Director

Healthcare Workforce Data Center Staff:

Elizabeth Carter, Ph.D.
Executive Director

Yetty Shobo, Ph.D.
Deputy Director

Laura Jackson
Operations Manager

Christopher Coyle
Research Assistant

Virginia Board of Counseling

Chair

Kevin Doyle, Ed.D., LPC, LSATP
Charlottesville

Vice-Chair

Sandra Malawer, LPC, MFT
Great Falls

Members

Johnston Brendel, Ed.D., LPC, LMFT
Williamsburg

Jane Nevins, LPC, LSATP
Fairfax Station

Bev-Freda L. Jackson, Ph.D., MA

Charles "Rick" Gressard, Ph.D., LSATP, LPC, LMFT
Williamsburg

Vivian Sanchez-Jones
Roanoke

Phyllis Pugh, LPC, LMFT, CSAC
Hampton

Cinda Caiella, LMFT
Goochland

Holly Tracy, LPC, LMFT
Norfolk

Danielle Hunt, LPC
Richmond

Terry R. Tinsley, Ph.D., LPC, LMFT, NCC, CSOTP

Executive Director

Jaime H. Hoyle, J.D.

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The Licensed Professional Counselor Workforce: At a Glance:

The Workforce

Licensees:	4,575
Virginia's Workforce:	3,973
FTEs:	3,404

Background

Rural Childhood:	30%
HS Degree in VA:	46%
Prof. Degree in VA:	66%

Current Employment

Employed in Prof.:	93%
Hold 1 Full-time Job:	53%
Satisfied?:	96%

Survey Response Rate

All Licensees:	85%
Renewing Practitioners:	94%

Education

Masters:	85%
Ph.D.:	15%

Job Turnover

Switched Jobs:	6%
Employed over 2 yrs:	71%

Demographics

Female:	79%
Diversity Index:	30%
Median Age:	51

Finances

Median Income: \$50k-\$60k	
Health Benefits:	60%
Under 40 w/ Ed debt:	70%

Time Allocation

Patient Care:	60%-69%
Administration:	10%-19%
Patient Care Role:	57%

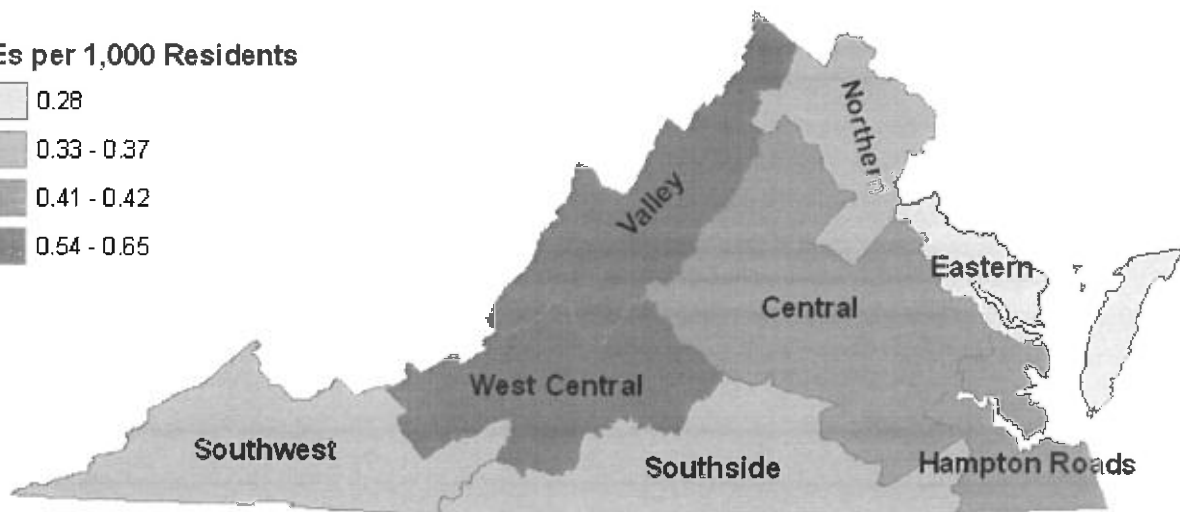
Source: Va. Healthcare Workforce Data Center

Full Time Equivalency Units per 1,000 Residents by Council on Virginia's Future Region

Source: Va Healthcare Workforce Data Center

FTEs per 1,000 Residents

	0.28
	0.33 - 0.37
	0.41 - 0.42
	0.54 - 0.65



Annual Estimates of the Resident Population: July 1, 2014
Source: U.S. Census Bureau, Population Division



3,905 Licensed Professional Counselors (LPCs) voluntarily took part in the 2016 Licensed Professional Counselor Survey. The Virginia Department of Health Professions' Healthcare Workforce Data Center (HWDC) administers the survey during the license renewal process, which takes place every June for LPCs. These survey respondents represent 85% of the 4,575 LPCs who are licensed in the state and 94% of renewing practitioners.

The HWDC estimates that 3,973 LPCs participated in Virginia's workforce during the survey period, which is defined as those who worked at least a portion of the year in the state or who live in the state and intend to return to work as an LPC at some point in the future. Between July 2015 and June 2016, Virginia's LPC workforce provided 3,404 "full-time equivalency units", which the HWDC defines simply as working 2,000 hours a year (or 40 hours per week for 50 weeks with 2 weeks off).

79% of all LPCs are female, including 86% of those LPCs who are under the age of 40. In a random encounter between two LPCs, there is a 30% chance that they would be of different races or ethnicities, a measure known as the diversity index. For those LPCs who are under the age of 40, however, this value increases to 38%. Regardless, Virginia's LPC workforce is less diverse than Virginia's population as a whole, which has a diversity index of 55%.

30% of all LPCs grew up in a rural area of Virginia, but just 21% of these professionals currently work in non-Metro areas of the state. Overall, 10% of Virginia's LPCs currently work in non-Metro areas of the state. Meanwhile, 46% of all LPCs graduated from high school in Virginia, while 66% earned their initial professional degree in the state.

85% of the state's LPC workforce has a Master's degree as their highest professional degree, while the remainder has gone on to earn a doctorate. In addition, 52% of all LPCs have a primary specialty in mental health. 39% of all LPCs currently carry educational debt, including 70% of those under the age of 40. The median debt burden for those LPCs with educational debt is between \$50,000 and \$60,000.

93% of LPCs are currently employed in the profession. 53% currently hold one full-time position, while another 25% hold multiple positions. Only 6% of LPCs have switched jobs over the past 12 months, while 71% have worked at the same work location for at least two years. In addition, only 1% of Virginia's LPCs have experienced involuntary unemployment at some point in the past year.

The median annual income for LPCs is between \$50,000 and \$60,000. In addition, among those LPCs who receive either an hourly wage or a salary at their primary work location, 72% also receive at least one employer-sponsored benefit. This includes 60% who have access to employer-sponsored health insurance and 57% who have access to some form of a retirement plan. 96% of LPCs indicate they are satisfied with their current employment situation, including 71% who indicate they are "very satisfied".

28% of all LPCs work in Northern Virginia, the most of any region in the state. In addition, another 20% of LPCs work in Hampton Roads, while 19% work in Central Virginia. 73% of all LPCs work in the private sector, including 54% who work at a for-profit institution. Meanwhile, private solo practices are the most common establishment type in Virginia, employing 19% of state's LPC workforce.

A typical LPC spends approximately two-thirds of her time treating patients. In fact, 57% serve a patient care role, meaning that at least 60% of their time is spent in patient care activities. In addition, the typical LPC treats between 1 and 24 patients per week at their primary work location, and approximately 75% of these patients are adults.

24% of all LPCs expect to retire by the age of 65. 24% of the current workforce expects to retire in the next ten years, while half the current workforce expects to retire by 2041. Over the next two years, 15% of LPCs plan on increasing patient care activities, and 12% plan on pursuing additional educational opportunities.

A Closer Look:

Licensees		
License Status	#	%
Renewing Practitioners	3,944	86%
New Licensees	435	10%
Non-Renewals	196	4%
All Licensees	4,575	100%

Source: Va. Healthcare Workforce Data Center

HWDC surveys tend to achieve very high response rates. 94% of renewing LPCs submitted a survey. These represent 85% of LPCs who held a license at some point during the survey time period.

At a Glance:

Licensed LPCs

Number:	4,575
New:	10%
Not Renewed:	4%

Response Rates

All Licensees:	85%
Renewing Practitioners:	94%

Source: Va. Healthcare Workforce Data Center

Response Rates	
Completed Surveys	3,905
Response Rate, all licensees	85%
Response Rate, Renewals	94%

Source: Va. Healthcare Workforce Data Center

Response Rates			
Statistic	Non Respondents	Respondent	Response Rate
By Age			
Under 35	124	346	74%
35 to 39	78	479	86%
40 to 44	69	462	87%
45 to 49	82	473	85%
50 to 54	52	432	89%
55 to 59	70	455	87%
60 to 64	70	499	88%
65 and Over	125	759	86%
Total	670	3,905	85%
New Licenses			
Issued in Past Year	252	183	42%
Metro Status			
Non-Metro	38	298	89%
Metro	476	3,163	87%
Not in Virginia	156	444	74%

Source: Va. Healthcare Workforce Data Center

Definitions

- The Survey Period:** The survey was conducted in June 2016.
- Target Population:** All LPCs who held a Virginia license at some point between July 2015 and June 2016.
- Survey Population:** The survey was available to LPCs who renewed their licenses online. It was not available to those who did not renew, including LPCs newly licensed in 2016.

