

10:00 a.m. Call to Order– Johnston Brendel, Ed.D., LPC, LMFT, Board Chair

- Welcome and Introductions
- Establishment of Quorum
- Mission of the Board

Adoption of Agenda

Public Comment

The Board will receive public comment related to agenda items at this time. The Board will not receive comment on any pending regulation process for which a public comment period has closed or any pending or closed complaint or disciplinary matter.

Approval of Minutes

- January 20, 2023* Board Meeting Minutes.....Page 6
- January 27, 2023 Informal Conference Committee Minutes (Informational Purposes Only).....Page 46
- February 28, 2023 Informal Conference Committee Minutes (Informational Purposes Only).....Page 49
- March 3, 2023 Regulatory Advisory Panel*.....Page 50
- March 31, 2023 Informal Conference Committee Minutes (Informational Purposes Only).....Page 52
- April 10, 2023 Conference Call Minutes (Informational Purposes Only).....Page 56

Agency Director Report (Verbal) – Arne Owens

Chair Report (Verbal) – Dr. Brendel

Legislative and Regulatory Report – Erin L. Barrett, JD, DHP Director of Legislative and Regulatory Affairs

- Regulatory Report.....Page 59
- Adoption of exempt regulatory changes pursuant to Chapter 191 of the 2023 Acts of Assembly*.....Page 60
- Adoption of emergency regulations to implement provisions of Chapters 684 and 802 of the 2023 General Assembly*.....Page 64
- Petition for Rulemaking*.....Page 76

New Business

- Appointment of Commissioner for the Counseling Licensure Compact.....Page 69
- Right Help, Right Now Behavioral Health Transformation and Workforce Issues
 - Update from the Administration

- Comparison of Endorsement Provisions, Universal Licensure, Reciprocity Agreements and Compact Provisions-----Jaime Hoyle, JD, Executive Director, Boards of Counseling, Psychology, and Social Work
- AASCB Update - Gerard Lawson, Ph.D, LPC, LSATP and Charlotte Lenart, Deputy Executive Director-Licensing, Boards of Counseling, Psychology, and Social Work
- BSU Technology Initiatives and Implementation Update - Charlotte Lenart
- Healthcare Workforce Data Center Behavioral Health Dashboard – DHP Healthcare Workforce Data Center

Committee Reports

- Regulatory Committee (Verbal) – Dr. Lawson

Staff Reports

- Executive Director Report – Jaime Hoyle
 - Personnel Update
 - Financials.....Page 78
 - Efficiency Efforts to meet OKRs
 - Outreach/Conferences/Newsletter
 - Renewal Surveys
 - Appointments/Board Membership/Upcoming Elections
- Licensing Report – Charlotte Lenart.....Page 84
- Discipline Report - Jennifer Lang, Deputy Director, Boards of Counseling, Psychology, & Social Work.....Page 88

Consideration of Agency Subordinate Recommendations – Jennifer Lang

Next Meetings:

- Board Meeting: July 21, 2023

Meeting Adjournment

Formal Hearing

*Indicates a Board Vote is required.

**Indicates these items will be discussed within closed session.

This information is in **DRAFT** form and is subject to change. The official agenda and packet will be approved by the public body at the meeting and will be available to the public pursuant to Virginia Code Section 2.2-3708(D).



Virginia Department of
Health Professions
Board of Counseling

MISSION STATEMENT

Our mission is to ensure safe and competent patient care by licensing health professionals, enforcing standards of practice, and providing information to health care practitioners and the public.

PERIMETER CENTER CONFERENCE CENTER
EMERGENCY EVACUATION OF BOARD AND TRAINING ROOMS
(Script to be read at the beginning of each meeting.)

PLEASE LISTEN TO THE FOLLOWING INSTRUCTIONS ABOUT EXITING THESE PREMISES IN THE EVENT OF AN EMERGENCY.

In the event of a fire or other emergency requiring the evacuation of the building, alarms will sound.

When the alarms sound, leave the room immediately. Follow any instructions given by Security staff

Board Room 1

Exit the room using one of the doors at the back of the room. **(Point)** Upon exiting the room, turn **RIGHT**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

Board Room 2

Exit the room using one of the doors at the back of the room. **(Point)** Upon exiting the room, turn **RIGHT**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

You may also exit the room using the side door **(Point)**, turn **Right** out the door and make an immediate **Left**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

Board Rooms 3 and 4

Exit the room using one of the doors at the back of the room. **(Point)** Upon exiting the room, turn **RIGHT**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

Training Room 1

Exit the room using one of the doors at the back of the room. **(Point)** Upon exiting the room, turn **LEFT**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

Training Room 2

Exit the room using one of the doors at the back of the room. **(Point)** Upon exiting the doors, turn **LEFT**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.



**Virginia Board of Counseling
Full Board Meeting Minutes
Friday, January 20, 2023 at 10:00 a.m.
9960 Mayland Drive, Henrico, VA 23233
Board Room 4**

- PRESIDING OFFICER:** Johnston Brendel, Ed.D., LPC, LMFT, Chairperson

- BOARD MEMBERS PRESENT:**
 - Angela Charlton, Ph.D., LPC
 - Benjamin Allison, Esq., MBA, Citizen Member
 - Danielle Hunt, LPC, Vice-Chairperson
 - Gerard Lawson, Ph.D., LPC, LSATP
 - Matthew Scott, LMFT
 - Maria Stransky, LPC, CSAC, CSOTP
 - Natalie Franklin, LPC, LMFT
 - Tiffinee Yancey, Ph.D., LPC
 - Terry R. Tinsley, Ph.D., LPC, LMFT, CSOTP

- BOARD STAFF PRESENT:**
 - Charlotte Lenart, Deputy Executive Director- Licensing
 - Jaime Hoyle, JD, Executive Director
 - Jennifer Lang, Deputy Executive Director

- DHP STAFF PRESENT:** Matthew Novak, Policy Analyst, Department of Health professions

- PUBLIC ATTENDEES:**
 - Lisa Snider, Virginia Association of Community Services Board (VACSB), Mental Health Counsel
 - Alexis Aplasca, Chief Clinical Officer, Department of Behavioral Health & Developmental Services (DBHDS)
 - Rafaella Sale, Resident in Psychology, Center for Evidence-Based Partnerships

- CALL TO ORDER:** Dr. Brendel called the board meeting to order at 10:00 a.m.

- ROLL CALL/ESTABLISHMENT OF A QUORUM:** With ten members present at roll call, a quorum was established.

- MISSION STATEMENT:** Ms. Hoyle read the mission statement of the Department of Health Professions, which was also the mission statement of the Board.

- ADOPTION OF AGENDA:**
 - Dr. Brendel requested that the Behavioral Health Workforce Discussion portion of the agenda be amended to allow for the representatives of VACB and DBHDS to provide their presentation first followed by information and statistics from Board staff and then move on to the Objectives and Key Results (OKRs) and Right Health Right Now discussion.

 - MOTION:** Dr. Lawson moved, which was properly seconded, to amend the agenda as presented. The motion passed unanimously.

- PUBLIC COMMENT:** No public comment provided.

APPROVAL OF MINUTES:

With small edits to the September 16, 2022 minutes, the minutes stand approved as presented.

AGENCY DIRECTOR REPORT:

Ms. Hoyle indicated that Arne Owens, DHP Director and James Jenksins, Jr., DHP Chief Deputy were not in attendance because this meeting conflicted with their weekly meeting with the Governor's Office to discuss goals and initiatives for the administration. Ms. Hoyle stated that so far it has been an easy transition under the new Director. Mr. Owens was the Chief Deputy under the Bob McDonnell Administration, so he is familiar with the Agency.

BOARD CHAIR REPORT:

Dr. Brendel stated that he felt optimistic about what is happening in the field and the recent Mental Health Access Improvement Act that will allow LPCs and LMFTs to be reimbursed by Medicare Part B as of January 1, 2024. Additionally, seventeen states have enacted the Counseling Compact and another eleven states have legislation pending and Virginia is one of those states.

Dr. Brendel stated that staff continues to be productive and hardworking.

Board member Bev Freda Jackson, Citizen member recently took new job which resulted in her needing to resign from the Board.

Dr. Brendel recognized Ms. Hunt and Ms. Stansky for their significant contributions to the Board with their role on the Special Conference Committee and acting as Agency Subordinates for the Board.

Dr. Lawson, Ms. Hunt and Ms. Lenart will attend the American Association of State Counseling Boards (AASCB) in February. Dr. Lawson will be running for the AASCB Office of Treasure.

Dr. Brendel and Dr. Lawson have been working with staff to put together a Regulatory Advisory Panel (RAP) meeting in March.

NEW BUSINESS**Behavioral Health Workforce Discussion****Behavioral Health Programs and Workforces – Alexis Aplasca, Chief Clinical Officer, Deputy Commissioner for Clinical and Quality Management at DBHDS**

Dr. Aplasca provided a presentation and answered Board questions on the behavioral health workforce in Virginia. (*Attachment A*)

The Needs of the Community Services Board – Lisa Snider, VACB, Mental Health Counsel

Ms. Snider provided a presentation and answered Board questions related to the workforce needs in Virginia. (*Attachment B*)

Ms. Lenart gave the Board statistical information related to the Qualified Mental Health Professionals (QMHP) applications received, approved and denied. (*Attachment C*)

Dr. Brendel discussed the issues with reviewing individual human service coursework for QMHPs. He stated that the review of the coursework is a subjective process. Ms. Hunt stated that even the Special Conference Committee members

don't always agree which courses meeting the criteria but the appeal process allows the applicant the ability to give more information on how the course content prepared them to provide QMHP type services to clients. The critical issue is substantiating *Qualified*.

Ms. Lang provided details on the complaints received and disciplinary actions (violations) taken against QMHPs. She indicated that most of the violations were in the areas of fraud (billing and recordkeeping) and inappropriate relationships. (*Attachment D*)

Dr. Brendel indicated that the presentation and information from staff was to provide context to Board members before the Board considers actions on the petition for rule making filed by the Virginia Association of Community Services Board (VACB).

The Board took a break at 11:50 p.m. The meeting reconvened at 12.10 p.m.

Discussion on the Department of Health Professions, Technology Business Solution, Initiatives, Processes and Capabilities – Charlotte Lenart, Deputy Executive Director

Ms. Lenart indicated that the Board of Counseling recently initiated the use of BOTs to send standardized emails. A BOT is a software program that performs repetitive tasks. The BOT emails send an initial email once an application is received, after new documentation is received or after 30 days, and after the applicant has been approved by the Board. Ms. Lenart indicated that this new process has helped enhance the communication with applicants and reduces the time it takes staff to process an application.

Ms. Lenart also talked about new technology coming soon that will allow applicants to upload their documentation during the online application process.

Ms. Hoyle stated that at Dr. Brendel's request she shared the Florida website with Rob Jenkins, Director of Technology & Business Solutions, Initiatives, Processes and Capabilities. She stated that we have a lot more flexibility that we did in the past. Mr. Jenkins will hopefully be able to attend the next meeting to give more updates on DHP's IT initiatives.

Objectives and Key Results (OKRS) – Jaime Hoyle, Executive Director

The Administration is targeting for the Agency to reduce time to license by 10% to 25%. Ms. Hoyle indicated that this reduction requirement has prompted staff to re-evaluate our processes.

Right Help Right Now – Jaime Hoyle, Executive Director and James Jenkins, Chief Deputy Director

Ms. Hoyle indicated that DHP is involved in the Governor's three-year plan to transform Virginia's Behavioral system. Ms. Hoyle and Mr. Jenkins serve as co-leads on the Pillar 5 - Behavioral Workforce Committee.

LEGISLATION & REGULATORY Ms. Hoyle indicated that there was not much to share other than the counseling compact legislation which appears to be moving forward. Ms. Hoyle also indicated that the DHP submitted a bill to the General Assembly to authorize the DHP to use Agency Subordinates to review credential cases. Currently, Agency Subordinates

are only able to review discipline cases.

EXECUTIVE DIRECTOR'S REPORT:

Ms. Hoyle reported on the budget for the board. A copy of the financial report was included in the agenda packet.

DISCIPLINE REPORT:

Ms. Lang reported on the disciplinary statistics for the Board of Counseling from September 1, 2022 through December 31, 2022. A copy of the report was included in the agenda packet. She noted that Dr. McAdams, discipline reviewer, reviewed 229 cases last year. Ms. Lang reported that staff completed the CE audit for the previous renewal period which included 173 individuals licensed, certified, or registered with the Board. Cases of noncompliance with renewal requirements will be processed in accordance with the board's Guidance Document 115-1.1

LICENSING REPORT:

Ms. Lenart discussed the licensure statistics, and satisfaction survey report as presented in the agenda packet. Ms. Lenart thanked her staff for their dedication and service to the Board.

CONSIDERATION OF RECOMMENDED DECISIONS FROM THE AGENCY SUBORDINATE

(Attachment E)

NEXT MEETING DATES:

Dr. Brendel announced that the next Board meeting would occur on May 5, 2023.

ADJOURNMENT:

Dr. Brendel adjourned the January 20, 2023 Board meeting at 1:36 p.m.

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

Jaime Hoyle, JD, Executive Director

Attachment A

The Behavioral Health Workforce in Virginia

January 20, 2023

Alexis Ablasca, MD

Chief Clinical Officer

Deputy Commissioner for Clinical and Quality Management



Virginia Department of
Behavioral Health &
Developmental Services



Agenda

- Governor Youngkin's Right Help, Right Now Plan
- Behavioral Health Workforce needs in Virginia
- High Priority Behavioral Health Services – Crisis System Transformation
- Services provided by Qualified Mental Health Professionals
 - Regulatory requirements- Medicaid, DBHDS
- Opportunities to improve quality, competency, consistency



**RIGHT HELP.
RIGHT NOW.**

Transforming Behavioral Health Care for Virginians

2025 Vision for Behavioral Health in the Commonwealth



All Virginians will...