At a Glance:

Workforce

Virginia's LPC Workforce: 3,973
 FTEs: 3,404

Utilization Ratios

Licenses in VA Workforce: 87%
 Licenses per FTE: 1.34
 Workers per FTE: 1.17

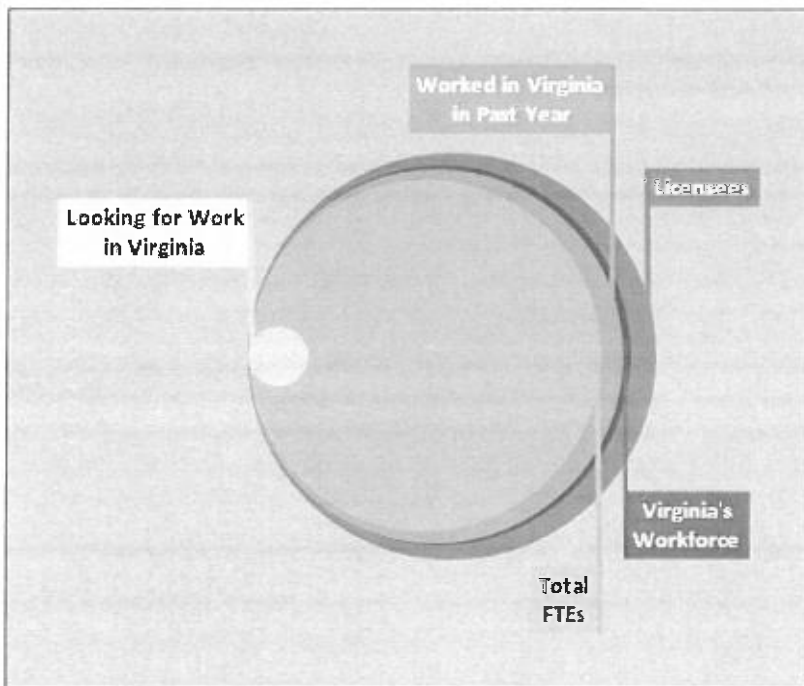
Source: Va. Healthcare Workforce Data Center

Definitions

- 1. Virginia's Workforce:** A licensee with a primary or secondary work site in Virginia at any time during the survey timeframe or who indicated intent to return to Virginia's workforce at any point in the future.
- 2. Full Time Equivalency Unit (FTE):** The HWDC uses 2,000 (40 hours for 50 weeks) as its baseline measure for FTEs.
- 3. Licenses in VA Workforce:** The proportion of licenses in Virginia's Workforce.
- 4. Licenses per FTE:** An indication of the number of licenses needed to create 1 FTE. Higher numbers indicate lower licensee participation.
- 5. Workers per FTE:** An indication of the number of workers in Virginia's workforce needed to create 1 FTE. Higher numbers indicate lower utilization of available workers.

Virginia's LPC Workforce		
Status	#	%
Worked in Virginia in Past Year	3,873	97%
Looking for Work in Virginia	100	3%
Virginia's Workforce	3,973	100%
Total FTEs	3,404	
Licenses	4,575	

Source: Va. Healthcare Workforce Data Center



Source: Va. Healthcare Workforce Data Center

This report uses weighting to estimate the figures in this report. Unless otherwise noted, figures refer to the Virginia Workforce only. For more information on HWDC's methodology visit: www.dhp.virginia.gov/hwdc

A Closer Look:

Age & Gender						
Age	Male		Female		Total	
	#	% Male	#	% Female	#	% in Age Group
Under 35	54	13%	357	87%	411	12%
35 to 39	63	14%	388	86%	451	13%
40 to 44	65	16%	357	85%	423	12%
45 to 49	77	18%	349	82%	426	12%
50 to 54	67	18%	300	82%	367	11%
55 to 59	98	27%	270	73%	367	11%
60 to 64	118	28%	309	72%	427	12%
65 +	185	31%	414	69%	599	17%
Total	727	21%	2,743	79%	3,471	100%

Source: Va. Healthcare Workforce Data Center

At a Glance:

Gender

% Female: 79%
 % Under 40 Female: 86%

Age

Median Age: 51
 % Under 40: 25%
 % 55+: 40%

Diversity

Diversity Index: 30%
 Under 40 Div. Index: 38%

Source: Va. Healthcare Workforce Data Center

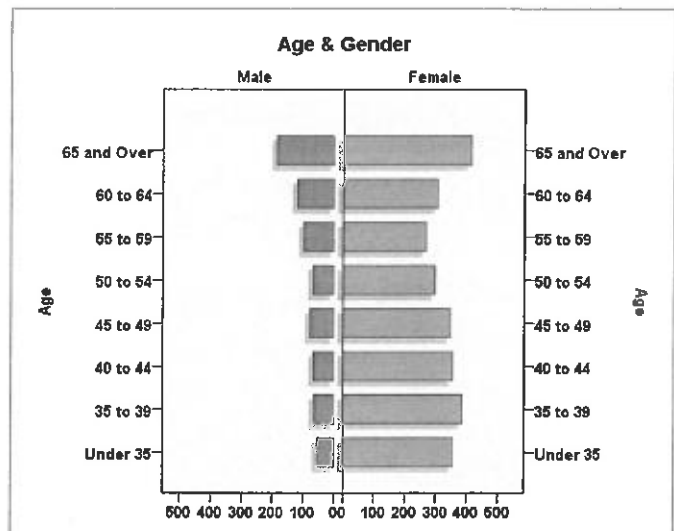
Race & Ethnicity					
Race/ Ethnicity	Virginia*	LPCs		LPCs under 40	
	%	#	%	#	%
White	63%	2,896	83%	667	77%
Black	19%	359	10%	125	15%
Asian	6%	39	1%	10	1%
Other Race	0%	19	1%	5	1%
Two or more races	2%	65	2%	23	3%
Hispanic	9%	105	3%	32	4%
Total	100%	3,483	100%	862	100%

*Population data in this chart is from the US Census, Annual Estimates of the Resident Population by Sex, Race, and Hispanic Origin for the United States, States, and Counties: July 1, 2014.

Source: Va. Healthcare Workforce Data Center

In a chance encounter between two LPCs, there is a 30% chance that they would be of a different race/ethnicity (a measure known as the Diversity Index).

25% of all LPCs are under the age of 40, and 86% of these professionals are female. In addition, the diversity index among LPCs who are under the age of 40 is 38%.



Source: Va. Healthcare Workforce Data Center

At a Glance:

Childhood

Urban Childhood: 14%
 Rural Childhood: 30%

Virginia Background

HS in Virginia: 46%
 Prof. Ed. in VA: 66%
 HS or Prof. Ed. in VA: 73%

Location Choice

% Rural to Non-Metro: 21%
 % Urban/Suburban to Non-Metro: 4%

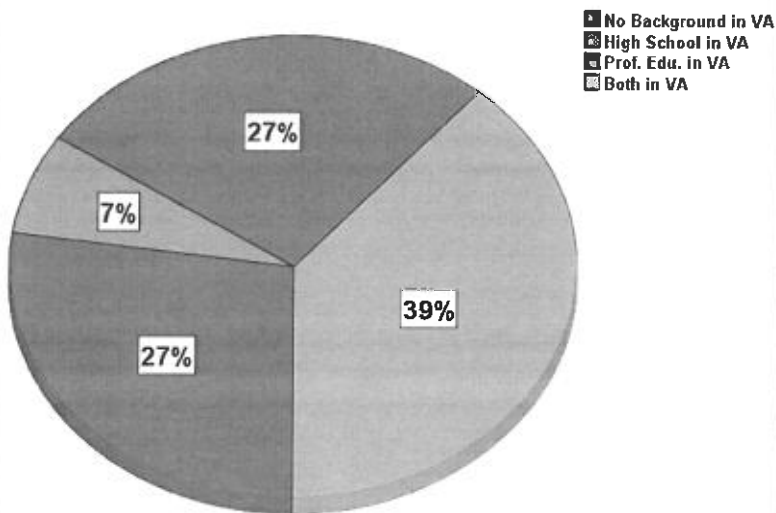
Source: Va. Healthcare Workforce Data Center

A Closer Look:

Primary Location: USDA Rural Urban Continuum		Rural Status of Childhood Location		
Code	Description	Rural	Suburban	Urban
Metro Counties				
1	Metro, 1 million+	21%	63%	16%
2	Metro, 250,000 to 1 million	39%	49%	12%
3	Metro, 250,000 or less	39%	51%	10%
Non-Metro Counties				
4	Urban pop 20,000+, Metro adj	66%	26%	9%
6	Urban pop, 2,500-19,999, Metro adj	64%	28%	8%
7	Urban pop, 2,500-19,999, nonadj	86%	9%	5%
8	Rural, Metro adj	67%	21%	13%
9	Rural, nonadj	33%	42%	25%
Overall		30%	56%	14%

Source: Va. Healthcare Workforce Data Center

Educational Background in Virginia



Source: Va. Healthcare Workforce Data Center

30% of LPCs grew up in self-described rural areas, and 21% of these professionals currently work in non-metro counties. Overall, 10% of all LPCs in the state currently work in non-metro counties.

Top Ten States for Licensed Professional Counselor Recruitment

Rank	All LPCs			
	High School	#	Init. Prof Degree	#
1	Virginia	1,579	Virginia	2,262
2	New York	220	Maryland	108
3	Pennsylvania	197	Washington, D.C.	100
4	Maryland	139	North Carolina	93
5	Outside U.S./Canada	125	Ohio	76
6	North Carolina	114	Florida	62
7	New Jersey	107	Pennsylvania	61
8	Ohio	100	New York	54
9	Florida	83	Texas	54
10	California	57	Massachusetts	45

Source: Va. Healthcare Workforce Data Center

46% of licensed LPCs received their high school degree in Virginia, and 66% received their initial professional degree in the state.

Among LPCs who received their initial license in the past five years, 46% received their high school degree in Virginia, while 63% received their initial professional degree in the state.

Rank	Licensed in the Past 5 Years			
	High School	#	Init. Prof Degree	#
1	Virginia	524	Virginia	702
2	New York	60	North Carolina	37
3	Maryland	50	Ohio	33
4	Pennsylvania	50	Maryland	32
5	North Carolina	49	Florida	31
6	Outside U.S./Canada	48	Washington, D.C.	28
7	Ohio	34	Minnesota	22
8	New Jersey	33	Texas	21
9	Florida	27	New York	17
10	Texas	21	Georgia	17

Source: Va. Healthcare Workforce Data Center

13% of Virginia's licensees did not participate in the state's LPC workforce during the past year. 79% of these professionals worked at some point in the past year, including 68% who worked in a job related to behavioral sciences.

At a Glance:

Not in VA Workforce

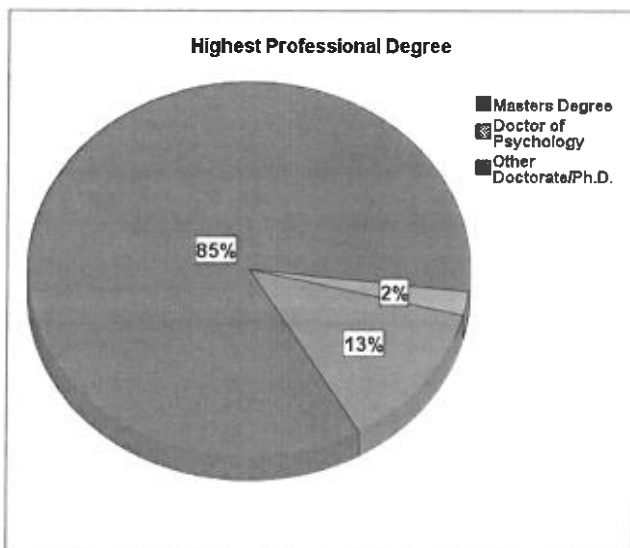
Total:	602
% of Licensees:	13%
Federal/Military:	8%
Va. Border State/DC:	21%

Source: Va. Healthcare Workforce Data Center

A Closer Look:

Highest Degree		
Degree	#	%
Bachelor's Degree	1	0%
Master's Degree	2,905	85%
Doctor of Psychology	69	2%
Other Doctorate	434	13%
Total	3,409	100%

Source: Va. Healthcare Workforce Data Center



Source: Va. Healthcare Workforce Data Center

85% of LPCs hold a Master's degree as their highest professional degree. 39% of LPCs carry educational debt, including 70% of those under the age of 40. The median debt burden among LPCs with educational debt is between \$50,000 and \$60,000.

At a Glance:

Education
 Master's Degree: 85%
 Doctorate: 15%

Educational Debt
 Carry debt: 39%
 Under age 40 w/ debt: 70%
 Median debt: \$50k-\$60k

Source: Va. Healthcare Workforce Data Center

Amount Carried	All LPCs		LPCs under 40	
	#	%	#	%
None	1,879	61%	230	30%
Less than \$10,000	151	5%	60	8%
\$10,000-\$19,999	142	5%	60	8%
\$20,000-\$29,999	94	3%	41	5%
\$30,000-\$39,999	113	4%	47	6%
\$40,000-\$49,999	80	3%	39	5%
\$50,000-\$59,999	70	2%	44	6%
\$60,000-\$69,999	70	2%	36	5%
\$70,000-\$79,999	74	2%	44	6%
\$80,000-\$89,999	53	2%	32	4%
\$90,000-\$99,999	38	1%	14	2%
\$100,000-\$109,999	79	3%	31	4%
\$110,000-\$119,999	42	1%	21	3%
\$120,000-\$129,999	22	1%	11	1%
\$130,000-\$139,999	26	1%	13	2%
\$140,000-\$149,999	15	0%	5	1%
\$150,000 or More	115	4%	48	6%
Total	3,063	100%	776	100%

Source: Va. Healthcare Workforce Data Center

A Closer Look:

At a Glance:

Primary Specialty

Mental Health: 52%
 Child: 9%
 Substance Abuse: 7%

Secondary Specialty

Mental Health: 15%
 Substance Abuse: 14%
 Family: 12%

Source: Va. Healthcare Workforce Data Center

52% of all LPCs have a primary specialty in mental health. Another 9% have a primary specialty in children, while 7% have a primary specialty in substance abuse.

Specialty	Specialties			
	Primary		Secondary	
	#	%	#	%
Mental Health	1769	52%	442	15%
Child	299	9%	270	9%
Substance Abuse	225	7%	425	14%
Behavioral Disorders	198	6%	337	11%
Family	182	5%	353	12%
Marriage	117	3%	243	8%
School/Educational	81	2%	128	4%
Sex Offender Treatment	34	1%	46	2%
Rehabilitation	24	1%	33	1%
Vocational/Work Environment	23	1%	30	1%
Forensic	16	0%	33	1%
Health/Medical	14	0%	19	1%
Neurology/Neuropsychology	5	0%	8	0%
Social	3	0%	10	0%
Gerontologic	1	0%	10	0%
Public Health	1	0%	5	0%
Experimental or Research	1	0%	3	0%
Industrial-Organizational	0	0%	6	0%
Other Specialty Area	129	4%	208	7%
General Practice (Non-Specialty)	254	8%	438	14%
Total	3,376	100%	3047	100%

Source: Va. Healthcare Workforce Data Center

At a Glance:

Employment

Employed in Profession: 93%
 Involuntarily Unemployed: < 1%

Positions Held

1 Full-time: 53%
 2 or More Positions: 25%

Weekly Hours:

40 to 49: 44%
 60 or more: 6%
 Less than 30: 19%

Source: Va. Healthcare Workforce Data Center

A Closer Look:

Current Work Status		
Status	#	%
Employed, capacity unknown	1	0%
Employed in a behavioral sciences-related capacity	3,180	93%
Employed, NOT in a behavioral sciences-related capacity	99	3%
Not working, reason unknown	1	0%
Involuntarily unemployed	5	0%
Voluntarily unemployed	89	3%
Retired	59	2%
Total	3,435	100%

Source: Va. Healthcare Workforce Data Center

93% of LPCs are currently employed in their profession. 53% of LPCs hold one full-time job, and 44% work between 40 and 49 hours per week.

Current Weekly Hours		
Hours	#	%
0 hours	154	5%
1 to 9 hours	130	4%
10 to 19 hours	201	6%
20 to 29 hours	317	9%
30 to 39 hours	477	14%
40 to 49 hours	1,488	44%
50 to 59 hours	419	12%
60 to 69 hours	152	4%
70 to 79 hours	28	1%
80 or more hours	14	0%
Total	3,380	100%

Source: Va. Healthcare Workforce Data Center

Current Positions		
Positions	#	%
No Positions	154	5%
One Part-Time Position	563	17%
Two Part-Time Positions	184	5%
One Full-Time Position	1,806	53%
One Full-Time Position & One Part-Time Position	565	17%
Two Full-Time Positions	18	1%
More than Two Positions	92	3%
Total	3,382	100%

Source: Va. Healthcare Workforce Data Center

A Closer Look:

Income		
Hourly Wage	#	%
Volunteer Work Only	39	1%
Less than \$20,000	239	9%
\$20,000-\$29,999	165	6%
\$30,000-\$39,999	220	8%
\$40,000-\$49,999	361	13%
\$50,000-\$59,999	475	17%
\$60,000-\$69,999	457	17%
\$70,000-\$79,999	264	10%
\$80,000-\$89,999	195	7%
\$90,000-\$99,999	131	5%
\$100,000-\$109,999	74	3%
\$110,000 or More	126	5%
Total	2,748	100%

Source: Va. Healthcare Workforce Data Center

At a Glance:

Earnings
Median Income: \$50k-\$60k

Benefits
(Salary & Wage Employees only)
Health Insurance: 60%
Retirement: 57%

Satisfaction
Satisfied: 96%
Very Satisfied: 71%

Source: Va. Healthcare Workforce Data Center

Job Satisfaction		
Level	#	%
Very Satisfied	2,347	71%
Somewhat Satisfied	829	25%
Somewhat Dissatisfied	114	3%
Very Dissatisfied	35	1%
Total	3,325	100%

Source: Va. Healthcare Workforce Data Center

The typical LPC earned between \$50,000 and \$60,000 per year. Among LPCs who received either an hourly wage or salary as compensation at the primary work location, 60% received health insurance and 57% also had access to some form of a retirement plan.

Employer-Sponsored Benefits			
Benefit	#	%	% of Wage/Salary Employees
Paid Vacation	1,563	49%	66%
Paid Sick Leave	1,472	46%	62%
Health Insurance	1,442	45%	60%
Dental Insurance	1,359	43%	57%
Retirement	1,351	42%	57%
Group Life Insurance	1,090	34%	47%
Signing/Retention Bonus	77	2%	3%
Received At Least One Benefit	1,760	55%	72%

*From any employer at time of survey.

Source: Va. Healthcare Workforce Data Center

A Closer Look:

Employment Instability in Past Year		
In the past year did you . . . ?	#	%
Experience Involuntary Unemployment?	35	1%
Experience Voluntary Unemployment?	185	5%
Work Part-time or temporary positions, but would have preferred a full-time/permanent position?	107	3%
Work two or more positions at the same time?	993	25%
Switch employers or practices?	247	6%
Experienced at least one	1,331	34%

Source: Va. Healthcare Workforce Data Center

Only 1% of Virginia's LPCs experienced involuntary unemployment at some point during the past year. By comparison, Virginia's average monthly unemployment rate was 4.1% during the past 12 months.¹

At a Glance:

Unemployment Experience
 Involuntarily Unemployed: 1%
 Underemployed: 3%

Turnover & Tenure
 Switched Jobs: 6%
 New Location: 17%
 Over 2 years: 71%
 Over 2 yrs, 2nd location: 59%

Employment Type
 Salary/Commission: 58%
 Business/Practice Income: 20%

Source: Va. Healthcare Workforce Data Center

71% of LPCs have worked at their primary location for more than two years, while 6% have switched jobs during the past 12 months.