... be able to access behavioral health care when they need it,

... have prevention and management services personalized to their needs, particularly for children and youth,

... know who to call, who will help, and where to go when in crisis, and

... have paths to reentry and stabilization when transitioning from crisis

Behavioral Health Services for Virginia



Implement fully-integrated behavioral health services that provide a full continuum of care to all Virginians. This comprehensive system will focus on access to services that are:



High Quality

Quality care from quality providers in community settings such as home, schools and primary care



Evidence-Based

Proven practices that are preventive and offered in the least restrictive environment



Trauma-Informed

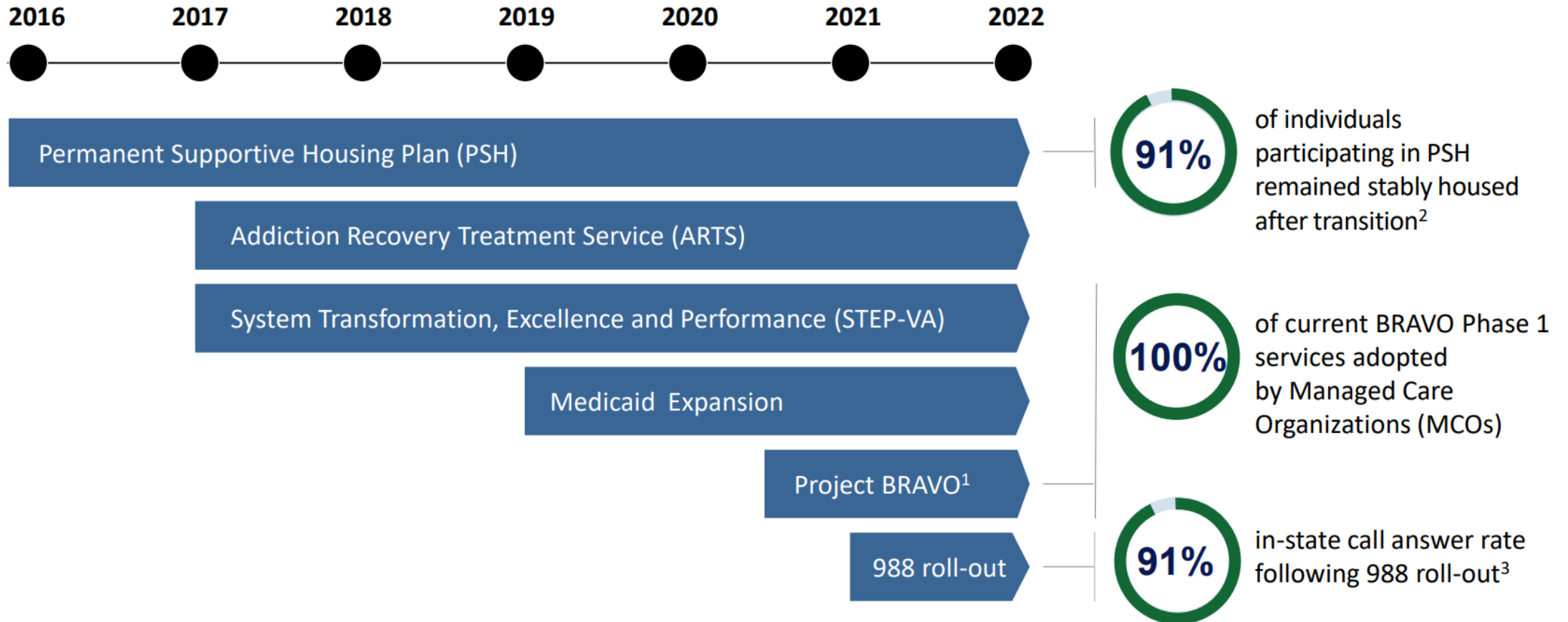
Better outcomes from best-practice services that acknowledge and address the impact of trauma for individuals



Cost-Effective

Encourages use of services and delivery mechanism that have been shown to reduce cost of care for system

The Plan builds on the Commonwealth's progress across several initiatives



1. Consists of the implementation of fully integrated behavioral health services that provide a full continuum of care to Medicaid members; DMAS Virginia.gov
2. Referring to the population served by PSH: Permanent Supportive Housing: Outcomes and Impact – November 2022 (virginia.gov)
3. DBHDS data, received November 28, 2022

Across the Commonwealth, ¹⁶ access to Behavioral Health care remains a challenge



None of county is shortage area Part of county is shortage area Full county is shortage area

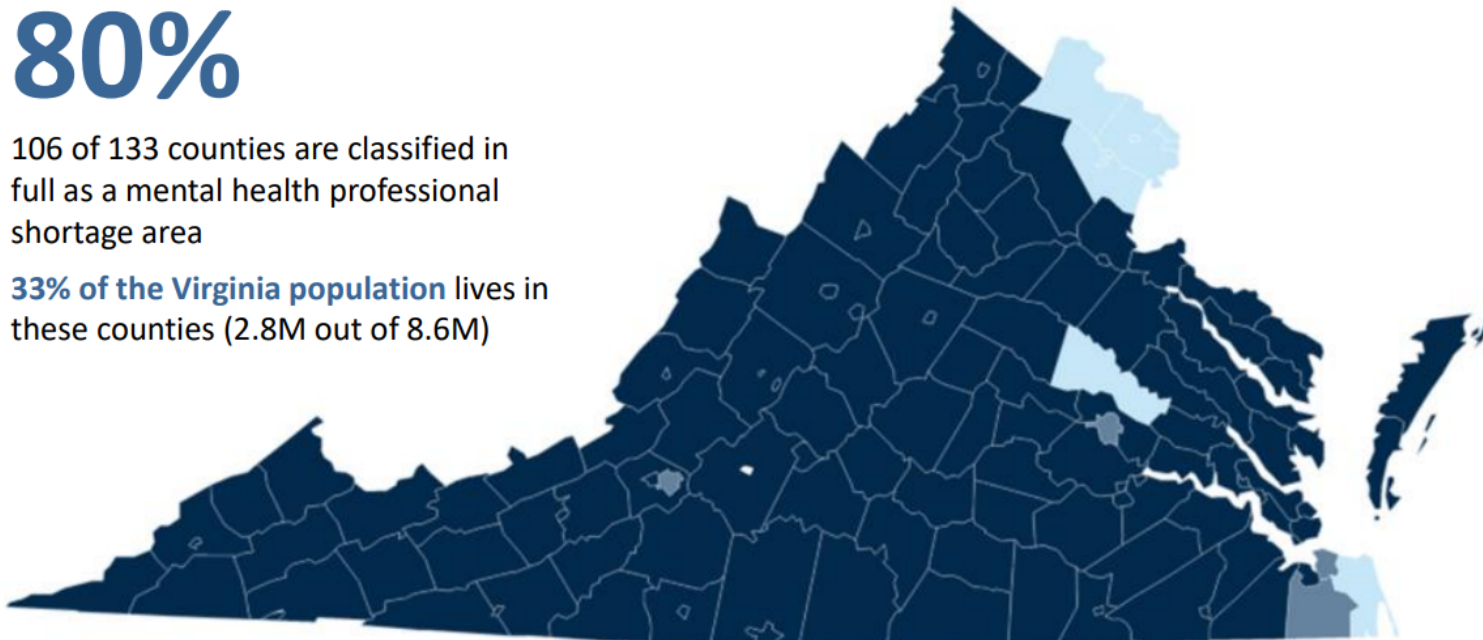
Virginia Health Professional Shortage Areas by County, Mental Health, HRSA¹



80%

106 of 133 counties are classified in full as a mental health professional shortage area

33% of the Virginia population lives in these counties (2.8M out of 8.6M)



Mental Health America rankings²



34th

Access to Care

39th

Mental Health Workforce Availability

1. Health Resources and Services Administration Mental Health Care Health Professional Shortage Areas, by State, as of September 30, 2022, data.HRSA.gov
2. State of Mental Health America, Access to Care Ranking 2023

The Commonwealth's Behavioral Health Plan is founded on six pillars



An aligned approach to BH that provides access to **timely, effective, and community-based care** to reduce the burden of mental health needs, developmental disabilities, and substance use disorders on Virginians and their families

1: We must strive to ensure **same-day care for individuals experiencing behavioral health crises**

2: We must **relieve the law enforcement communities' burden** while providing care and **reduce the criminalization of behavioral health**

3: We must **develop more capacity** throughout the system, going beyond hospitals, especially to enhance community-based services

4: We must **provide targeted support for substance use disorder (SUD)** and efforts to prevent overdose

5: We must **make the behavioral health workforce a priority**, particularly in underserved communities

6: We must **identify service innovations and best practices** in pre-crisis prevention services, crisis care, post-crisis recovery and support and develop tangible and achievable means to close capacity gaps

High Priority Behavioral Health Services



- Crisis Services
- Underserved/Under Resourced Communities
- Public Mental Health System

Vision for the Crisis System Transformation

Objective: The development of a community-based, trauma-informed, recovery-oriented crisis system that responds to crises **where they occur** and **prevent out-of-home placements**



HIGH-TECH CRISIS CALL CENTERS

These programs use technology for real-time coordination across a system of care and leverage big data for performance improvement and accountability across systems. At the same time, they provide high-touch support to individuals and families in crisis.



24/7 MOBILE CRISIS

Mobile crisis offers outreach and support where people in crisis are. Programs should include contractually required response times and medical backup.



CRISIS STABILIZATION PROGRAMS

These programs offer short-term “sub-acute” care for individuals who need support and observation, but not ED holds or medical inpatient stay, at lower costs and without the overhead of hospital-based acute care.

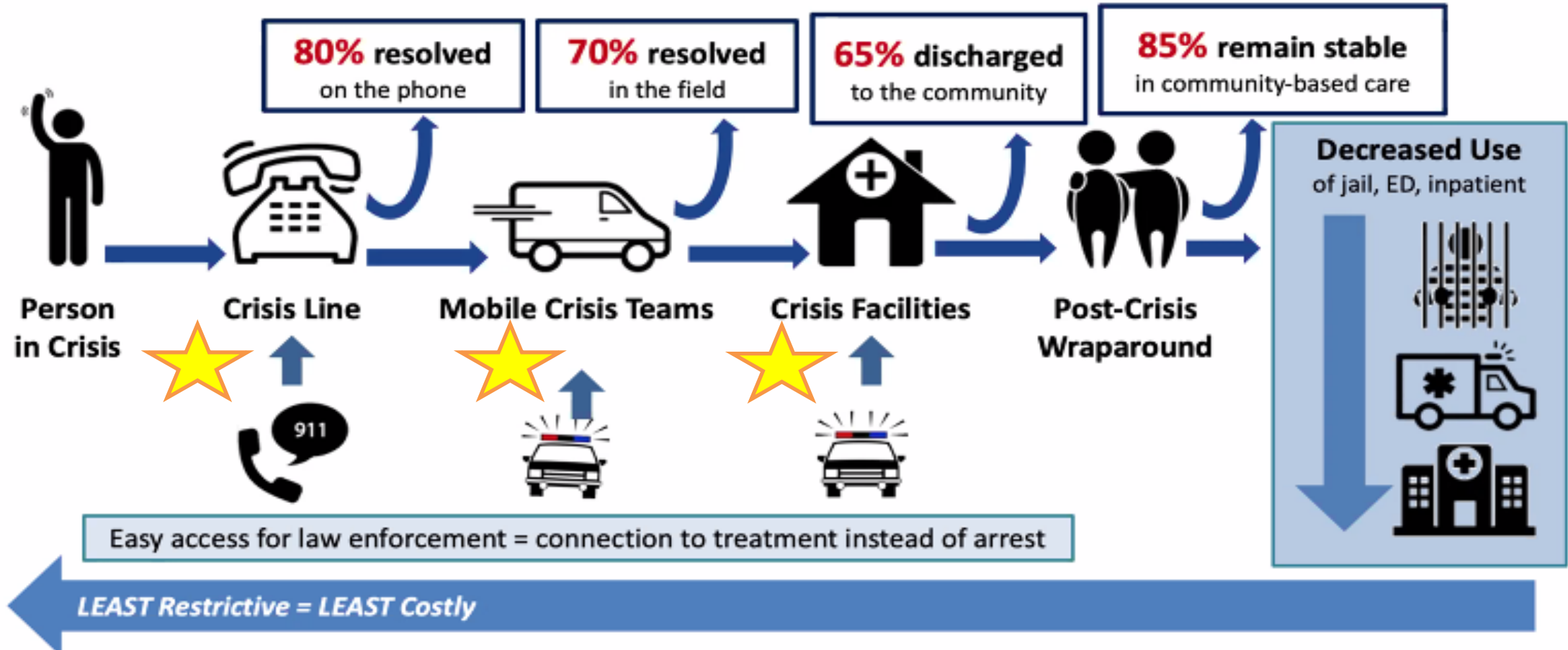


ESSENTIAL PRINCIPLES & PRACTICES

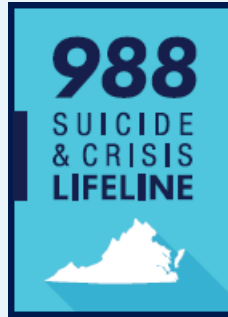
These must include a recovery orientation, trauma-informed care, significant use of peer staff, a commitment to Zero Suicide/Suicide Safer Care, strong commitments to safety for consumers and staff, and collaboration with law enforcement.

Three Required Protocols

Crisis System: Alignment of services toward a common goal



Virginia's 988 Buildout



Calls to the Lifeline are routed to their closest center based on area code, with the goal of connecting callers to counselors in their own state.

- Current average of 5,500 calls each month
- Call Centers are currently at 90% of staffing
- FY22-23 will be the first full year of funding to Centers

- National Suicide Hotline Designation Act of 2020
 - July 16, 2022
- SAMSHA 988 Capacity Building Grant: \$2.6 Million
- SAMSHA 988 Capacity Building Supplemental Grant: \$1 Million
- SB 1302 Crisis Call Center Fund
 - <https://talk.crisisnow.com/virginia-is-first-state-to-pass-988-service-fee-legislation/>

DBHDS has been partnering with in-state National Suicide Prevention Line call centers in Virginia since 2020. In that time, the in-state answer rate has risen 33% despite a call volume increase of 24%

Mobile Crisis Response

- Rapid response, assessment and early intervention to individuals experiencing crisis
- Provided 24/7
- Purpose:
 - Prevention of acute exacerbation of symptoms,
 - prevention of harm to the individual or others,
 - provision of quality intervention in the least restrictive setting,
 - development of immediate plan of safety to help avoid higher level of care



Aleksei Morozov/iStock

Crisis Receiving Center

CITAC

Diverts people in crisis away from inappropriate arrests resulting from symptoms associated with a mental health crisis.