Tenure	Primary		Secondary	
	#	%	#	%
Not Currently Working at this Location	61	2%	30	3%
Less than 6 Months	149	5%	78	9%
6 Months to 1 Year	232	7%	111	12%
1 to 2 Years	488	15%	160	17%
3 to 5 Years	778	24%	219	24%
6 to 10 Years	661	20%	166	18%
More than 10 Years	890	27%	153	17%
Subtotal	3,260	100%	917	100%
Did not have location	109		3,012	
Item Missing	604		44	
Total	3,973		3,973	

Source: Va. Healthcare Workforce Data Center

58% of LPCs are salaried employees, while 20% receive income from their own business/practice.

Employment Type		
Primary Work Site	#	%
Salary/ Commission	1,537	58%
Business/ Practice Income	539	20%
Hourly Wage	373	14%
By Contract	199	7%
Unpaid	21	1%
Subtotal	2,669	100%
Did not have location	109	
Item Missing	1,195	

Source: Va. Healthcare Workforce Data Center

¹ As reported by the US Bureau of Labor Statistics. The non-seasonally adjusted monthly unemployment rate ranged from 3.4% in April 2016 to 4.5% in July 2015.

At a Glance:

Concentration

Top Region:	28%
Top 3 Regions:	68%
Lowest Region:	1%

Locations

2 or more (Past Year):	29%
2 or more (Now*):	27%

Source: Va. Healthcare Workforce Data Center

28% of LPCs work in Northern Virginia, the most of any region in the state. Another 20% work in Hampton Roads, while 19% work in Central Virginia.

A Closer Look:

COVF Region	Regional Distribution of Work Locations			
	Primary Location		Secondary Location	
	#	%	#	%
Central	613	19%	182	19%
Eastern	40	1%	8	1%
Hampton Roads	659	20%	204	22%
Northern	920	28%	222	23%
Southside	119	4%	42	4%
Southwest	127	4%	49	5%
Valley	272	8%	76	8%
West Central	467	14%	122	13%
Virginia Border State/DC	16	0%	15	2%
Other US State	8	0%	25	3%
Outside of the US	1	0%	0	0%
Total	3,242	100%	945	100%
Item Missing	621		16	

Source: Va. Healthcare Workforce Data Center

Council On Virginia's Future Regions



Source: Va. Healthcare Workforce Data Center

27% of all LPCs currently have multiple work locations, while 29% have had multiple work locations during the past year.

Locations	Number of Work Locations			
	Work Locations in Past Year		Work Locations Now*	
	#	%	#	%
0	99	3%	147	4%
1	2,300	69%	2,317	69%
2	484	14%	469	14%
3	402	12%	382	11%
4	36	1%	19	1%
5	12	0%	8	0%
6 or More	24	1%	15	0%
Total	3,357	100%	3,357	100%

*At the time of survey completion, June 2016.

Source: Va. Healthcare Workforce Data Center

A Closer Look:

Sector	Location Sector			
	Primary Location		Secondary Location	
	#	%	#	%
For-Profit	1,662	54%	569	67%
Non-Profit	585	19%	153	18%
State/Local Government	719	24%	110	13%
Veterans Administration	6	0%	0	0%
U.S. Military	57	2%	10	1%
Other Federal Government	30	1%	7	1%
Total	3,059	100%	849	100%
Did not have location	109		3012	
Item Missing	805		112	

Source: Va. Healthcare Workforce Data Center

At a Glance: (Primary Locations)

Sector

For Profit: 54%

Federal: 3%

Top Establishments

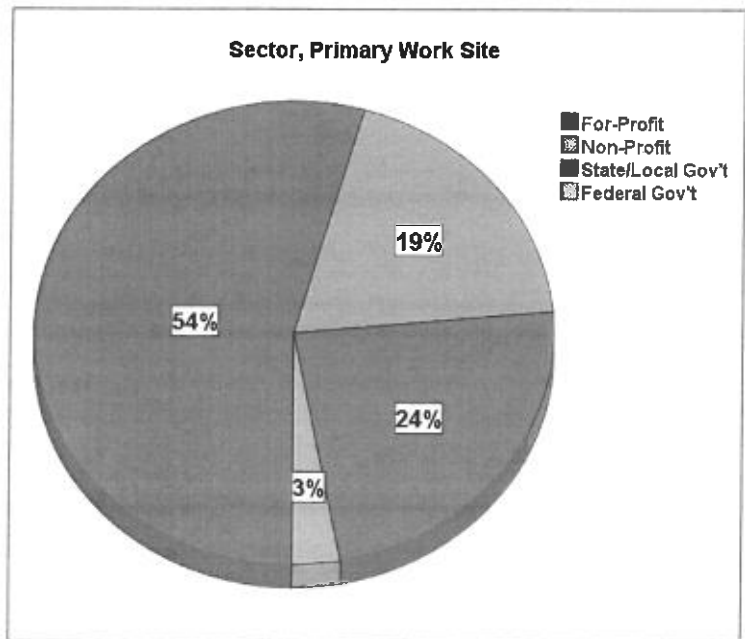
Private Practice, Solo: 19%

Private Practice, Group: 17%

Comm. Services Board: 16%

Source: Va. Healthcare Workforce Data Center

73% of LPCs work in the private sector, including 54% who work at for-profit establishments. Another 24% of LPCs work for state or local governments.



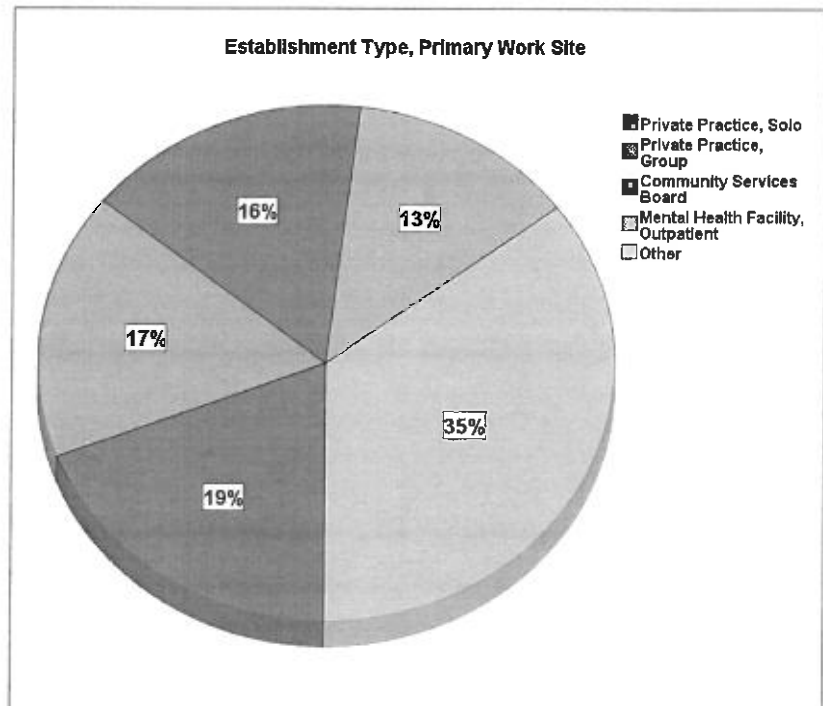
Source: Va. Healthcare Workforce Data Center

Establishment Type	Location Type			
	Primary Location		Secondary Location	
	#	%	#	%
Private practice, solo	553	19%	171	21%
Private practice, group	484	17%	163	20%
Community Services Board	465	16%	54	7%
Mental health facility, outpatient	370	13%	106	13%
Community-based clinic or health center	254	9%	68	8%
School (providing care to clients)	152	5%	18	2%
Academic institution (teaching health professions students)	106	4%	72	9%
Residential mental health/substance abuse facility	55	2%	16	2%
Corrections/Jail	55	2%	13	2%
Hospital, psychiatric	52	2%	19	2%
Hospital, general	38	1%	17	2%
Administrative or regulatory	37	1%	7	1%
Rehabilitation facility	25	1%	3	0%
Other practice setting	250	9%	101	12%
Total	2,896	100%	828	100%
Did Not Have a Location	109		3012	

36% of all LPCs work at either a solo or group private practice, while another 16% works at a community services board.

Source: Va. Healthcare Workforce Data Center

Among those LPCs who also have a secondary work location, 40% work at either a solo or group private practice, while 13% work at an outpatient mental health facility.



Source: Va. Healthcare Workforce Data Center

At a Glance:
(Primary Locations)

Typical Time Allocation

Patient Care: 60%-69%
Administration: 10%-19%

Roles

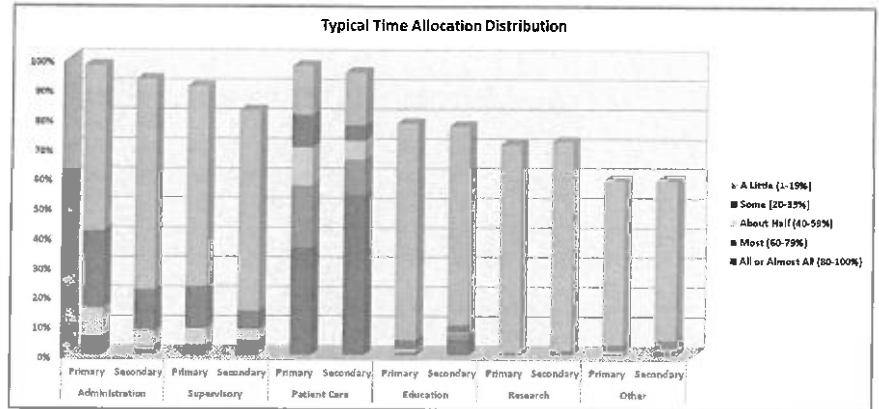
Patient Care: 57%
Administrative: 6%
Supervisory: 4%

Patient Care LPCs

Median Admin Time: 10%-19%
Ave. Admin Time: 10%-19%

Source: Va. Healthcare Workforce Data Center

A Closer Look:



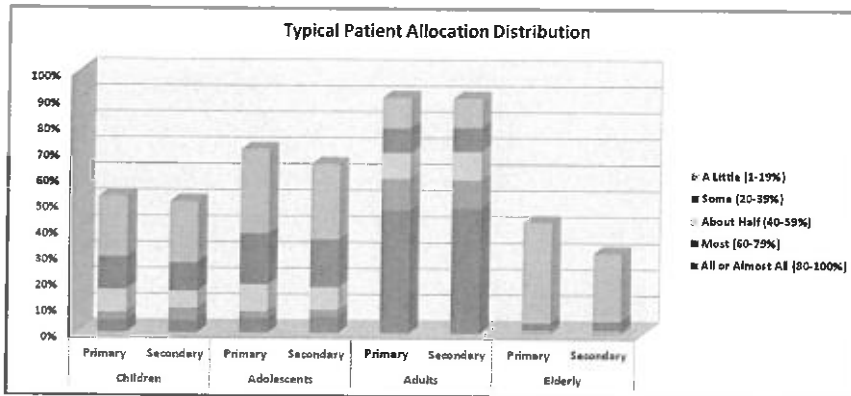
Source: Va. Healthcare Workforce Data Center

The typical LPC spends approximately two-thirds of her time treating patients. In fact, 57% of all LPCs fill a patient care role, defined as spending 60% or more of their time on patient care activities.

Time Spent	Time Allocation											
	Admin.		Supervisory		Patient Care		Education		Research		Other	
	Prim. Site	Sec. Site	Prim. Site	Sec. Site	Prim. Site	Sec. Site	Prim. Site	Sec. Site	Prim. Site	Sec. Site	Prim. Site	Sec. Site
All or Almost All (80-100%)	2%	2%	1%	4%	36%	54%	1%	5%	0%	0%	0%	1%
Most (60-79%)	4%	1%	3%	1%	21%	12%	1%	2%	0%	0%	0%	0%
About Half (40-59%)	9%	5%	5%	4%	13%	6%	1%	0%	0%	0%	1%	1%
Some (20-39%)	26%	14%	14%	6%	11%	5%	3%	2%	1%	1%	2%	3%
A Little (1-19%)	56%	71%	68%	68%	16%	18%	73%	67%	70%	70%	55%	54%
None (0%)	2%	7%	9%	17%	2%	5%	22%	23%	29%	28%	41%	41%

Source: Va. Healthcare Workforce Data Center

A Closer Look:



Source: Va. Healthcare Workforce Data Center

At a Glance:
(Primary Locations)

Typical Patient Allocation

Children: 1%-9%
 Adolescents: 1%-9%
 Adults: 70%-79%
 Elderly: None

Roles

Children: 8%
 Adolescents: 8%
 Adults: 59%
 Elderly: 1%

Source: Va. Healthcare Workforce Data Center

Approximately three-quarters of all patients seen by a typical LPC at her primary work location are adults. In addition, 59% of LPCs serve an adult patient care role, meaning that at least 60% of their patients are adults.

Time Spent	Patient Allocation							
	Children		Adolescents		Adults		Elderly	
	Prim. Site	Sec. Site	Prim. Site	Sec. Site	Prim. Site	Sec. Site	Prim. Site	Sec. Site
All or Almost All (80-100%)	5%	5%	6%	6%	47%	48%	0%	0%
Most (60-79%)	3%	5%	3%	3%	12%	11%	0%	0%
About Half (40-59%)	9%	7%	10%	9%	10%	11%	1%	1%
Some (20-39%)	12%	11%	19%	18%	9%	9%	3%	4%
A Little (1-19%)	23%	23%	32%	29%	12%	11%	38%	26%
None (0%)	48%	50%	30%	35%	10%	10%	57%	69%

Source: Va. Healthcare Workforce Data Center

At a Glance:

Patients Per Week

Primary Location: 1-24

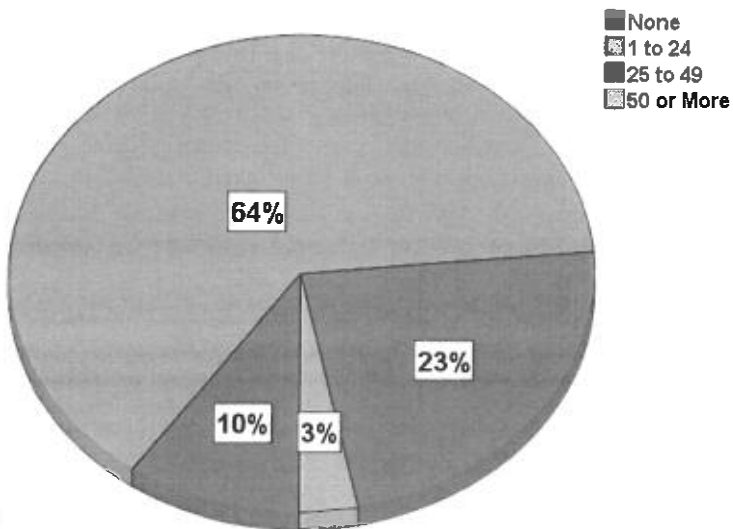
Secondary Location: 1-24

Source: Va. Healthcare Workforce Data Center

# of Patients	Patients Per Week			
	Primary Location		Secondary Location	
	#	%	#	%
None	298	10%	124	15%
1 to 24	1,950	64%	647	77%
25 to 49	711	23%	54	6%
50 to 74	73	2%	4	0%
75 or More	25	1%	5	1%
Total	3,058	100%	835	100%

Source: Va. Healthcare Workforce Data Center

Patients Per Week, Primary Work Site



Source: Va. Healthcare Workforce Data Center

64% of all LPCs treat between 1 and 24 patients per week at their primary work location. Among those LPCs who also have a secondary work location, 77% treat between 1 and 24 patients per week.

A Closer Look:

Retirement Expectations				
Expected Retirement Age	All LPCs		LPCs over 50	
	#	%	#	%
Under age 50	31	1%	-	-
50 to 54	54	2%	2	0%
55 to 59	189	6%	49	3%
60 to 64	431	15%	139	9%
65 to 69	901	31%	441	30%
70 to 74	599	21%	388	26%
75 to 79	247	8%	158	11%
80 or over	87	3%	60	4%
I do not intend to retire	375	13%	229	16%
Total	2,913	100%	1,466	100%

Source: Va. Healthcare Workforce Data Center

At a Glance:

Retirement Expectations

All LPCs	
Under 65:	24%
Under 60:	9%
LPCs 50 and over	
Under 65:	13%
Under 60:	3%

Time until Retirement

Within 2 years:	7%
Within 10 years:	24%
Half the workforce:	by 2041

Source: Va. Healthcare Workforce Data Center

9% of LPCs expect to retire no later than the age of 60, while 24% expect to retire by the age of 65. Among those LPCs who are ages 50 or over, 13% still expect to retire by the age of 65.

Within the next two years, only 2% of Virginia's LPCs plan on leaving the state to practice elsewhere, while 1% plan on leaving the profession entirely. Meanwhile, 15% plan on increasing patient care hours, and 12% expect to pursue additional educational opportunities.

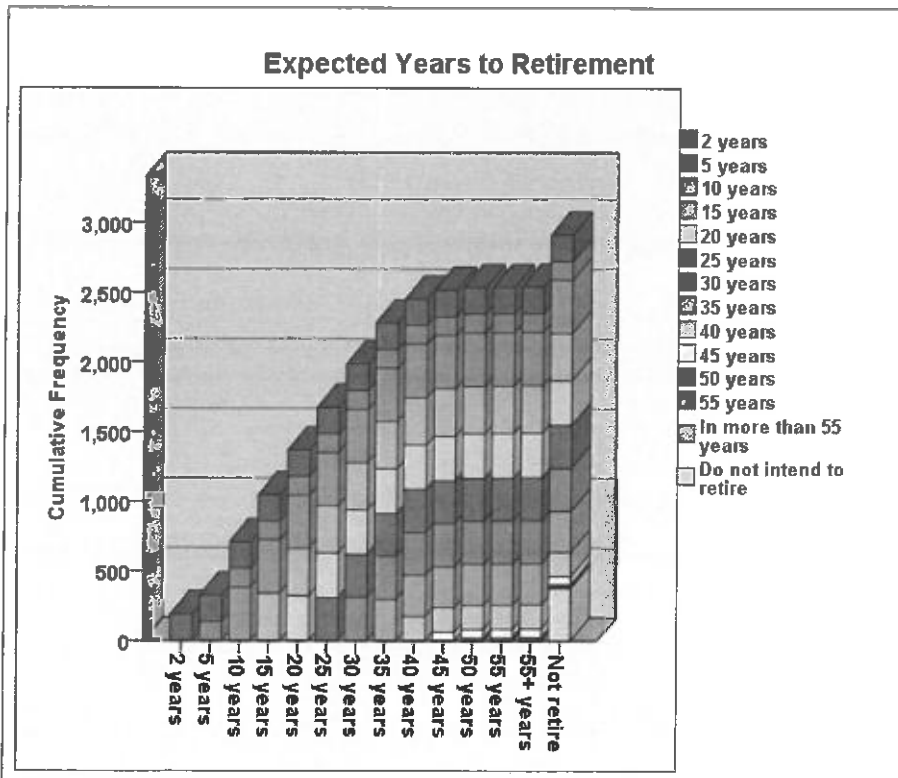
Future Plans		
2 Year Plans:	#	%
Decrease Participation		
Leave Profession	45	1%
Leave Virginia	65	2%
Decrease Patient Care Hours	317	8%
Decrease Teaching Hours	21	1%
Increase Participation		
Increase Patient Care Hours	589	15%
Increase Teaching Hours	299	8%
Pursue Additional Education	488	12%
Return to Virginia's Workforce	36	1%

Source: Va. Healthcare Workforce Data Center

By comparing retirement expectation to age, we can estimate the maximum years to retirement for LPCs. 7% of LPCs expect to retire in the next two years, while 24% plan on retiring in the next ten years. More than half of the current LPC workforce expects to retire by 2041.