CSU

Crisis Stabilization Units are short-term residential community-based treatment centers intended to offer a less restrictive option

Support Services

Assessment
Psychiatric Evaluation
Nursing Assessment
Care Coordination

23 Hour Observation

This intermediate level of care that drastically reduces the need for those in crisis to be admitted to an inpatient facility because the intensive *active* treatment



QMHPs in Community Based Behavioral Health Services

- QMHPs work within a team-based approach to providing behavioral health care in the Medicaid Community Mental Health Services
 - Partial Hospitalization/Intensive Outpatient Programs
 - Multisystemic Therapy/Functional Family Therapy
 - Assertive Community Treatment
 - Mental Health Skill Building
 - Psychosocial Rehabilitation
 - Therapeutic Day Treatment
 - Intensive In-Home Treatment
 - Crisis Services: Mobile Crisis Response, Community Stabilization, Crisis Stabilization Units

QMHPs in Community Based Behavioral Health Services

- DMAS regulations ([12VAC30-50-226](#)) are specific with respect to team composition and qualifications of staff required to deliver services
 - Regulations do not allow for QMHPs to bill independently for services
 - Example: Mobile Crisis Response

Staff/Team Composition #	Modifier	Modifier Meaning
1	HN	1 QMHP-A or QMHP-C or 1 CSAC ^x
2	HO	1 Licensed ^x
3	HT, HM	1 Licensed ^x and 1 Peer or 1 Licensed ^x and 1 CSAC-A
4	HT	1 Licensed ^x and 1 QMHP-E or QMHP-C or QMHP-A or 1 Licensed ^x and 1 CSAC ^x

^x Includes those in their regulatory board approved residency/supervisee status.

CSB Code Mandated Services § 37.2-500.

B. The core of services provided by community services boards within the cities and counties that they serve shall include:

1. Emergency services;
2. Same-day mental health screening services;
3. Outpatient primary care screening and monitoring services for physical health indicators and health risks and follow-up services for individuals identified as being in need of assistance with overcoming barriers to accessing primary health services, including developing linkages to primary health care providers; and
4. Subject to the availability of funds appropriated for them, case management services.

C. Subject to the availability of funds appropriated for them, the core of services **may include** a comprehensive system of inpatient, outpatient, day support, residential, prevention, early intervention, and other appropriate mental health, developmental, and substance abuse services necessary to provide individualized services and supports to persons with mental illness, developmental disabilities, or substance abuse. Community services boards may establish crisis stabilization units that provide residential crisis stabilization services.

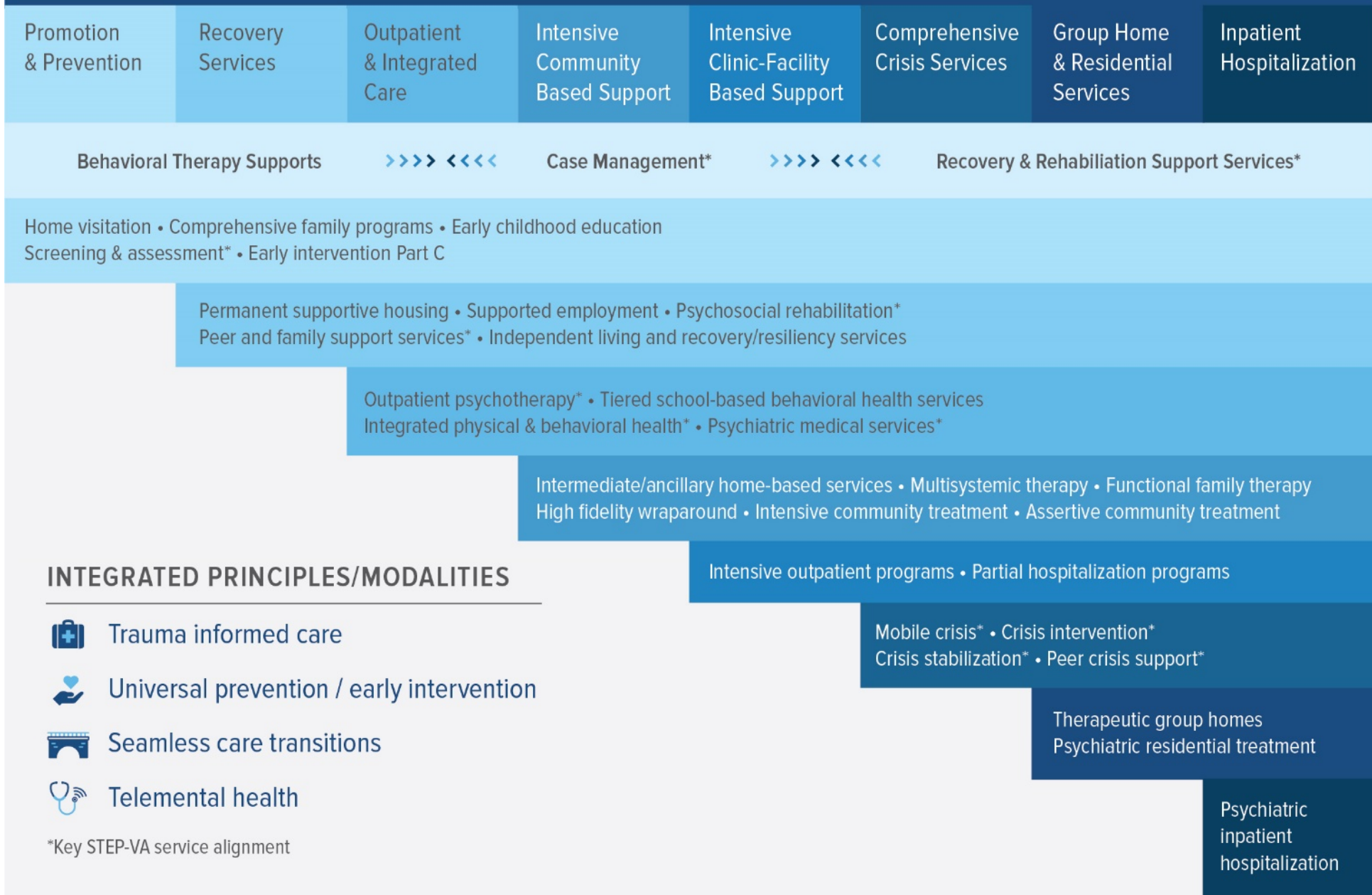
D. In order to provide comprehensive mental health, developmental, and substance abuse services within a continuum of care, the **community services board shall function as the single point of entry into publicly funded mental health, developmental, and substance abuse services.**

CSB Certified Prescreening Clinician





- Definitions under § 37.2-809. "Designee of the local community services board" means an examiner designated by the local community services board who (i) is skilled in the assessment and treatment of mental illness, (ii) has **completed a certification program approved by the Department**, (iii) is able to provide an independent examination of the person, (iv) is not related by blood or marriage to the person being evaluated, (v) has no financial interest in the admission or treatment of the person being evaluated, (vi) has no investment interest in the facility detaining or admitting the person under this article, and (vii) except for employees of state hospitals and of the U.S. Department of Veterans Affairs, is not employed by the facility.



Continuum of Behavioral Health Services Across the Life Span ²⁸

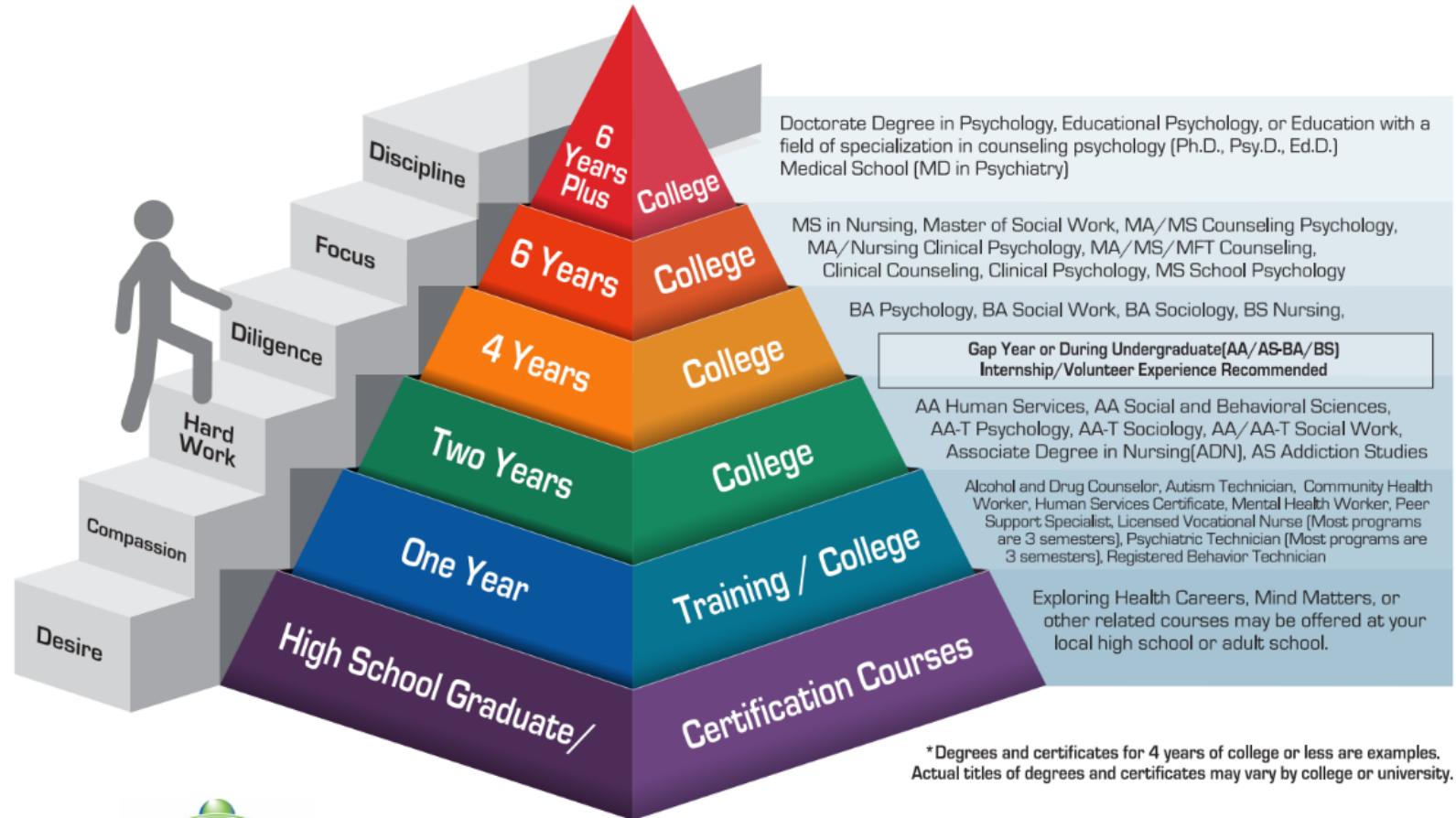


INTEGRATED PRINCIPLES/MODALITIES

-  Trauma informed care
-  Universal prevention / early intervention
-  Seamless care transitions
-  Telemental health

*Key STEP-VA service alignment

Behavioral-Mental Health Related Certificates and Educational Degrees



Vision for the Behavioral Health Workforce

- Every person that wants to serve individuals with mental health needs can be trained, supported, and develop a life-long and rewarding career in behavioral health.
- The behavioral health workforce is robust, diverse, and opportunities are available in every community.
- The services provided are high quality, outcome driven, and reimbursement rates are reflective of the service provided.
- Virginia is the best place to be a mental health professional.

Attachment B



Virginia Association Of
Community Services Boards, Inc.

Making a Difference Together

VACSB's Mental Health Council Presentation to the Virginia Board of Counseling

January 20, 2023



VACSB—Who are We?

- 40 Community Service Boards (CSBs) who provide services across Virginia
- Services provided for individuals with serious mental illness, substance use disorders and/or developmental delays

***CSBs Serve Virginia's Most Vulnerable Populations
as public safety net provider.***



Workforce Crisis

- **27.4% vacancy rate for direct care positions in CSBs in FY 22, this is up from 24% vacancy rate in FY 21**
- **3-6 months to fill QMHP level positions at CSBs**
- **Less than 50% of applicants meet requirements for QMHP/QMHP-Trainee Positions**



Virginia Association Of
Community Services Boards, Inc.

Making a Difference Together

“We had to decide whether to reduce a LMHPs workload to supervise QMHP-Trainees or reduce service capacity as we could not fill the QMHP position.”

-VACSB MH Council Member

Workforce Crisis



- **Difficulty Providing Code Mandated Services**
- **CSBs having to suspend or reduce services**
- **Waitlists for Services**
- **Longer Times to Initiate Services**



Virginia Association Of
Community Services Boards, Inc.

Making a Difference Together

“Community-based Services help to prevent the usage of other service areas that are also strained right now, like hospital emergency departments, law enforcement, state psychiatric hospitals and jails. ”

-VACSB MH Council Member



QMHP Requirements

- Defined in § 54.1-3500 of the Code of Virginia
- Requires specific human service degree; Human service credits-QMHP-A
- QMHP-Trainee must:
 - Be supervised by Licensed Mental Health Professional (or LMHP-E)
- QMHP-Trainee Supervisor *NOT Required to:*
 - Be a QMHP
 - Have supervisory experience
 - Complete any training



Where QMHPs Work

- QMHPs recognized for work in programs licensed by DBHDS
- The Services require Comprehensive Assessment by a LMHP
- QMHPs provide services as part of treatment teams



Where QMHPs Work

Examples of services with Qualified Mental Health Professional-Adult

- Psychosocial Rehabilitation
- Assertive Community Treatment
- Mental Health Skill Building
- Partial Hospitalization
- Comprehensive Crisis and Transition Service

Where QMHPs Work



Examples of services with Qualified Mental Health Professional-Child

- Intensive In-Home Services
- Therapeutic Day Treatment
- Comprehensive Crisis and Transition Service
- Multisystemic Therapy
- Functional Family Therapy



What QMHPs Do

- QMHPs deliver services as outlined in a service plan
 - Service Plan is reflective of what the LMHP assessment recommends
- The role of a QMHP is to provide:
 - A model of appropriate behavior;
 - Skills training in communication, anger management, peer relations, daily living, problem solving, and impulse control;
 - Service collaboration and coordination;
 - Psychoeducation; and,
 - Medication education.