Time to Retirement			
Expect to retire within . . .	#	%	Cumulative %
2 years	190	7%	7%
5 years	136	5%	11%
10 years	381	13%	24%
15 years	340	12%	36%
20 years	321	11%	47%
25 years	307	11%	58%
30 years	310	11%	68%
35 years	295	10%	78%
40 years	173	6%	84%
45 years	63	2%	86%
50 years	18	1%	87%
55 years	1	0%	87%
In more than 55 years	4	0%	87%
Do not intend to retire	375	13%	100%
Total	2,913	100%	

Source: Va. Healthcare Workforce Data Center



Source: Va. Healthcare Workforce Data Center

Using these estimates, retirements will begin to reach over 10% of the current workforce every five years by 2026. Retirements will peak at 13% of the current workforce around the same time period before declining to under 10% of the current workforce again around 2056.

At a Glance:

FTEs

Total: 3,404
 FTEs/1,000 Residents: 0.409
 Average: 0.88

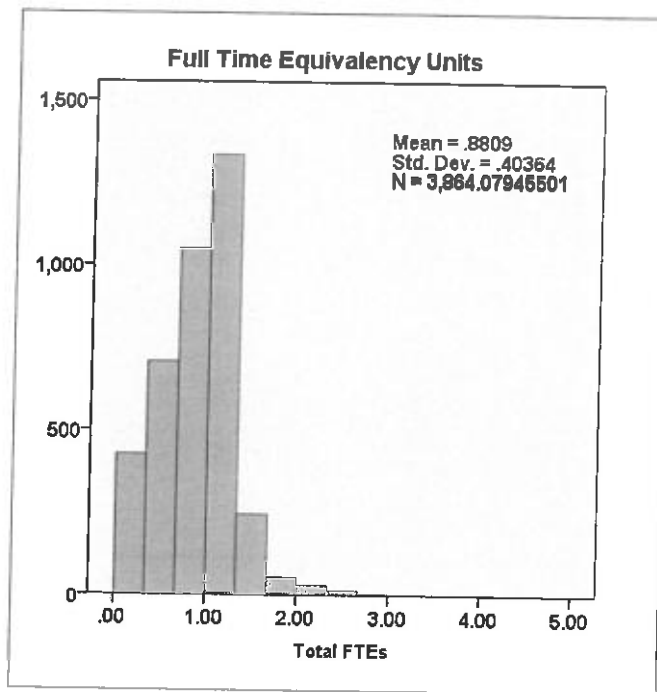
Age & Gender Effect

Age, Partial Eta²: Medium
 Gender, Partial Eta²: Small

Partial Eta² Explained:
 Partial Eta² is a statistical measure of effect size.

Source: Va. Healthcare Workforce Data Center

A Closer Look:

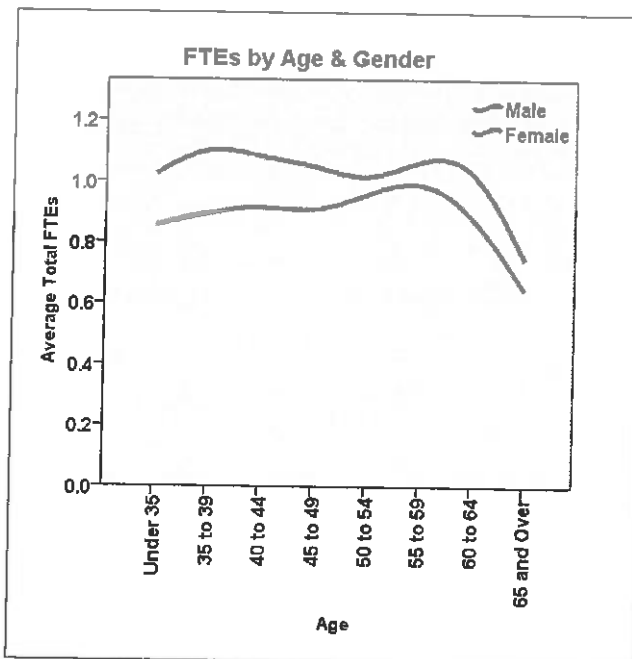


Source: Va. Healthcare Workforce Data Center

The typical (median) LPC provided 0.92 FTEs, or approximately 37 hours per week for 50 weeks. Although FTEs appear to vary by age and gender, statistical tests did not verify a difference exists.²

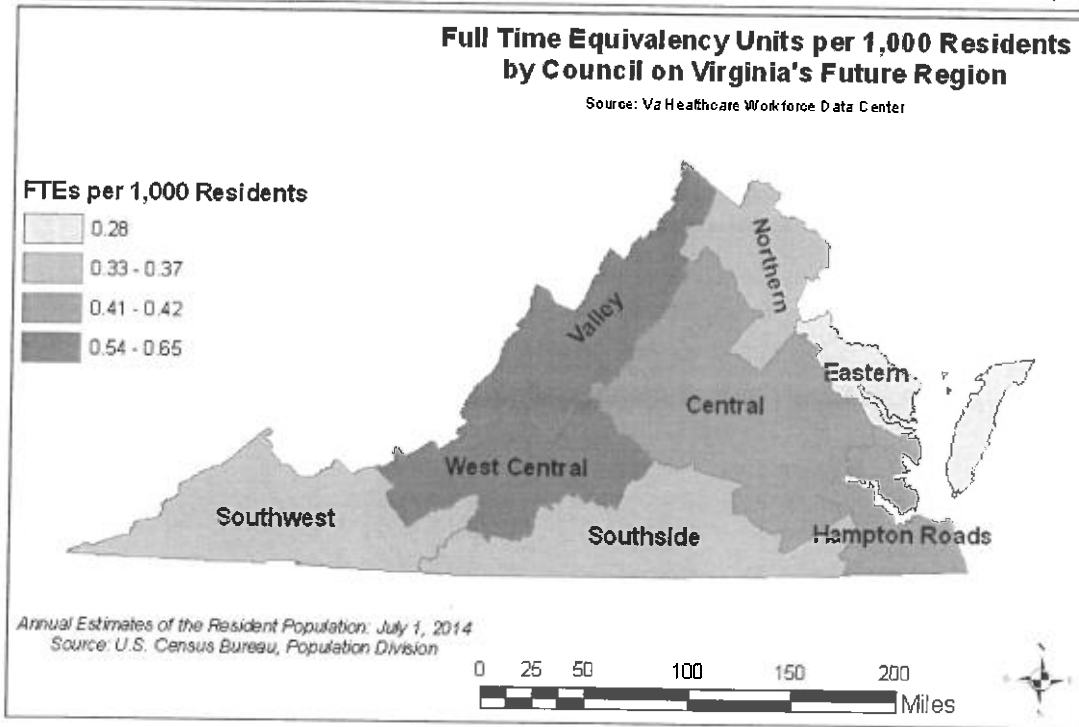
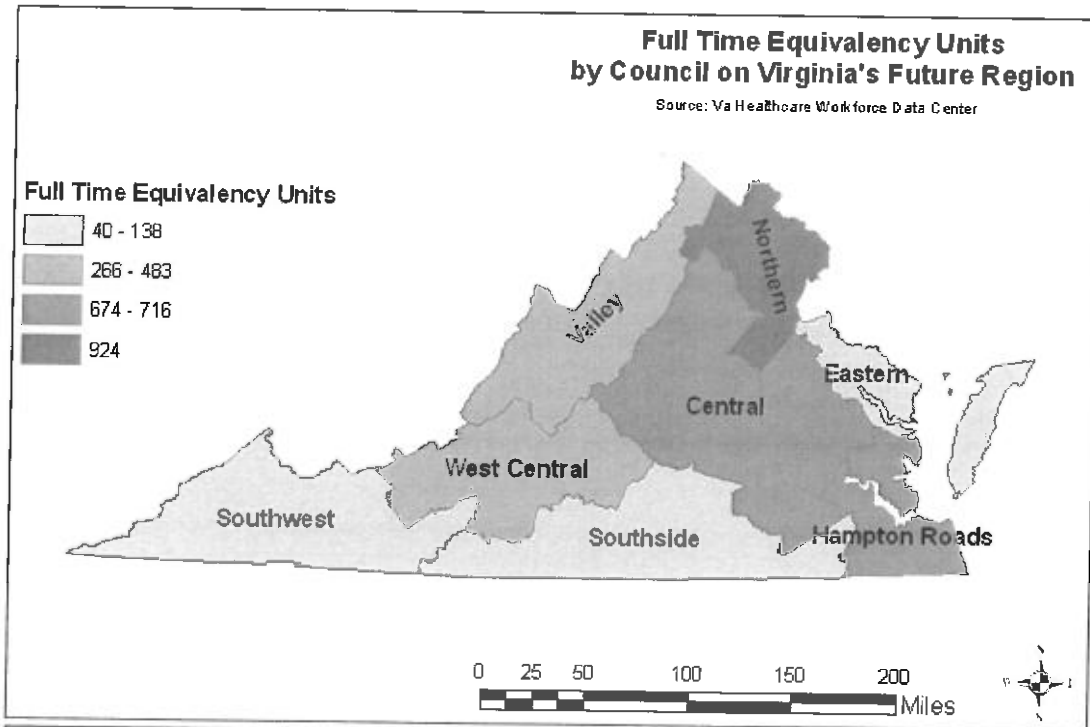
Full-Time Equivalency Units		
Age	Average	Median
Age		
Under 35	0.86	0.93
35 to 39	0.95	1.03
40 to 44	0.95	1.05
45 to 49	0.92	0.93
50 to 54	0.92	0.94
55 to 59	0.98	0.97
60 to 64	0.91	0.89
65 and Over	0.67	0.59
Gender		
Male	0.97	1.05
Female	0.87	0.93

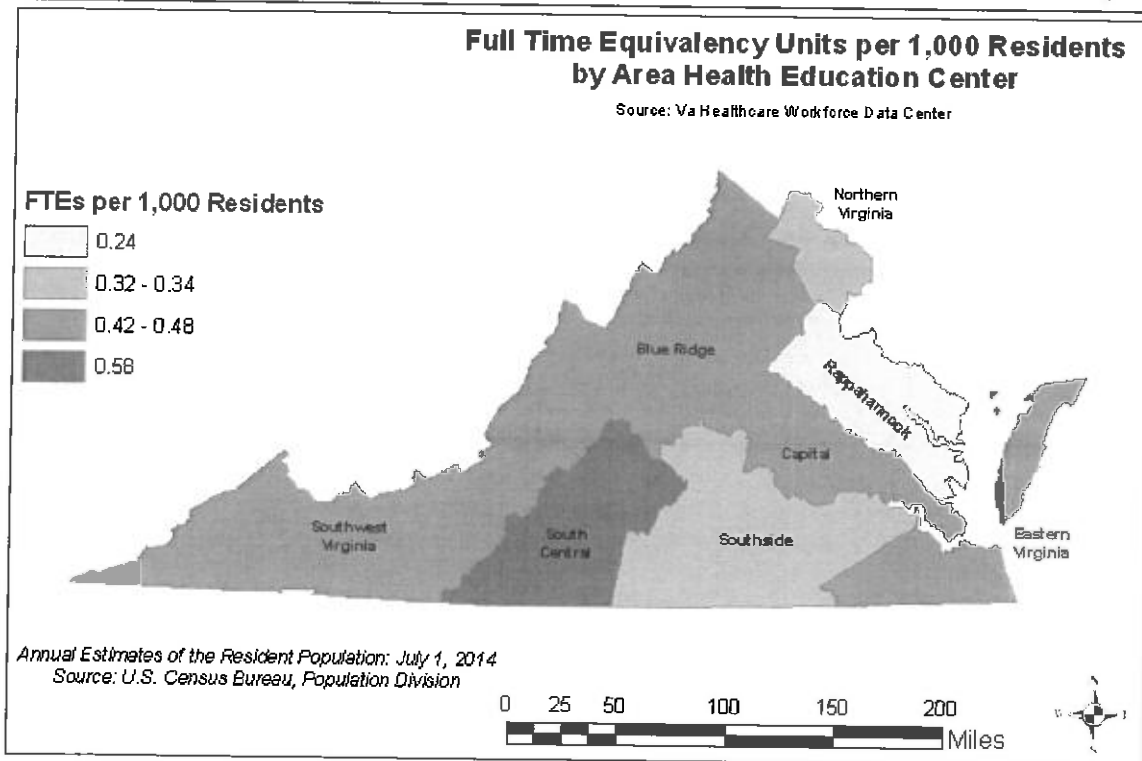
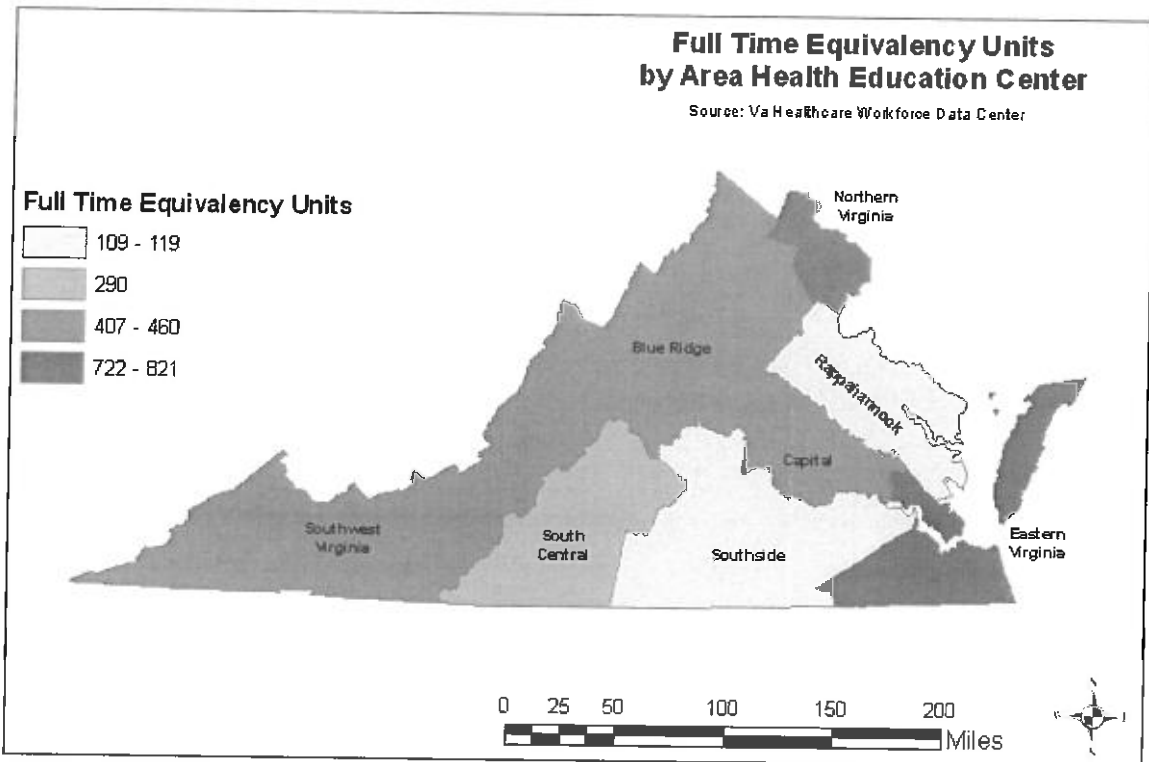
Source: Va. Healthcare Workforce Data Center

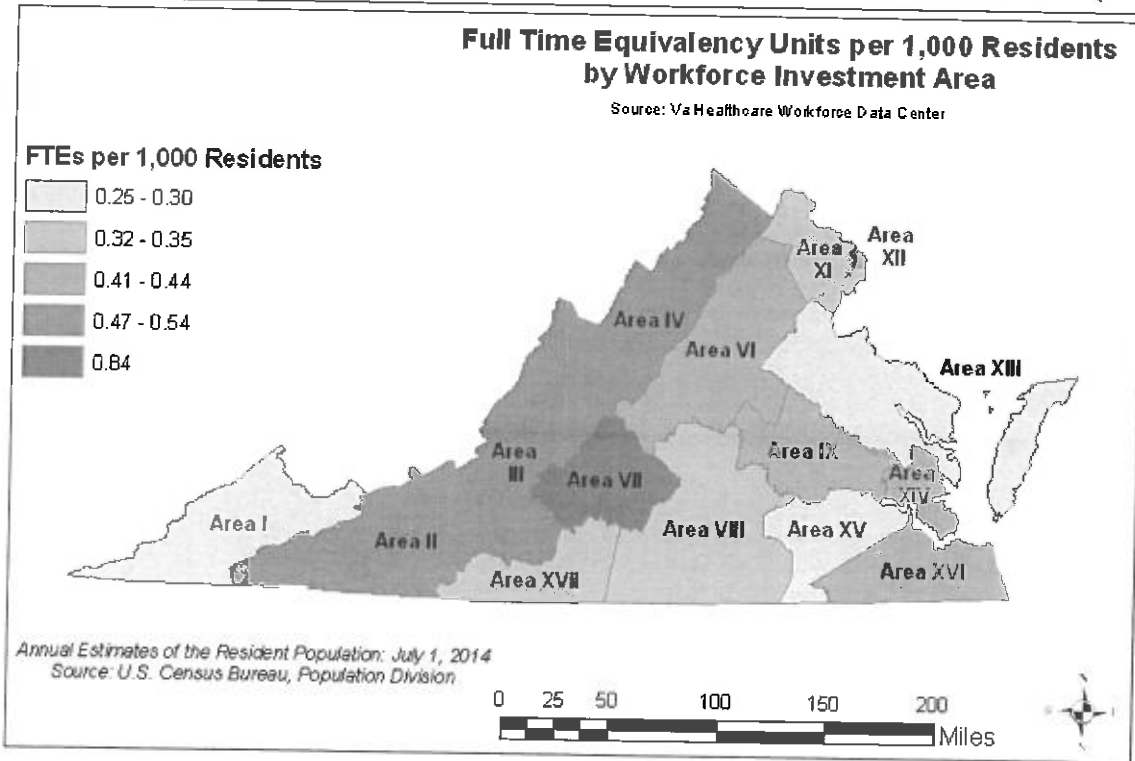
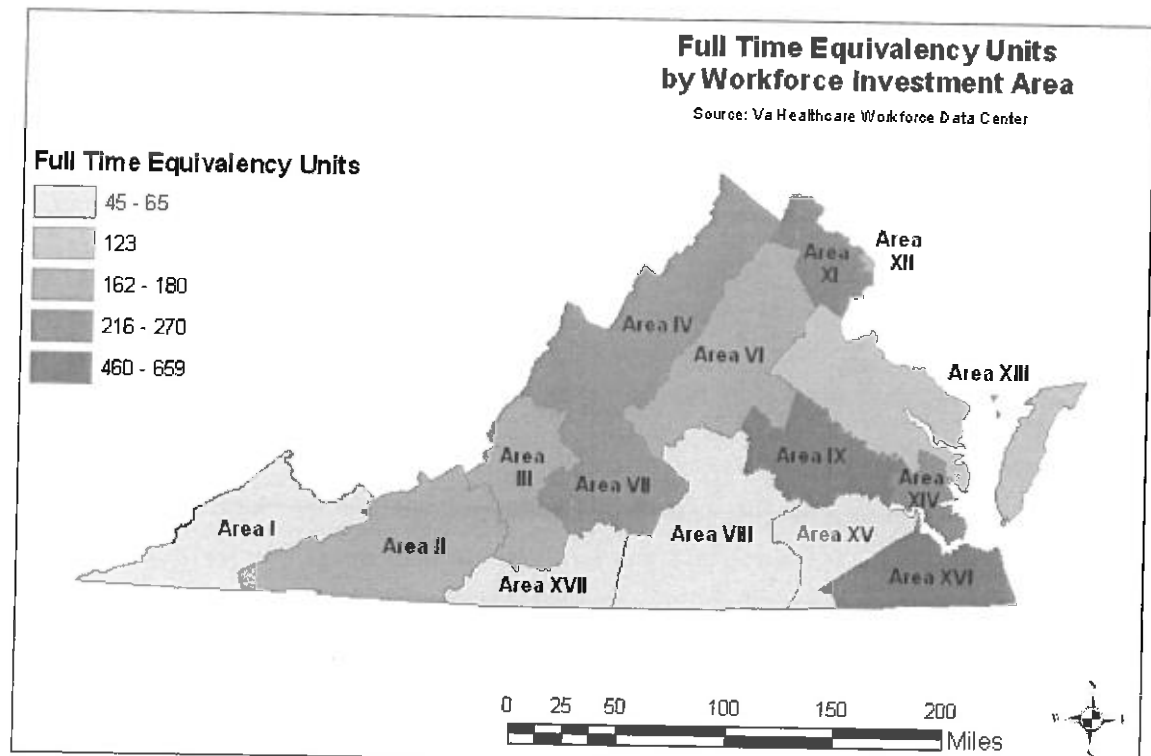