QMHP 2022 Information

Status	QMHP-Trainee	QMHP-A	QMHP-C
Applications Received	2,385	1,109	770
Applications Approved	2,008	648	385
Incomplete Applications	287	447	366
Applications Initially Denied	90	14	19

Attachment D

COMPLAINTS RECEIVED

	2020	2021	2022
Certified Substance Abuse Counseling Assistant	3	0	6
Certified Substance Abuse Counselor	31	42	36
Licensed Marriage and Family Therapist	32	27	24
Licensed Professional Counselor	173	225	203
Licensed Substance Abuse Treatment Practitioner	15	10	18
Qualified Mental Health Professional-Adult	86	118	97
Qualified Mental Health Professional-Child	62	72	51
Qualified Mental Health Practitioner-Trainee	31	54	66
Registered Peer Recovery Specialist	4	9	6
Resident in Counseling	52	61	86
Resident in Marriage and Family Therapy	11	2	9
Resident in Substance Abuse Treatment	0	1	5
Substance Abuse Trainee	8	13	27
TOTAL	508	634	634

2019 DISCIPLINARY ACTION (VIOLATIONS)

CASE CATEGORY	TOTAL VIOLATIONS	QMHP-A	QMHP-C	QMHP-TRAINEE	OTHER
Abuse/Abandonment/Neglect	5	1	1	0	3
CE Noncompliance	3	0	0	0	3
Criminal Conviction	3	1	1	0	1
Diagnosis/Treatment	2	1	0	0	1
Fraud, Patient Care	2	1	1	0	0
Inability to Safely Practice	5	1	1	0	3
Inappropriate Relationship	6	1	1	0	4
	26	6	5	0	15

2021 DISCIPLINARY ACTION (VIOLATIONS)

CASE CATEGORY	TOTAL VIOLATIONS	QMHP-A	QMHP-C	QMHP-TRAINEE	OTHER
Abuse/Abandonment/Neglect	3	1	0	0	2
CE Noncompliance	1	0	0	0	1
Criminal Conviction	4	2	2	0	0
Diagnosis/Treatment	1	0	0	0	1
Fraud, Patient Care	8	2	4	2	0
Inability to Safely Practice	2	0	0	0	2
Inappropriate Relationship	3	1	1	0	1
Noncompliance with Board Order	1	1	0	0	0
	23	7	7	2	7

2022 DISCIPLINARY ACTION (VIOLATIONS)

CASE CATEGORY	TOTAL VIOLATIONS	QMHP-A	QMHP-C	QMHP-TRAINEE	OTHER
Abuse/Abandonment/Neglect	1	0	0	0	1
Business Practice Issues	2	0	0	0	2
CE Noncompliance	4	1	0	0	3
Criminal Conviction	4	0	0	0	4
Diagnosis/Treatment	1	0	0	0	1
Fraud, Patient Care	9	4	4	1	0
Inability to Safely Practice	1	0	0	0	1
Inappropriate Relationship	18	5	1	2	10
	40	10	5	3	22

Attachment E

CONSIDERATION OF AGENCY SUBORDINATE RECOMMENDATIONS:***BOARD MEMBERS PRESENT:***

Johnston Brendel, Ed.D. LPC, LMFT, Chairperson
Danielle Hunt, LPC, Vice-Chairperson
Benjamin Allison, Citizen Member
Angela Charlton, Ph.D., LPC
Natalie Franklin, LPC, LMFT
Bev-Freda Jackson, Ph.D., Citizen Member
Gerard Lawson, Ph.D., LPC, LSATP
Matthew Scott, LMFT
Terry Tinsley, Ph.D., LPC, LMFT, CSOTP
Tiffinee Yancey, Ph.D., LPC

CLOSED MEETING:

Mr. Allison moved that the Board of Counseling convene in closed session pursuant to §2.2-3711(A)(27) of the *Code of Virginia* to consider agency subordinate recommendations. He further moved that Jaime Hoyle, Jennifer Lang, and Charlotte Lenart attend the closed meeting because their presence was deemed necessary and would aid the Board in its considerations. The motion was seconded and passed unanimously.

RECONVENE:

Mr. Allison certified that pursuant to §2.2-3712 of the *Code of Virginia*, the Board of Counseling heard, discussed or considered only those public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as identified in the original motion.

RECOMMENDATIONS:**Catherine Wright, LPC**

License No.: 0701006749

Case Nos.: 196935 and 201612

Catherine Wright was not present at the board meeting. The board considered the agency subordinate's recommendation to indefinitely suspend Ms. Wright's license to practice as a professional counselor in the Commonwealth of Virginia.

Laurel Martin, LPC, LMFT

License Nos.: 0701001722 and 0717000049

Case No.: 201265

Laurel Martin was not present at the board meeting. The board considered the agency subordinate's recommendation to place no sanction on Ms. Martin's licenses to practice as a professional counselor and a marriage and family therapist in the Commonwealth of Virginia.

DECISION:

Dr. Lawson moved that the Board of Counseling accept the recommended decisions of the agency subordinate as presented. The motion was seconded by Dr. Yancey and passed unanimously.

46
**VIRGINIA BOARD OF COUNSELING
SPECIAL CONFERENCE COMMITTEE
INFORMAL CONFERENCE MINUTES – JANUARY 27, 2023**

CALL TO ORDER: A Special Conference Committee (“Committee”) of the Board of Counseling (“Board”) convened on January 27, 2023 at 10:30 a.m., at the Department of Health Professions, Perimeter Center, 9960 Mayland Drive, Richmond, Virginia, Board Room 1.

MEMBERS PRESENT: Danielle Hunt, LPC, Chairperson
Maria Stransky, LPC, CSAC, CSOTP

STAFF PRESENT: Christy Evans, Discipline and Compliance Case Manager, Board of Counseling
Emily Tatum, Sr. Adjudication Specialist, Administrative Proceedings Division

APPLICANT: **Alec Spergel, LPC Applicant**
Case No.: 217551

PRELIMINARY MATTER AND DISCUSSION: The Chairperson noted that the time was 10:55 a.m. and Alec Spergel was noticed to appear before the Committee at 10:30 a.m. Ms. Tatum advised that the Notice was sent to the applicant’s address of record with the board via certified and first class mail, and a copy was emailed to the applicant. Based on information provided by Ms. Tatum, the Chairperson determined that proper notice had been provided to Alec Spergel and the informal conference would proceed in their absence.

CLOSED MEETING: Upon a motion by Ms. Stransky, and duly seconded by Ms. Hunt, the Committee voted to convene in a closed meeting pursuant to § 2.2-3711(A)(27) of the *Code of Virginia* for the purpose of deliberation to reach a decision in the matter of Alec Spergel, LPC Applicant. Additionally, she moved that Christy Evans attend the closed meeting because her presence would aid the Committee in its deliberations.

RECONVENE: Having certified that the matters discussed in the preceding closed session met the requirements of § 2.2-3712 of the *Code of Virginia*, the Committee reconvened in open session and announced its decision.

DECISION: Upon a motion by Ms. Stransky, and duly seconded by Ms. Hunt, the Committee voted to deny Alec Spergel's application for licensure to practice as a professional counselor. The motion carried.

ADJOURN: With all business concluded, the Committee adjourned at 11:00 a.m.

As provided by law this decision shall become a Final Order thirty (30) days after service of such Order on the applicant., unless the applicant makes a written request to the Board within such time for a formal hearing on the allegations made. If service of the Order is made by mail, three (3) additional days shall be added to that period. Upon such timely request for a formal hearing, the decision of the Special Conference

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DANIELLE HUNT
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Danielle Hunt, LPC, Chairperson
Special Conference Committee of the Board of Counseling

2/1/2023
Date

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Jennifer Lang
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Jennifer Lang, Deputy Executive Director
Virginia Board of Counseling

2/2/2023
Date

**VIRGINIA BOARD OF COUNSELING⁴⁷
SPECIAL CONFERENCE COMMITTEE
INFORMAL CONFERENCE MINUTES – JANUARY 27, 2023**

CALL TO ORDER: A Special Conference Committee (“Committee”) of the Board of Counseling (“Board”) convened on January 27, 2023 at 11:00 a.m., at the Department of Health Professions, Perimeter Center, 9960 Mayland Drive, Richmond, Virginia, Board Room 1.

MEMBERS PRESENT: Danielle Hunt, LPC, Chairperson
Maria Stransky, LPC, CSAC, CSOTP

STAFF PRESENT: Christy Evans, Discipline and Compliance Case Manager, Board of Counseling
Emily Tatum, Sr. Adjudication Specialist, Administrative Proceedings Division

APPLICANT: **Esther Miles, Resident in Counseling Applicant**
Case No.: 220204

PRELIMINARY MATTER AND DISCUSSION: The Chairperson noted that the time was 11:15 a.m. and Esther Miles was noticed to appear before the Committee at 11:00 a.m. Ms. Tatum advised that the Notice was sent to the applicant’s address of record with the board via certified and first class mail, and a copy was emailed to the applicant. Based on information provided by Ms. Tatum, the Chairperson determined that proper notice had been provided to Esther Miles and the informal conference would proceed in their absence.

CLOSED MEETING: Upon a motion by Ms. Stransky, and duly seconded by Ms. Hunt, the Committee voted to convene in a closed meeting pursuant to § 2.2-3711(A)(27) of the *Code of Virginia* for the purpose of deliberation to reach a decision in the matter of Esther Miles, Resident in Counseling Applicant. Additionally, she moved that Christy Evans attend the closed meeting because her presence would aid the Committee in its deliberations.

RECONVENE: Having certified that the matters discussed in the preceding closed session met the requirements of § 2.2-3712 of the *Code of Virginia*, the Committee reconvened in open session and announced its decision.

DECISION: Upon a motion by Ms. Stransky, and duly seconded by Ms. Hunt, the Committee voted to deny Esther Miles' application for licensure to practice as a Resident in Counseling. The motion carried.

ADJOURN: With all business concluded, the Committee adjourned at 11:20 a.m.

As provided by law this decision shall become a Final Order thirty (30) days after service of such Order on the applicant,, unless the applicant makes a written request to the Board within such time for a formal hearing on the allegations made. If service of the Order is made by mail, three (3) additional days shall be added to that period. Upon such timely request for a formal hearing, the decision of the Special Conference Committee shall be vacated

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Danielle Hunt, LPC, Chairperson
Special Conference Committee of the Board of Counseling

2/1/2023
Date

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Jennifer Lang
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Jennifer Lang, Deputy Executive Director
Virginia Board of Counseling

2/2/2023
Date

48
**VIRGINIA BOARD OF COUNSELING
SPECIAL CONFERENCE COMMITTEE
INFORMAL CONFERENCE MINUTES – JANUARY 27, 2023**

CALL TO ORDER: A Special Conference Committee (“Committee”) of the Board of Counseling (“Board”) convened on January 27, 2023 at 11:30 a.m., at the Department of Health Professions, Perimeter Center, 9960 Mayland Drive, Richmond, Virginia, Board Room 1.

MEMBERS PRESENT: Danielle Hunt, LPC, Chairperson
Maria Stransky, LPC, CSAC, CSOTP

STAFF PRESENT: Christy Evans, Discipline and Compliance Case Manager, Board of Counseling
Emily Tatum, Sr. Adjudication Specialist, Administrative Proceedings Division

APPLICANT: **Shawndra Umbarger, LPC Applicant, RIC Applicant**
Case Nos.: 210125 and 215019

PRELIMINARY MATTER AND DISCUSSION: The Chairperson noted that the time was 11:35 a.m. and Shawndra Umbarger was noticed to appear before the Committee at 11:30 a.m. Ms. Tatum advised that the Notice was sent to the applicant’s address of record with the board via certified and first class mail, and a copy was emailed to the applicant. Based on information provided by Ms. Tatum, the Chairperson determined that proper notice had been provided to Shawndra Umbarger.

The Committee reviewed and considered Ms. Umbarger’s request for a continuance, emailed to staff at 10:55 p.m. on January 26, 2023. Upon a motion by Ms. Stransky, and duly seconded by Ms. Hunt, the Committee voted to deny the request for a continuance and determined that the informal conference would proceed in Ms. Umbarger’s absence.

CLOSED MEETING: Upon a motion by Ms. Stransky, and duly seconded by Ms. Hunt, the Committee voted to convene in a closed meeting pursuant to § 2.2-3711(A)(27) of the *Code of Virginia* for the purpose of deliberation to reach a decision in the matter of Shawndra Umbarger, LPC Applicant, RIC Applicant. Additionally, she moved that Christy Evans and Emily Tatum attend the closed meeting because their presence would aid the Committee in its deliberations.

RECONVENE: Having certified that the matters discussed in the preceding closed session met the requirements of § 2.2-3712 of the *Code of Virginia*, the Committee reconvened in open session and announced its decision.

DECISION: Upon a motion by Ms. Stransky, and duly seconded by Ms. Hunt, the Committee voted to deny Shawndra Umbarger’s application for licensure as a resident in counseling and deny the application for licensure as a professional counselor . The motion carried.

ADJOURN: With all business concluded, the Committee adjourned at 11:51 a.m.

As provided by law this decision shall become a Final Order thirty (30) days after service of such Order on the applicant,, unless the applicant makes a written request to the Board within such time for a formal hearing on the allegations made. If service of the Order is made by mail, three (3) additional days shall be added to that period. Upon such timely request for a formal hearing, the decision of the Special Conference

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Danielle Hunt, LPC, Chairperson
Special Conference Committee of the Board of Counseling

2/1/2023
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Jennifer Lang, Deputy Executive Director
Virginia Board of Counseling

2/2/2023
Date



**Virginia Board of Counseling
Informal Conferences – Agency Subordinate
February 28, 2023**

The informal conferences, held before an Agency Subordinate of the Board of Counseling, were convened at 11:30 a.m on February 28, 2023 at the Department of Health Professions, 9960 Mayland Drive, Ste. 201, Henrico, Virginia, Board Room 1.

Agency Subordinate: Danielle Hunt, LPC
Staff Present: Christy Evans, Discipline Case Manager, Board of Counseling

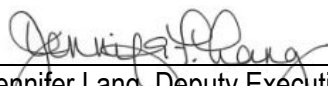
Gretchen McDaniel, CSAC, QMHP-A

<i>Attorney for Respondent:</i>	None		
<i>Others Present:</i>	Christine Corey, Adjudication Specialist, APD		
<i>CSAC Certificate No.:</i>	0710103362	<i>Case No.:</i>	217351
<i>QMHP-A Registration No.:</i>	0732005884		

Gretchen McDaniel did not appear in accordance with the Notice dated December 22, 2022 and was not represented by legal counsel. Based upon information provided by Ms. Corey, the Agency Subordinate ruled that adequate notice was provided.

A recommended decision will be made and mailed to Gretchen McDaniel within 90 days. This recommendation will be presented to the full Board and, if accepted, an Order will be entered. As provided by law, this decision shall become a Final Order 30 days after service of such order on Gretchen McDaniel unless a written request to the Board for a formal hearing is received within such time. If service of the order is made by mail, three additional days shall be added to that period. Upon such timely request for a formal hearing, the Order shall be vacated.

Adjournment: The conferences concluded at 11:55 a.m.



Jennifer Lang, Deputy Executive Director
Virginia Board of Counseling

03/01/2023

Date



Virginia Board of Counseling
Regulatory Advisory Panel Meeting Minutes
Friday, March 3, 2023 at 1 p.m.
9960 Mayland Drive, Henrico, VA 23233
Board Room 4

- PRESIDING OFFICER:** Gerard Lawson, Ph.D., LPC, LSATP
- BOARD MEMBERS PRESENT:** Danielle Hunt, LPC, Vice-Chairperson
 Johnston Brendel, Ed.D., LPC, LMFT, Chairperson
 Maria Stransky, LPC, CSAC, CSOTP
- BOARD STAFF PRESENT:** Charlotte Lenart, Deputy Executive Director
 Jaime Hoyle, JD, Executive Director
 Jennifer Lang, Deputy Executive Director
 Sandie Cotman, QMHP Program Manager
- DHP STAFF PRESENT:** Erin Barrett, Director of Legislative Affairs and Policy
 Matthew Novak, Policy Analyst
- STAKEHOLDER MEMBERS:** Alexis Aplasca, MD, FAAP, FAPA, Chief Clinical Officer, Chief Deputy for Clinical and Quality Management, Virginia Department of Behavioral Health and Developmental Services (DBHDS)
 Becky Bowers-Lanier, Virginia Counselor Association Lobbyist
 Mindy Carlin, Executive Director, Virginia Association of Community-Based Providers
 Jennifer Faison, Executive Director, Virginia Association of Community Services Boards (VACSB)
 Jennifer Fidura, Executive Director, Virginia Network of Private Providers (VNPP)
 Ashely Harrell, LCSW, Senior Program Advisor, Division of Behavioral Health, Virginia Department of Medical Assistance Services (DMAS)
 Suzanne Klaas, LCSW, Behavioral Health Policy, Behavioral Health Division, DMAS
 Denise Malone, PsyD, BCBA, Chief of Mental Health & Wellness, Department of Corrections
 Liv O'Neal, Program Director, Easter Seals
 Laura Reed, LCSW, Behavioral Health Senior Program Advisor, Division of Behavior Health, DMAS
 Lisa Snider, CHC, CHPC, QMHP-A/C, Assistant Director, Loudoun County Department of MHSADS; Virginia Association of Community Services Boards, Mental Health Council
 Frank Valentine, Vice-President of Operations, National Counseling Group
- STAKEHOLDER MEMBERS ABSENT:** Bruce Crusier, Mental Health America of Virginia
- PUBLIC ATTENDEES:** Raffaella Sale, Resident in Psychology, Center for Evidence-Based Partnerships
- CALL TO ORDER:** Dr. Lawson called the board meeting to order at 1:14 p.m.

MISSION STATEMENT: Ms. Hoyle 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 adopted as presented.

PUBLIC COMMENT: No public comment provided.

PURPOSE OF THE REGULATORY ADVISORY PANEL (RAP): The purpose of the RAP is for stakeholders to assist in providing context to the Board on the duty and roll of QMHPs and to help the Board consider actions on the petition for rule making filed by the VACB.

DISCUSSION: The panel discussed the background, education and supervision requirements for QMHPs.

Panel took a break from 2:33pm to 2:47pm.

NEXT MEETING DATES: Dr. Lawson announced that the Board will need to review and talk about the issues raised during the Regulatory Advisory Panel (RAP). A second RAP will be scheduled if the Board decides that another RAP is needed.

ADJOURNMENT: Dr. Lawson adjourned the March 3, 2023 Board meeting at 4:08 pm.

Gerard Lawson, Ph.D., LPC, LSATP, Chairperson

Jaime Hoyle, JD, Executive Director

**VIRGINIA BOARD⁵² OF COUNSELING
SPECIAL CONFERENCE COMMITTEE
INFORMAL CONFERENCE MINUTES – MARCH 31, 2023**

CALL TO ORDER: A Special Conference Committee (“Committee”) of the Board of Counseling (“Board”) convened on March 31, 2023 at 10:20 a.m., at the Department of Health Professions, Perimeter Center, 9960 Mayland Drive, Richmond, Virginia, Board Room 1.

MEMBERS PRESENT: Danielle Hunt, LPC, Chairperson
Maria Stransky, LPC, CSAC, CSOTP

STAFF PRESENT: Christy Evans, Discipline and Compliance Case Manager, Board of Counseling
Emily Tatum, Sr. Adjudication Specialist, Administrative Proceedings Division

APPLICANT: **Laverne Powell, Applicant for Licensure as a Resident in Counseling**
Case No.: 221852

PRELIMINARY MATTER AND DISCUSSION: The Chairperson noted that the time was 10:22 a.m. and Laverne Powell was noticed to appear before the Committee at 10:00 a.m. Ms. Tatum advised that the Notice was sent to the applicant’s address of record with the board via certified and first class mail, and a copy was emailed to the applicant. Based on information provided by Ms. Tatum, the Chairperson determined that proper notice had been provided to Laverne Powell and the informal conference would proceed in their absence.


CLOSED MEETING: Upon a motion by Ms. Stransky, and duly seconded by Ms. Hunt, the Committee voted to convene in a closed meeting pursuant to § 2.2-3711(A)(27) of the *Code of Virginia* for the purpose of deliberation to reach a decision in the matter of Laverne Powell, Applicant for Licensure as a Resident in Counseling. Additionally, she moved that Christy Evans attend the closed meeting because her presence would aid the Committee in its deliberations.

RECONVENE: Having certified that the matters discussed in the preceding closed session met the requirements of § 2.2-3712 of the *Code of Virginia*, the Committee reconvened in open session and announced its decision.

DECISION: Upon a motion by Ms. Stransky, and duly seconded by Ms. Hunt, the Committee voted to deny Laverne Powell’s application for licensure as a Resident in Counseling. The motion carried.

ADJOURN: With all business concluded, the Committee adjourned at 10:40 a.m.

As provided by law this decision shall become a Final Order thirty (30) days after service of such Order on the applicant, unless the applicant makes a written request to the Board within such time for a formal hearing on the allegations made. If service of the Order is made by mail, three (3) additional days shall be added to that period. Upon such timely request for a formal hearing, the decision of the Special Conference

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Danielle Hunt, LPC, Chairperson
Special Conference Committee of the Board of Counseling

4/5/2023
Date

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Jennifer Lang, Deputy Executive Director
Virginia Board of Counseling

4/5/2023
Date

**VIRGINIA BOARD OF COUNSELING⁵³
SPECIAL CONFERENCE COMMITTEE
INFORMAL CONFERENCE MINUTES – MARCH 31, 2023**

CALL TO ORDER: A Special Conference Committee (“Committee”) of the Board of Counseling (“Board”) convened on March 31, 2023 at 10:42 a.m., at the Department of Health Professions, Perimeter Center, 9960 Mayland Drive, Richmond, Virginia, Board Room 1.

MEMBERS PRESENT: Danielle Hunt, LPC, Chairperson
Maria Stransky, LPC, CSAC, CSOTP

STAFF PRESENT: Christy Evans, Discipline and Compliance Case Manager, Board of Counseling
Emily Tatum, Sr. Adjudication Specialist, Administrative Proceedings Division

APPLICANT: **Ella Damron, Applicant for registration as a QMHP-C**
Case No.: 224207

PRELIMINARY MATTER AND DISCUSSION: The Chairperson noted that the time was 10:45 a.m. and Ella Damron was noticed to appear before the Committee at 10:30 a.m. Ms. Tatum advised that the Notice was sent to the applicant’s address of record with the board via certified and first class mail, and a copy was emailed to the applicant. Based on information provided by Ms. Tatum, the Chairperson determined that proper notice had been provided to Ella Damron and the informal conference would proceed in their absence.

CLOSED MEETING: Upon a motion by Ms. Stransky, and duly seconded by Ms. Hunt, the Committee voted to convene in a closed meeting pursuant to § 2.2-3711(A)(27) of the *Code of Virginia* for the purpose of deliberation to reach a decision in the matter of Ella Damron, Applicant for registration as a QMHP-C. Additionally, she moved that Christy Evans attend the closed meeting because her presence would aid the Committee in its deliberations.

RECONVENE: Having certified that the matters discussed in the preceding closed session met the requirements of § 2.2-3712 of the *Code of Virginia*, the Committee reconvened in open session and announced its decision.

DECISION: Upon a motion by Ms. Stransky, and duly seconded by Ms. Hunt, the Committee voted to deny Ella Damron's application for registration as a QMHP-C. The motion carried.

ADJOURN: With all business concluded, the Committee adjourned at 11:00 a.m.

As provided by law this decision shall become a Final Order thirty (30) days after service of such Order on the applicant,, unless the applicant makes a written request to the Board within such time for a formal hearing on the allegations made. If service of the Order is made by mail, three (3) additional days shall be added to that period. Upon such timely request for a formal hearing, the decision of the Special Conference

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DANIELLE HUNT
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Danielle Hunt, LPC, Chairperson
Special Conference Committee of the Board of Counseling

4/5/2023
Date

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Jennifer Lang
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Jennifer Lang, Deputy Executive Director
Virginia Board of Counseling

4/5/2023
Date

54
**VIRGINIA BOARD OF COUNSELING
SPECIAL CONFERENCE COMMITTEE
INFORMAL CONFERENCE MINUTES – MARCH 31, 2023**

CALL TO ORDER: A Special Conference Committee (“Committee”) of the Board of Counseling (“Board”) convened on March 31, 2023 at 11:15 a.m., at the Department of Health Professions, Perimeter Center, 9960 Mayland Drive, Richmond, Virginia, Board Room 1.

MEMBERS PRESENT: Danielle Hunt, LPC, Chairperson
Maria Stransky, LPC, CSAC, CSOTP

STAFF PRESENT: Christy Evans, Discipline and Compliance Case Manager, Board of Counseling
Christine Corey, Adjudication Specialist, Administrative Proceedings Division

APPLICANT: **Haleh Tajbakhsh, Applicant for licensure as a Resident in Counseling**
Case No.: 220208

PRELIMINARY MATTER AND DISCUSSION: The Chairperson noted that the time was 11:15 a.m. and Haleh Tajbakhsh was noticed to appear before the Committee at 11:00 a.m. Ms. Corey advised that the Notice was sent to the applicant’s address of record with the board via certified and first class mail, and a copy was emailed to the applicant. Based on information provided by Ms. Corey, the Chairperson determined that proper notice had been provided to Haleh Tajbakhsh and the informal conference would proceed in their absence.

CLOSED MEETING: Upon a motion by Ms. Stransky, and duly seconded by Ms. Hunt, the Committee voted to convene in a closed meeting pursuant to § 2.2-3711(A)(27) of the *Code of Virginia* for the purpose of deliberation to reach a decision in the matter of Haleh Tajbakhsh, Applicant for licensure as a Resident in Counseling. Additionally, she moved that Christy Evans attend the closed meeting because her presence would aid the Committee in its deliberations.

RECONVENE: Having certified that the matters discussed in the preceding closed session met the requirements of § 2.2-3712 of the *Code of Virginia*, the Committee reconvened in open session and announced its decision.

DECISION: Upon a motion by Ms. Stransky, and duly seconded by Ms. Hunt, the Committee voted to deny Haleh Tajbakhsh’s application for licensure as a Resident in Counseling. The motion carried.

ADJOURN: With all business concluded, the Committee adjourned at 11:37 a.m.

As provided by law this decision shall become a Final Order thirty (30) days after service of such Order on the applicant, unless the applicant makes a written request to the Board within such time for a formal hearing on the allegations made. If service of the Order is made by mail, three (3) additional days shall be added to that period. Upon such timely request for a formal hearing, the decision of the Special Conference

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Danielle Hunt, LPC, Chairperson
Special Conference Committee of the Board of Counseling

4/5/2023
Date

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Jennifer Lang
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Jennifer Lang, Deputy Executive Director
Virginia Board of Counseling

4/5/2023
Date

**VIRGINIA BOARD OF COUNSELING⁵⁵
SPECIAL CONFERENCE COMMITTEE
INFORMAL CONFERENCE MINUTES – MARCH 31, 2023**

CALL TO ORDER: A Special Conference Committee (“Committee”) of the Board of Counseling (“Board”) convened on March 31, 2023 at 11:42 a.m., at the Department of Health Professions, Perimeter Center, 9960 Mayland Drive, Richmond, Virginia, Board Room 1.

MEMBERS PRESENT: Danielle Hunt, LPC, Chairperson
Maria Stransky, LPC, CSAC, CSOTP

STAFF PRESENT: Christy Evans, Discipline Case Manager, Board of Counseling
Christine Corey, Adjudication Specialist, Administrative Proceedings Division

APPLICANT: **Michelle Thrift, Applicant for licensure as a Resident in Counseling**
Case No.: 223275

DISCUSSION: Michelle Thrift appeared in person before the Committee, without legal counsel, and fully discussed the allegations contained in the Notice dated February 23, 2023.

CLOSED MEETING: Upon a motion by Ms. Stransky, and duly seconded by Ms. Hunt, the Committee voted to convene in a closed meeting pursuant to § 2.2-3711(A)(27) of the *Code of Virginia* for the purpose of deliberation to reach a decision in the matter of Michelle Thrift, Applicant for licensure as a Resident in Counseling. Additionally, she moved that Christy Evans attend the closed meeting because her presence would aid the Committee in its deliberations.

RECONVENE: Having certified that the matters discussed in the preceding closed session met the requirements of § 2.2-3712 of the *Code of Virginia*, the Committee reconvened in open session and announced its decision.

DECISION: Upon a motion by Ms. Stransky, and duly seconded by Ms. Hunt, the Committee voted to deny Michelle Thrift's application for licensure as a Resident in Counseling. The motion carried.

ADJOURN: With all business concluded, the Committee adjourned at 12:06 p.m.