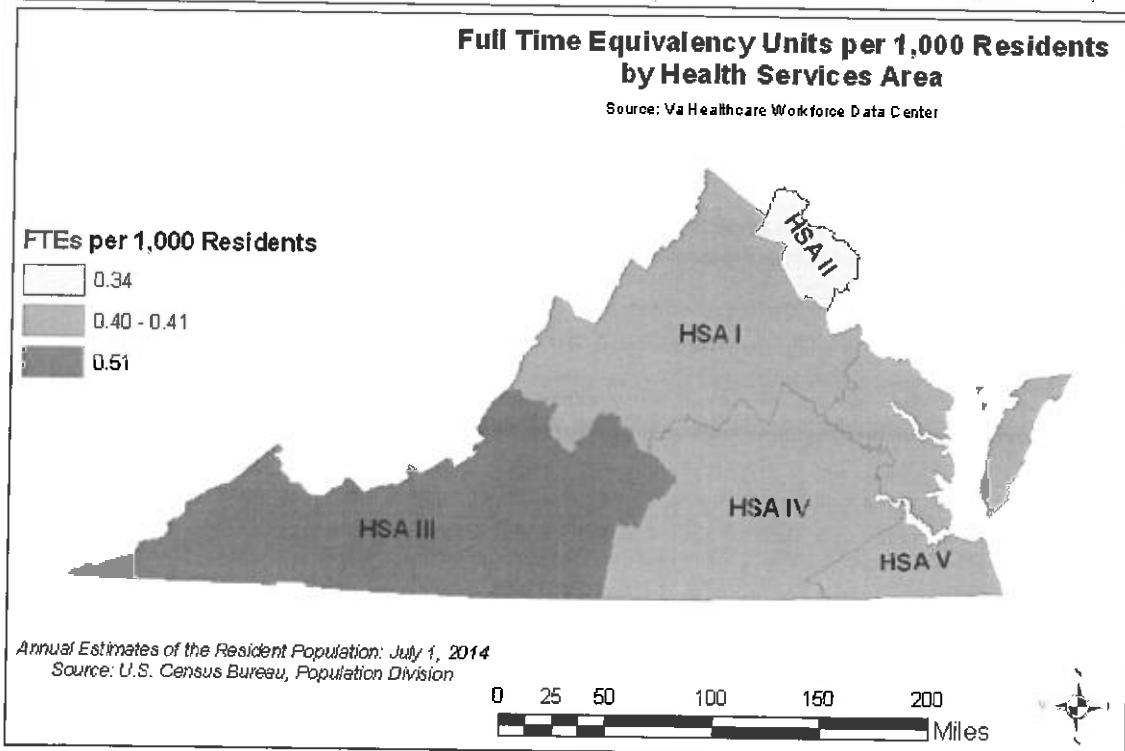
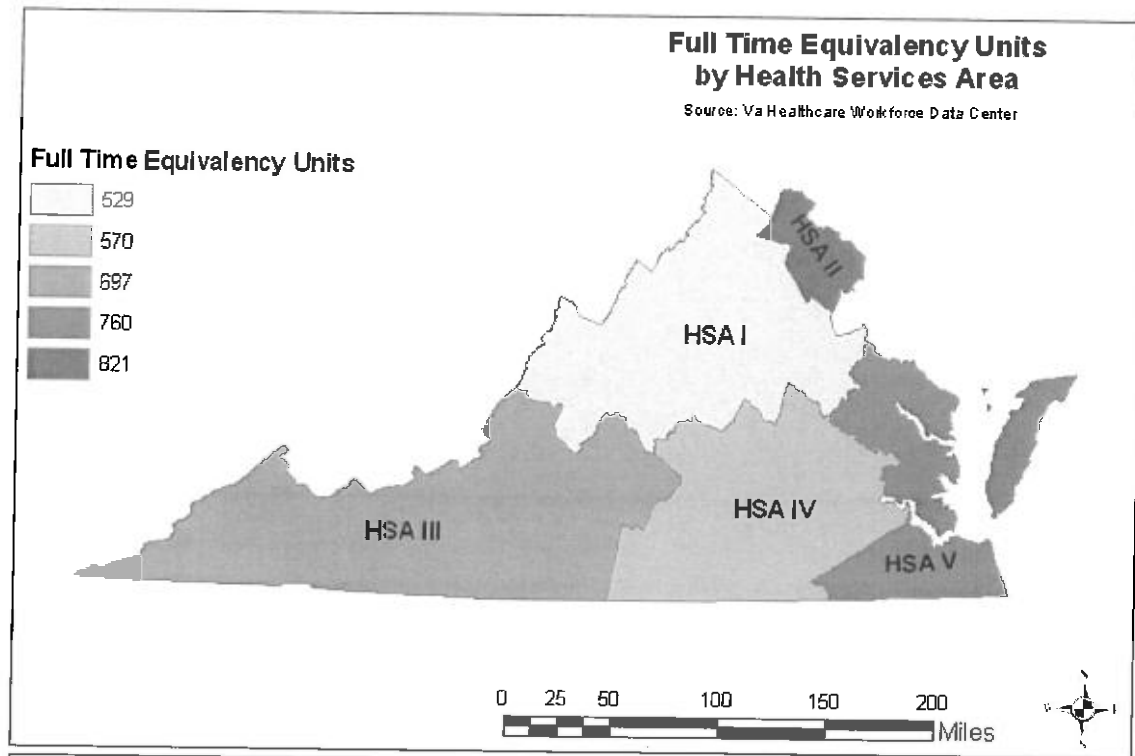
Source: Va. Healthcare Workforce Data Center

² Due to assumption violations in Mixed between-within ANOVA (Levene's Test is significant)









Appendix A: Weights

Rural Status	Location Weight			Total Weight	
	#	Rate	Weight	Min	Max
Metro, 1 million+	2,558	86.43%	1.156943	1.10638	1.34142
Metro, 250,000 to 1 million	496	87.30%	1.145497	1.09543	1.32815
Metro, 250,000 or less	585	88.72%	1.127168	1.0779	1.30689
Urban pop 20,000+, Metro adj	47	85.11%	1.175	1.12365	1.36235
Urban pop 20,000+, nonadj	0	NA	NA	NA	NA
Urban pop, 2,500-19,999, Metro adj	141	91.49%	1.093023	1.04525	1.26731
Urban pop, 2,500-19,999, nonadj	67	94.03%	1.063492	1.01701	1.23307
Rural, Metro adj	57	84.21%	1.1875	1.1356	1.37685
Rural, nonadj	24	75.00%	1.333333	1.27506	1.54593
Virginia border state/DC	313	76.04%	1.315126	1.25765	1.52482
Other US State	287	71.78%	1.393204	1.33231	1.61535

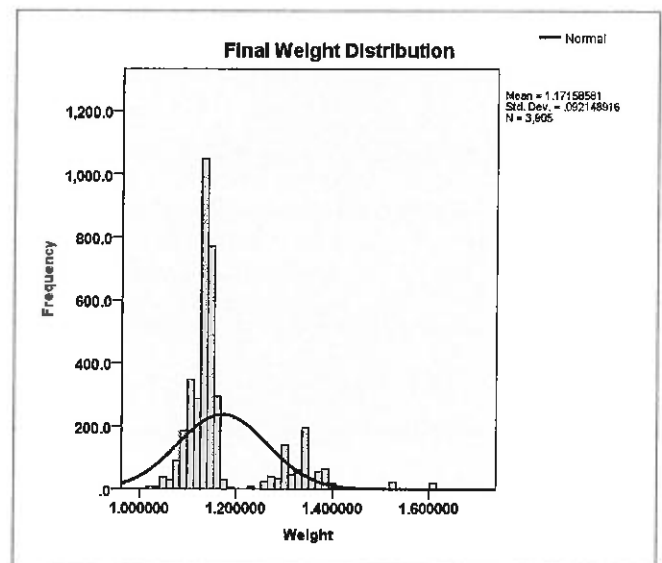
See the Methods section on the HWDC website for details on HWDC Methods:

www.dhp.virginia.gov/hwdc/

Final weights are calculated by multiplying the two weights and the overall response rate:

$$\text{Age Weight} \times \text{Rural Weight} \times \text{Response Rate} = \text{Final Weight.}$$

Overall Response Rate: 0.853552



Age	Age Weight			Total Weight	
	#	Rate	Weight	Min	Max
Under 35	470	73.62%	1.358382	1.23307	1.61535
35 to 39	557	86.00%	1.162839	1.05556	1.38282
40 to 44	531	87.01%	1.149351	1.04332	1.36678
45 to 49	555	85.23%	1.173362	1.06511	1.39533
50 to 54	484	89.26%	1.12037	1.01701	1.33231
55 to 59	525	86.67%	1.153846	1.0474	1.37212
60 to 64	569	87.70%	1.140281	1.03509	1.35599
65 and Over	884	85.86%	1.16469	1.05724	1.38502