As provided by law this decision shall become a Final Order thirty (30) days after service of such Order on the applicant, unless the applicant makes a written request to the Board within such time for a formal hearing on the allegations made. If service of the Order is made by mail, three (3) additional days shall be added to that period. Upon such timely request for a formal hearing, the decision of the Special Conference Committee shall be vacated

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DANIELLE HUNT
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Danielle Hunt, LPC, Chairperson
Special Conference Committee of the Board of Counseling

4/5/2023
Date

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Jennifer Lang
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Jennifer Lang, Deputy Executive Director
Virginia Board of Counseling

4/5/2023
Date

**VIRGINIA BOARD OF COUNSELING⁵⁶
SPECIAL CONFERENCE COMMITTEE
INFORMAL CONFERENCE MINUTES – MARCH 31, 2023**

CALL TO ORDER: A Special Conference Committee (“Committee”) of the Board of Counseling (“Board”) convened on March 31, 2023 at 12:21 p.m., at the Department of Health Professions, Perimeter Center, 9960 Mayland Drive, Richmond, Virginia, Board Room 1.

MEMBERS PRESENT: Danielle Hunt, LPC, Chairperson
Maria Stransky, LPC, CSAC, CSOTP

STAFF PRESENT: Christy Evans, Discipline Case Manager, Board of Counseling
Christine Corey, Adjudication Specialist, Administrative Proceedings Division

APPLICANT: **Barbara Folcini, Applicant for licensure as a Resident in Counseling**
Case No.: 223524

DISCUSSION: Barbara Folcini appeared in person before the Committee, without legal counsel, and fully discussed the allegations contained in the Notice dated February 15, 2023.

CLOSED MEETING: Upon a motion by Ms. Stransky, and duly seconded by Ms. Hunt, the Committee voted to convene in a closed meeting pursuant to § 2.2-3711(A)(27) of the *Code of Virginia* for the purpose of deliberation to reach a decision in the matter of Barbara Folcini, Applicant for licensure as a Resident in Counseling. Additionally, she moved that Christy Evans attend the closed meeting because her presence would aid the Committee in its deliberations.

RECONVENE: Having certified that the matters discussed in the preceding closed session met the requirements of § 2.2-3712 of the *Code of Virginia*, the Committee reconvened in open session and announced its decision.

DECISION: Upon a motion by Ms. Stransky, and duly seconded by Ms. Hunt, the Committee voted to deny Barbara Folcini's application for licensure as a Resident in Counseling. The motion carried.

ADJOURN: With all business concluded, the Committee adjourned at 1:12 p.m.

As provided by law this decision shall become a Final Order thirty (30) days after service of such Order on the applicant, unless the applicant makes a written request to the Board within such time for a formal hearing on the allegations made. If service of the Order is made by mail, three (3) additional days shall be added to that period. Upon such timely request for a formal hearing, the decision of the Special Conference Committee shall be vacated.

DocuSigned by:
DANIELLE HUNT
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Danielle Hunt, LPC, Chairperson
Special Conference Committee of the Board of Counseling

4/5/2023
Date

DocuSigned by:
Jennifer Lang
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Jennifer Lang, Deputy Executive Director
Virginia Board of Counseling

4/5/2023
Date



**Virginia Board of Counseling
Telephone Conference Call
April 10, 2023**

- CALL TO ORDER:** Pursuant to § 54.1-2400(13) of the *Code of Virginia*, a telephone conference call of the Virginia Board of Counseling was called to order on April 10, 2023 at 12:10 p.m., to consider a settlement proposal in the matter of Barton Biggs, Resident in Counseling.
- PRESIDING:** Danielle Hunt, LPC, Vice-Chairperson
- BOARD MEMBERS PRESENT:** Johnston Brendel, Ed.D., LPC, LMFT, Chairperson
Angela Charlton, Ph.D., LPC
Natalie Franklin, LPC, LMFT
Gerard Lawson, Ph.D., LPC, LSATP
Matthew Scott, LMFT
Maria Stransky, LPC, CSAC
Tiffinee Yancey, Ph.D., LPC
- BOARD COUNSEL PRESENT:** James Rutkowski, Assistant Attorney General
- BOARD STAFF PRESENT:** Jaime Hoyle, Executive Director
Jennifer Lang, Deputy Executive Director
Charlotte Lenart, Deputy Executive Director
- QUORUM:** With eight (8) members participating, a quorum was established.
- MATTER CONSIDERED:** Barton Biggs, Resident in Counseling
License No. 0704007549
Case No. 224837
- CLOSED MEETING:** Ms. Stransky moved that the Board convene in a closed meeting pursuant to § 2.2-3711(A)(27) of the *Code of Virginia* to consider a settlement proposal. Additionally she moved that James Rutkowski, Jaime Hoyle, Jennifer Lang, and Charlotte Lenart attend the meeting because their presence was deemed necessary and would aid the Board in its deliberations. The motion was seconded and passed unanimously.
- RECONVENE:** Having certified that the matters discussed in the preceding closed meeting met the requirements of § 2.2-3712 of the *Code*, the Board reconvened in an open meeting.
- DECISION:** Dr. Lawson made a motion to approve the Consent Order as presented. The motion was duly seconded, a roll call vote was taken, and the motion passed unanimously.
- ADJOURNMENT:** With all business concluded, the Board adjourned at 12:18 p.m.

DocuSigned by:

DANIELLE HUNT

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Danielle Hunt, LPC, Vice-Chairperson
Board of Counseling

4/10/2023

Date

Telephone Conference Call

April 10, 2023

Page 2

DocuSigned by:
Jennifer Lang

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Jennifer Lang, Deputy Executive Director
Board of Counseling

4/11/2023

Date

Board of Counseling
Current* Regulatory Actions

At Secretary's Office

Chapter	Action	Stage	Location	Duration
18VAC115-90	New chapter for licensure of art therapists	Proposed	Secretary	403 days
18VAC115-20	Removal of redundant provisions related to conversion therapy	NOIRA	Secretary	209 days
18VAC115-20	Regulatory reduction September 2022	Fast-Track	Secretary	136 days

At Attorney General's Office

Chapter	Action	Stage	Location	Duration
18VAC115-20 18VAC115-50 18VAC115-60	Changes resulting from periodic review	Final	OAG	222 days

*As of May 1, 2023

Agenda Item: Adoption of exempt regulatory changes pursuant to Ch. 191 of the 2023 Acts of Assembly

Included in your agenda package are:

- Proposed exempt regulatory changes to 18VAC115-15-10; and
- Ch. 191 of the 2023 Acts of Assembly.

Action needed:

- Motion to adopt exempt changes to 18VAC115-15-10 **effective July 1, 2023.**

Project 7550 - Exempt Final

Board of Counseling

Exempt regulatory changes to allow agency subordinates to hear credentials cases

18VAC115-15-10. Decision to delegate.

In accordance with § 54.1-2400 (10) of the Code of Virginia, the board may delegate an informal fact-finding proceeding to an agency subordinate ~~upon determination that probable cause exists that a practitioner may be subject to a disciplinary action.~~

VIRGINIA ACTS OF ASSEMBLY -- 2023 SESSION

CHAPTER 191

An Act to amend and reenact § 54.1-2400 of the Code of Virginia, relating to health regulatory boards; delegation of authority to conduct informal fact-finding proceedings.

[H 1622]

Approved March 22, 2023

Be it enacted by the General Assembly of Virginia:

1. That § 54.1-2400 of the Code of Virginia is amended and reenacted as follows:

§ 54.1-2400. General powers and duties of health regulatory boards.

The general powers and duties of health regulatory boards shall be:

1. To establish the qualifications for registration, certification, licensure, permit, or the issuance of a multistate licensure privilege in accordance with the applicable law which are necessary to ensure competence and integrity to engage in the regulated professions.

2. To examine or cause to be examined applicants for certification, licensure, or registration. Unless otherwise required by law, examinations shall be administered in writing or shall be a demonstration of manual skills.

3. To register, certify, license, or issue a multistate licensure privilege to qualified applicants as practitioners of the particular profession or professions regulated by such board.

4. To establish schedules for renewals of registration, certification, licensure, permit, and the issuance of a multistate licensure privilege.

5. To levy and collect fees for application processing, examination, registration, certification, permitting, or licensure or the issuance of a multistate licensure privilege and renewal that are sufficient to cover all expenses for the administration and operation of the Department of Health Professions, the Board of Health Professions, and the health regulatory boards.

6. To promulgate regulations in accordance with the Administrative Process Act (§ 2.2-4000 et seq.) that are reasonable and necessary to administer effectively the regulatory system, which shall include provisions for the satisfaction of board-required continuing education for individuals registered, certified, licensed, or issued a multistate licensure privilege by a health regulatory board through delivery of health care services, without compensation, 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. Such regulations shall not conflict with the purposes and intent of this chapter or of Chapter 1 (§ 54.1-100 et seq.) and Chapter 25 (§ 54.1-2500 et seq.).

7. To revoke, suspend, restrict, or refuse to issue or renew a registration, certificate, license, permit, or multistate licensure privilege which such board has authority to issue for causes enumerated in applicable law and regulations.

8. To appoint designees from their membership or immediate staff to coordinate with the Director and the Health Practitioners' Monitoring Program Committee and to implement, as is necessary, the provisions of Chapter 25.1 (§ 54.1-2515 et seq.). Each health regulatory board shall appoint one such designee.

9. To take appropriate disciplinary action for violations of applicable law and regulations, and to accept, in their discretion, the surrender of a license, certificate, registration, permit, or multistate licensure privilege in lieu of disciplinary action.

10. To appoint a special conference committee, composed of not less than two members of a health regulatory board or, when required for special conference committees of the Board of Medicine, not less than two members of the Board and one member of the relevant advisory board, or, when required for special conference committees of the Board of Nursing, not less than one member of the Board and one member of the relevant advisory board, to act in accordance with § 2.2-4019 upon receipt of information that a practitioner or permit holder of the appropriate board may be subject to disciplinary action or to consider an application for a license, certification, registration, permit or multistate licensure privilege in nursing. The special conference committee may (i) exonerate; (ii) reinstate; (iii) place the practitioner or permit holder on probation with such terms as it may deem appropriate; (iv) reprimand; (v) modify a previous order; (vi) impose a monetary penalty pursuant to § 54.1-2401, (vii) deny or grant an application for licensure, certification, registration, permit, or multistate licensure privilege; and (viii) issue a restricted license, certification, registration, permit or multistate licensure privilege subject to terms and conditions. The order of the special conference committee shall become final 30 days after service of the order unless a written request to the board for a hearing is received within such time. If service of the decision to a party is accomplished by mail, three days shall be added to the 30-day period. Upon receiving a timely written request for a hearing, the board or a panel of the board shall then proceed with a hearing as provided in § 2.2-4020, and the action of the committee shall be vacated.

This subdivision shall not be construed to limit the authority of a board to delegate to an appropriately qualified agency subordinate, as defined in § 2.2-4001, the authority to conduct informal fact-finding proceedings in accordance with § 2.2-4019; ~~upon receipt of information that a practitioner may be subject to a disciplinary action.~~ The recommendation of such subordinate may be considered by a panel consisting of at least five board members, or, if a quorum of the board is less than five members, consisting of a quorum of the members, convened for the purpose of issuing a case decision. Criteria for the appointment of an agency subordinate shall be set forth in regulations adopted by the board.

11. To convene, at their discretion, a panel consisting of at least five board members or, if a quorum of the board is less than five members, consisting of a quorum of the members to conduct formal proceedings pursuant to § 2.2-4020, decide the case, and issue a final agency case decision. Any decision rendered by majority vote of such panel shall have the same effect as if made by the full board and shall be subject to court review in accordance with the Administrative Process Act. No member who participates in an informal proceeding conducted in accordance with § 2.2-4019 shall serve on a panel conducting formal proceedings pursuant to § 2.2-4020 to consider the same matter.

12. To issue inactive licenses or certificates and promulgate regulations to carry out such purpose. Such regulations shall include, but not be limited to, the qualifications, renewal fees, and conditions for reactivation of licenses or certificates.

13. To meet by telephone conference call to consider settlement proposals in matters pending before special conference committees convened pursuant to this section, or matters referred for formal proceedings pursuant to § 2.2-4020 to a health regulatory board or a panel of the board or to consider modifications of previously issued board orders when such considerations have been requested by either of the parties.

14. To request and accept from a certified, registered, or licensed practitioner; a facility holding a license, certification, registration, or permit; or a person holding a multistate licensure privilege to practice nursing, in lieu of disciplinary action, a confidential consent agreement. A confidential consent agreement shall be subject to the confidentiality provisions of § 54.1-2400.2 and shall not be disclosed by a practitioner or facility. A confidential consent agreement shall include findings of fact and may include an admission or a finding of a violation. A confidential consent agreement shall not be considered either a notice or order of any health regulatory board, but it may be considered by a board in future disciplinary proceedings. A confidential consent agreement shall be entered into only in cases involving minor misconduct where there is little or no injury to a patient or the public and little likelihood of repetition by the practitioner or facility. A board shall not enter into a confidential consent agreement if there is probable cause to believe the practitioner or facility has (i) demonstrated gross negligence or intentional misconduct in the care of patients or (ii) conducted his practice in such a manner as to be a danger to the health and welfare of his patients or the public. A certified, registered, or licensed practitioner, a facility holding a license, certification, registration, or permit, or a person holding a multistate licensure privilege to practice nursing who has entered into two confidential consent agreements involving a standard of care violation, within the 10-year period immediately preceding a board's receipt of the most recent report or complaint being considered, shall receive public discipline for any subsequent violation within the 10-year period unless the board finds there are sufficient facts and circumstances to rebut the presumption that the disciplinary action be made public.

15. When a board has probable cause to believe a practitioner is unable to practice with reasonable skill and safety to patients because of excessive use of alcohol or drugs or physical or mental illness, the board, after preliminary investigation by an informal fact-finding proceeding, may direct that the practitioner submit to a mental or physical examination. Failure to submit to the examination shall constitute grounds for disciplinary action. Any practitioner affected by this subsection shall be afforded reasonable opportunity to demonstrate that he is competent to practice with reasonable skill and safety to patients. For the purposes of this subdivision, "practitioner" shall include any person holding a multistate licensure privilege to practice nursing.

Agenda Item: Adoption of emergency regulations to implement provisions of Chapters 684 and 802 of the 2023 General Assembly

Included in your agenda package:

- Ch. 684 of the 2023 Acts of Assembly.

Provided as a handout at your seat:

- Draft changes to existing regulations to implement provisions of the Counseling Compact.

Action needed:

- Motion to adopt emergency regulations and issue a Notice of Intended Regulatory Action for permanent regulations to replace emergency regulations.

VIRGINIA ACTS OF ASSEMBLY -- 2023 SESSION

CHAPTER 684

An Act to amend the Code of Virginia by adding a section numbered 54.1-3500.1, relating to Counseling Compact.

[H 1433]

Approved March 27, 2023

Be it enacted by the General Assembly of Virginia:

1. That the Code of Virginia is amended by adding a section numbered 54.1-3500.1 as follows:

§ 54.1-3500.1. Counseling Compact.

The General Assembly hereby enacts, and the Commonwealth of Virginia hereby enters into, the Counseling Compact with any and all states legally joining therein according to its terms, in the form substantially as follows:

COUNSELING COMPACT

Article I.

Purpose.

The purpose of this Compact is to facilitate interstate practice of Licensed Professional Counselors with the goal of improving public access to Professional Counseling services. The practice of Professional Counseling occurs in the State where the client is located at the time of the counseling services. The Compact preserves the regulatory authority of States to protect public health and safety through the current system of State licensure.

This Compact is designed to achieve the following objectives:

- 1. Increase public access to Professional Counseling services by providing for the mutual recognition of other Member State licenses;*
- 2. Enhance the States' ability to protect the public's health and safety;*
- 3. Encourage the cooperation of Member States in regulating multistate practice for Licensed Professional Counselors;*
- 4. Support spouses of relocating Active Duty Military personnel;*
- 5. Enhance the exchange of licensure, investigative, and disciplinary information among Member States;*
- 6. Allow for the use of Telehealth technology to facilitate increased access to Professional Counseling services;*
- 7. Support the uniformity of Professional Counseling licensure requirements throughout the States to promote public safety and public health benefits;*
- 8. Invest all Member States with the authority to hold a Licensed Professional Counselor accountable for meeting all State practice laws in the State in which the client is located at the time care is rendered through the mutual recognition of Member State licenses;*
- 9. Eliminate the necessity for licenses in multiple States; and*
- 10. Provide opportunities for interstate practice by Licensed Professional Counselors who meet uniform licensure requirements.*

Article II.

Definitions.

As used in this Compact, and except as otherwise provided, the following definitions shall apply:

"Active Duty Military" means full-time duty status in the active uniformed service of the United States, including members of the National Guard and Reserve on active duty orders pursuant to 10 U.S.C. Chapters 1209 and 1211.

"Adverse Action" means any administrative, civil, equitable, or criminal action permitted by a State's laws which is imposed by a licensing board or other authority against a Licensed Professional Counselor, including actions against an individual's license or Privilege to Practice such as revocation, suspension, probation, monitoring of the licensee, limitation on the licensee's practice, or any other Encumbrance on licensure affecting a Licensed Professional Counselor's authorization to practice, including issuance of a cease and desist action.

"Alternative Program" means a non-disciplinary monitoring or practice remediation process approved by a Professional Counseling Licensing Board to address Impaired Practitioners.

"Continuing Competence/Education" means a requirement, as a condition of license renewal, to provide evidence of participation in, and/or completion of, educational and professional activities relevant to practice or area of work.

"Counseling Compact Commission" or "Commission" means the national administrative body whose membership consists of all States that have enacted the Compact.

"Current Significant Investigative Information" means:

1. Investigative Information that a Licensing Board, after a preliminary inquiry that includes notification and an opportunity for the Licensed Professional Counselor to respond, if required by State law, has reason to believe is not groundless and, if proved true, would indicate more than a minor infraction; or

2. Investigative Information that indicates that the Licensed Professional Counselor represents an immediate threat to public health and safety regardless of whether the Licensed Professional Counselor has been notified and had an opportunity to respond.

"Data System" means a repository of information about Licensees, including, but not limited to, continuing education, examination, licensure, investigative, Privilege to Practice, and Adverse Action information.

"Encumbered License" means a license in which an Adverse Action restricts the practice of licensed Professional Counseling by the Licensee and said Adverse Action has been reported to the National Practitioners Data Bank (NPDB).

"Encumbrance" means a revocation or suspension of, or any limitation on, the full and unrestricted practice of Licensed Professional Counseling by a Licensing Board.

"Executive Committee" means a group of directors elected or appointed to act on behalf of, and within the powers granted to them by, the Commission.

"Home State" means the Member State that is the Licensee's primary State of residence.

"Impaired Practitioner" means an individual who has a condition(s) that may impair their ability to practice as a Licensed Professional Counselor without some type of intervention and may include, but are not limited to, alcohol and drug dependence, mental health impairment, and neurological or physical impairments.

"Investigative Information" means information, records, and documents received or generated by a Professional Counseling Licensing Board pursuant to an investigation.

"Jurisprudence Requirement" if required by a Member State, means the assessment of an individual's knowledge of the laws and Rules governing the practice of Professional Counseling in a State.

"Licensed Professional Counselor" means a counselor licensed by a Member State, regardless of the title used by that State, to independently assess, diagnose, and treat behavioral health conditions.

"Licensee" means an individual who currently holds an authorization from the State to practice as a Licensed Professional Counselor.

"Licensing Board" means the agency of a State, or equivalent, that is responsible for the licensing and regulation of Licensed Professional Counselors.

"Member State" means a State that has enacted the Compact.

"Privilege to Practice" means a legal authorization, which is equivalent to a license, permitting the practice of Professional Counseling in a Remote State.

"Professional Counseling" means the assessment, diagnosis, and treatment of behavioral health conditions by a Licensed Professional Counselor.

"Remote State" means a Member State other than the Home State, where a Licensee is exercising or seeking to exercise the Privilege to Practice.

"Rule" means a regulation promulgated by the Commission that has the force of law.

"Single State License" means a Licensed Professional Counselor license issued by a Member State that authorizes practice only within the issuing State and does not include a Privilege to Practice in any other Member State.

"State" means any state, commonwealth, district, or territory of the United States of America that regulates the practice of Professional Counseling.

"Telehealth" means the application of telecommunication technology to deliver Professional Counseling services remotely to assess, diagnose, and treat behavioral health conditions.

"Unencumbered License" means a license that authorizes a Licensed Professional Counselor to engage in the full and unrestricted practice of Professional Counseling.

Article III.

State Participation in the Compact.

A. To Participate in the Compact, a State must currently:

1. License and regulate Licensed Professional Counselors;
2. Require Licensees to pass a nationally recognized exam approved by the Commission;
3. Require Licensees to have a 60 semester-hour (or 90 quarter-hour) master's degree in counseling or 60 semester-hours (or 90 quarter-hours) of graduate course work including the following topic areas:
 - a. Professional Counseling Orientation and Ethical Practice;
 - b. Social and Cultural Diversity;
 - c. Human Growth and Development;
 - d. Career Development;
 - e. Counseling and Helping Relationships;
 - f. Group Counseling and Group Work;
 - g. Diagnosis and Treatment; Assessment and Testing;
 - h. Research and Program Evaluation; and

- i. Other areas as determined by the Commission.
- 4. Require Licensees to complete a supervised postgraduate professional experience as defined by the Commission; and
- 5. Have a mechanism in place for receiving and investigating complaints about Licensees.
- B. A Member State shall:
 - 1. Participate fully in the Commission's Data System, including using the Commission's unique identifier as defined in Rules;
 - 2. Notify the Commission, in compliance with the terms of the Compact and Rules, of any Adverse Action or the availability of Investigative Information regarding a Licensee;
 - 3. Implement or utilize procedures for considering the criminal history records of applicants for an initial Privilege to Practice. These procedures shall include the submission of fingerprints or other biometric-based information by applicants for the purpose of obtaining an applicant's criminal history record information from the Federal Bureau of Investigation and the agency responsible for retaining that State's criminal records;
 - a. A member state must fully implement a criminal background check requirement, within a time frame established by rule, by receiving the results of the Federal Bureau of Investigation record search and shall use the results in making licensure decisions.
 - b. Communication between a Member State, the Commission and among Member States regarding the verification of eligibility for licensure through the Compact shall not include any information received from the Federal Bureau of Investigation relating to a federal criminal records check performed by a Member State under Public Law 92-544.
 - 4. Comply with the Rules of the Commission;
 - 5. Require an applicant to obtain or retain a license in the Home State and meet the Home State's qualifications for licensure or renewal of licensure, as well as all other applicable State laws;
 - 6. Grant the Privilege to Practice to a Licensee holding a valid Unencumbered License in another Member State in accordance with the terms of the Compact and Rules; and
 - 7. Provide for the attendance of the State's commissioner to the Counseling Compact Commission meetings.
- C. Member States may charge a fee for granting the Privilege to Practice.
- D. Individuals not residing in a Member State shall continue to be able to apply for a Member State's Single State License as provided under the laws of each Member State. However, the Single State License granted to these individuals shall not be recognized as granting a Privilege to Practice Professional Counseling in any other Member State.
- E. Nothing in this Compact shall affect the requirements established by a Member State for the issuance of a Single State License.
- F. A license issued to a Licensed Professional Counselor by a Home State to a resident in that State shall be recognized by each Member State as authorizing a Licensed Professional Counselor to practice Professional Counseling, under a Privilege to Practice, in each Member State.

Article IV.

Privilege to Practice.

- A. To exercise the Privilege to Practice under the terms and provisions of the Compact, the Licensee shall:
 - 1. Hold a license in the Home State;
 - 2. Have a valid United States Social Security Number or National Practitioner Identifier;
 - 3. Be eligible for a Privilege to Practice in any Member State in accordance with subsections D, G, and H;
 - 4. Have not had any Encumbrance or restriction against any license or Privilege to Practice within the previous two (2) years;
 - 5. Notify the Commission that the Licensee is seeking the Privilege to Practice within a Remote State(s);
 - 6. Pay any applicable fees, including any State fee, for the Privilege to Practice;
 - 7. Meet any Continuing Competence/Education requirements established by the Home State;
 - 8. Meet any Jurisprudence Requirements established by the Remote State(s) in which the Licensee is seeking a Privilege to Practice; and
 - 9. Report to the Commission any Adverse Action, Encumbrance, or restriction on license taken by any non-Member State within 30 days from the date the action is taken.
- B. The Privilege to Practice is valid until the expiration date of the Home State license. The Licensee must comply with the requirements of subsection A to maintain the Privilege to Practice in the Remote State.
- C. A Licensee providing Professional Counseling in a Remote State under the Privilege to Practice shall adhere to the laws and regulations of the Remote State.
- D. A Licensee providing Professional Counseling services in a Remote State is subject to that State's regulatory authority. A Remote State may, in accordance with due process and that State's laws, remove a Licensee's Privilege to Practice in the Remote State for a specific period of time, impose fines, and/or

take any other necessary actions to protect the health and safety of its citizens. The Licensee may be ineligible for a Privilege to Practice in any Member State until the specific time for removal has passed and all fines are paid.

E. If a Home State license is encumbered, the Licensee shall lose the Privilege to Practice in any Remote State until the following occur:

1. The Home State license is no longer encumbered; and
2. Have not had any Encumbrance or restriction against any license or Privilege to Practice within the previous two (2) years.

F. Once an Encumbered License in the Home State is restored to good standing, the Licensee must meet the requirements of subsection A to obtain a Privilege to Practice in any Remote State.

G. If a Licensee's Privilege to Practice in any Remote State is removed, the individual may lose the Privilege to Practice in all other Remote States until the following occur:

1. The specific period of time for which the Privilege to Practice was removed has ended;
2. All fines have been paid; and
3. Have not had any Encumbrance or restriction against any license or Privilege to Practice within the previous two (2) years.

H. Once the requirements of subsection G have been met, the Licensee must meet the requirements in subsection A to obtain a Privilege to Practice in a Remote State.

Article V.

Obtaining a New Home State License Based on a Privilege to Practice.

A. A Licensed Professional Counselor may hold a Home State license, which allows for a Privilege to Practice in other Member States, in only one Member State at a time.

B. If a Licensed Professional Counselor changes primary State of residence by moving between two Member States:

1. The Licensed Professional Counselor shall file an application for obtaining a new Home State license based on a Privilege to Practice, pay all applicable fees, and notify the current and new Home State in accordance with applicable Rules adopted by the Commission.

2. Upon receipt of an application for obtaining a new Home State license by virtue of a Privilege to Practice, the new Home State shall verify that the Licensed Professional Counselor meets the pertinent criteria outlined in Article IV via the Data System, without need for primary source verification except for:

- a. A Federal Bureau of Investigation fingerprint based criminal background check if not previously performed or updated pursuant to applicable rules adopted by the Commission in accordance with Public Law 92-544;

- b. Other criminal background check as required by the new Home State; and

- c. Completion of any requisite Jurisprudence Requirements of the new Home State.

3. The former Home State shall convert the former Home State license into a Privilege to Practice once the new Home State has activated the new Home State license in accordance with applicable Rules adopted by the Commission.

4. Notwithstanding any other provision of this Compact, if the Licensed Professional Counselor cannot meet the criteria in Article IV, the new Home State may apply its requirements for issuing a new Single State License.

5. The Licensed Professional Counselor shall pay all applicable fees to the new Home State in order to be issued a new Home State license.

C. If a Licensed Professional Counselor changes Primary State of Residence by moving from a Member State to a non-Member State, or from a non-Member State to a Member State, the State criteria shall apply for issuance of a Single State License in the new State.

D. Nothing in this Compact shall interfere with a Licensee's ability to hold a Single State License in multiple States, however for the purposes of this Compact, a Licensee shall have only one Home State license.

E. Nothing in this Compact shall affect the requirements established by a Member State for the issuance of a Single State License.

Article VI.

Active Duty Military Personnel or their Spouses.

Active Duty Military personnel, or their spouse, shall designate a Home State where the individual has a current license in good standing. The individual may retain the Home State designation during the period the service member is on active duty. Subsequent to designating a Home State, the individual shall only change their Home State through application for licensure in the new State, or through the process outlined in Article V.

Article VII.

Compact Privilege to Practice Telehealth.

A. Member States shall recognize the right of a Licensed Professional Counselor, licensed by a Home State in accordance with Article III and under Rules promulgated by the Commission, to practice Professional Counseling in any Member State via Telehealth under a Privilege to Practice as provided

in the Compact and Rules promulgated by the Commission.

B. A Licensee providing Professional Counseling services in a Remote State under the Privilege to Practice shall adhere to the laws and regulations of the Remote State.

Article VIII.

Adverse Actions.

A. In addition to the other powers conferred by State law, a Remote State shall have the authority, in accordance with existing State due process law, to:

1. Take Adverse Action against a Licensed Professional Counselor's Privilege to Practice within that Member State, and

2. Issue subpoenas for both hearings and investigations that require the attendance and testimony of witnesses as well as the production of evidence. Subpoenas issued by a Licensing Board in a Member State for the attendance and testimony of witnesses or the production of evidence from another Member State shall be enforced in the latter State by any court of competent jurisdiction, according to the practice and procedure of that court applicable to subpoenas issued in proceedings pending before it. The issuing authority shall pay any witness fees, travel expenses, mileage, and other fees required by the service statutes of the State in which the witnesses or evidence are located.

3. Only the Home State shall have the power to take Adverse Action against a Licensed Professional Counselor's license issued by the Home State.

B. For purposes of taking Adverse Action, the Home State shall give the same priority and effect to reported conduct received from a Member State as it would if the conduct had occurred within the Home State. In so doing, the Home State shall apply its own State laws to determine appropriate action.

C. The Home State shall complete any pending investigations of a Licensed Professional Counselor who changes primary State of residence during the course of the investigations. The Home State shall also have the authority to take appropriate action(s) and shall promptly report the conclusions of the investigations to the administrator of the Data System. The administrator of the coordinated licensure information system shall promptly notify the new Home State of any Adverse Actions.

D. A Member State, if otherwise permitted by State law, may recover from the affected Licensed Professional Counselor the costs of investigations and dispositions of cases resulting from any Adverse Action taken against that Licensed Professional Counselor.

E. A Member State may take Adverse Action based on the factual findings of the Remote State, provided that the Member State follows its own procedures for taking the Adverse Action.

F. Joint Investigations:

1. In addition to the authority granted to a Member State by its respective Professional Counseling practice act or other applicable State law, any Member State may participate with other Member States in joint investigations of Licensees.

2. Member States shall share any investigative, litigation, or compliance materials in furtherance of any joint or individual investigation initiated under the Compact.

G. If Adverse Action is taken by the Home State against the license of a Licensed Professional Counselor, the Licensed Professional Counselor's Privilege to Practice in all other Member States shall be deactivated until all Encumbrances have been removed from the State license. All Home State disciplinary orders that impose Adverse Action against the license of a Licensed Professional Counselor shall include a Statement that the Licensed Professional Counselor's Privilege to Practice is deactivated in all Member States during the pendency of the order.

H. If a Member State takes Adverse Action, it shall promptly notify the administrator of the Data System. The administrator of the Data System shall promptly notify the Home State of any Adverse Actions by Remote States.

I. Nothing in this Compact shall override a Member State's decision that participation in an Alternative Program may be used in lieu of Adverse Action.

Article IX.

Establishment of Counseling Compact Commission.

A. The Compact Member States hereby create and establish a joint public agency known as the Counseling Compact Commission:

1. The Commission is an instrumentality of the Compact States.

2. Venue is proper and judicial proceedings by or against the Commission shall be brought solely and exclusively in a court of competent jurisdiction where the principal office of the Commission is located. The Commission may waive venue and jurisdictional defenses to the extent it adopts or consents to participate in alternative dispute resolution proceedings.

3. Nothing in this Compact shall be construed to be a waiver of sovereign immunity.

B. Membership, Voting, and Meetings

1. Each Member State shall have and be limited to one (1) delegate selected by that Member State's Licensing Board.

2. The delegate shall be either:

a. A current member of the Licensing Board at the time of appointment, who is a Licensed Professional Counselor or public member; or

b. An administrator of the Licensing Board.

3. Any delegate may be removed or suspended from office as provided by the law of the State from which the delegate is appointed.

4. The Member State Licensing Board shall fill any vacancy occurring on the Commission within 60 days.

5. Each delegate shall be entitled to one (1) vote with regard to the promulgation of Rules and creation of bylaws and shall otherwise have an opportunity to participate in the business and affairs of the Commission.

6. A delegate shall vote in person or by such other means as provided in the bylaws. The bylaws may provide for delegates' participation in meetings by telephone or other means of communication.

7. The Commission shall meet at least once during each calendar year. Additional meetings shall be held as set forth in the bylaws.

8. The Commission shall by Rule establish a term of office for delegates and may by Rule establish term limits.

C. The Commission shall have the following powers and duties:

1. Establish the fiscal year of the Commission;

2. Establish bylaws;

3. Maintain its financial records in accordance with the bylaws;

4. Meet and take such actions as are consistent with the provisions of this Compact and the bylaws;

5. Promulgate Rules which shall be binding to the extent and in the manner provided for in the Compact;

6. Bring and prosecute legal proceedings or actions in the name of the Commission, provided that the standing of any State Licensing Board to sue or be sued under applicable law shall not be affected;

7. Purchase and maintain insurance and bonds;

8. Borrow, accept, or contract for services of personnel, including, but not limited to, employees of a Member State;

9. Hire employees, elect or appoint officers, fix compensation, define duties, grant such individuals appropriate authority to carry out the purposes of the Compact, and establish the Commission's personnel policies and programs relating to conflicts of interest, qualifications of personnel, and other related personnel matters;

10. Accept any and all appropriate donations and grants of money, equipment, supplies, materials, and services, and to receive, utilize, and dispose of the same; provided that at all times the Commission shall avoid any appearance of impropriety and/or conflict of interest;

11. Lease, purchase, accept appropriate gifts or donations of, or otherwise to own, hold, improve, or use, any property, real, personal, or mixed; provided that at all times the Commission shall avoid any appearance of impropriety;

12. Sell convey, mortgage, pledge, lease, exchange, abandon, or otherwise dispose of any property real, personal, or mixed;

13. Establish a budget and make expenditures;

14. Borrow money;

15. Appoint committees, including standing committees composed of members, State regulators, State legislators or their representatives, and consumer representatives, and such other interested persons as may be designated in this Compact and the bylaws;

16. Provide and receive information from, and cooperate with, law enforcement agencies;

17. Establish and elect an Executive Committee; and

18. Perform such other functions as may be necessary or appropriate to achieve the purposes of this Compact consistent with the State regulation of Professional Counseling licensure and practice.

D. The Executive Committee

1. The Executive Committee shall have the power to act on behalf of the Commission according to the terms of this Compact.

2. The Executive Committee shall be composed of up to eleven (11) members:

a. Seven voting members who are elected by the Commission from the current membership of the Commission; and

b. Up to four (4) ex-officio, nonvoting members from four (4) recognized national professional counselor organizations.

c. The ex-officio members will be selected by their respective organizations.

3. The Commission may remove any member of the Executive Committee as provided in bylaws.

4. The Executive Committee shall meet at least annually.

5. The Executive Committee shall have the following duties and responsibilities:

a. Recommend to the entire Commission changes to the Rules or bylaws, changes to this Compact legislation, fees paid by Compact Member States such as annual dues, and any Commission Compact fee charged to Licensees for the Privilege to Practice;

b. Ensure Compact administration services are appropriately provided, contractual or otherwise;

c. Prepare and recommend the budget;

- d. Maintain financial records on behalf of the Commission;
- e. Monitor Compact compliance of Member States and provide compliance reports to the Commission;
- f. Establish additional committees as necessary; and
- g. Other duties as provided in Rules or bylaws.

E. Meetings of the Commission

1. All meetings shall be open to the public, and public notice of meetings shall be given in the same manner as required under the Rulemaking provisions in Article XI.

2. The Commission or the Executive Committee or other committees of the Commission may convene in a closed, non-public meeting if the Commission or Executive Committee or other committees of the Commission must discuss:

- a. Non-compliance of a Member State with its obligations under the Compact;
- b. The employment, compensation, discipline, or other matters, practices, or procedures related to specific employees or other matters related to the Commission's internal personnel practices and procedures;
- c. Current, threatened, or reasonably anticipated litigation;
- d. Negotiation of contracts for the purchase, lease, or sale of goods, services, or real estate;
- e. Accusing any person of a crime or formally censuring any person;
- f. Disclosure of trade secrets or commercial or financial information that is privileged or confidential;
- g. Disclosure of information of a personal nature where disclosure would constitute a clearly unwarranted invasion of personal privacy;
- h. Disclosure of investigative records compiled for law enforcement purposes;
- i. Disclosure of information related to any investigative reports prepared by or on behalf of or for use of the Commission or other committee charged with responsibility of investigation or determination of compliance issues pursuant to the Compact; or
- j. Matters specifically exempted from disclosure by federal or Member State statute.

3. If a meeting, or portion of a meeting, is closed pursuant to this provision, the Commission's legal counsel or designee shall certify that the meeting may be closed and shall reference each relevant exempting provision.

4. The Commission shall keep minutes that fully and clearly describe all matters discussed in a meeting and shall provide a full and accurate summary of actions taken, and the reasons therefore, including a description of the views expressed. All documents considered in connection with an action shall be identified in such minutes. All minutes and documents of a closed meeting shall remain under seal, subject to release by a majority vote of the Commission or order of a court of competent jurisdiction.

F. Financing of the Commission

1. The Commission shall pay, or provide for the payment of, the reasonable expenses of its establishment, organization, and ongoing activities.

2. The Commission may accept any and all appropriate revenue sources, donations, and grants of money, equipment, supplies, materials, and services.

3. The Commission may levy on and collect an annual assessment from each Member State or impose fees on other parties to cover the cost of the operations and activities of the Commission and its staff, which must be in a total amount sufficient to cover its annual budget as approved each year for which revenue is not provided by other sources. The aggregate annual assessment amount shall be allocated based upon a formula to be determined by the Commission, which shall promulgate a Rule binding upon all Member States.

4. The Commission shall not incur obligations of any kind prior to securing the funds adequate to meet the same; nor shall the Commission pledge the credit of any of the Member States, except by and with the authority of the Member State.

5. The Commission shall keep accurate accounts of all receipts and disbursements. The receipts and disbursements of the Commission shall be subject to the audit and accounting procedures established under its bylaws. However, all receipts and disbursements of funds handled by the Commission shall be audited yearly by a certified or licensed public accountant, and the report of the audit shall be included in and become part of the annual report of the Commission.

G. Qualified Immunity, Defense, and Indemnification

1. The members, officers, executive director, employees, and representatives of the Commission shall be immune from suit and liability, either personally or in their official capacity, for any claim for damage to or loss of property or personal injury or other civil liability caused by or arising out of any actual or alleged act, error, or omission that occurred, or that the person against whom the claim is made had a reasonable basis for believing occurred within the scope of Commission employment, duties, or responsibilities; provided that nothing in this paragraph shall be construed to protect any such person from suit and/or liability for any damage, loss, injury, or liability caused by the intentional or willful or wanton misconduct of that person.

2. The Commission shall defend any member, officer, executive director, employee, or representative of the Commission in any civil action seeking to impose liability arising out of any actual or alleged act, error, or omission that occurred within the scope of Commission employment, duties, or responsibilities, or that the person against whom the claim is made had a reasonable basis for believing occurred within the scope of Commission employment, duties, or responsibilities; provided that nothing herein shall be construed to prohibit that person from retaining his or her own counsel; and provided further, that the actual or alleged act, error, or omission did not result from that person's intentional or willful or wanton misconduct.

3. The Commission shall indemnify and hold harmless any member, officer, executive director, employee, or representative of the Commission for the amount of any settlement or judgment obtained against that person arising out of any actual or alleged act, error, or omission that occurred within the scope of Commission employment, duties, or responsibilities, or that such person had a reasonable basis for believing occurred within the scope of Commission employment, duties, or responsibilities, provided that the actual or alleged act, error, or omission did not result from the intentional or willful or wanton misconduct of that person.

Article X.

Data System.

A. The Commission shall provide for the development, maintenance, operation, and utilization of a coordinated database and reporting system containing licensure, Adverse Action, and Investigative Information on all licensed individuals in Member States.

B. Notwithstanding any other provision of State law to the contrary, a Member State shall submit a uniform data set to the Data System on all individuals to whom this Compact is applicable as required by the Rules of the Commission, including:

1. Identifying information;
2. Licensure data;
3. Adverse Actions against a license or Privilege to Practice;
4. Non-confidential information related to Alternative Program participation;
5. Any denial of application for licensure, and the reason(s) for such denial;
6. Current Significant Investigative Information; and
7. Other information that may facilitate the administration of this Compact, as determined by the Rules of the Commission.

C. Investigative Information pertaining to a Licensee in any Member State will only be available to other Member States.

D. The Commission shall promptly notify all Member States of any Adverse Action taken against a Licensee or an individual applying for a license. Adverse Action information pertaining to a Licensee in any Member State will be available to any other Member State.

E. Member States contributing information to the Data System may designate information that may not be shared with the public without the express permission of the contributing State.

F. Any information submitted to the Data System that is subsequently required to be expunged by the laws of the Member State contributing the information shall be removed from the Data System.

Article XI.

Rulemaking.

A. The Commission shall promulgate reasonable Rules in order to effectively and efficiently achieve the purpose of the Compact. Notwithstanding the foregoing, in the event the Commission exercises its Rulemaking authority in a manner that is beyond the scope of the purposes of the Compact, or the powers granted hereunder, then such an action by the Commission shall be invalid and have no force or effect.

B. The Commission shall exercise its Rulemaking powers pursuant to the criteria set forth in this article and the Rules adopted thereunder. Rules and amendments shall become binding as of the date specified in each Rule or amendment.

C. If a majority of the legislatures of the Member States rejects a Rule, by enactment of a statute or resolution in the same manner used to adopt the Compact within four (4) years of the date of adoption of the Rule, then such Rule shall have no further force and effect in any Member State.

D. Rules or amendments to the Rules shall be adopted at a regular or special meeting of the Commission.

E. Prior to promulgation and adoption of a final Rule or Rules by the Commission, and at least thirty (30) days in advance of the meeting at which the Rule will be considered and voted upon, the Commission shall file a Notice of Proposed Rulemaking:

1. On the website of the Commission or other publicly accessible platform; and
2. On the website of each Member State Professional Counseling Licensing Board or other publicly accessible platform or the publication in which each State would otherwise publish proposed Rules.

F. The Notice of Proposed Rulemaking shall include:

1. The proposed time, date, and location of the meeting in which the Rule will be considered and voted upon;

2. The text of the proposed Rule or amendment and the reason for the proposed Rule;
3. A request for comments on the proposed Rule from any interested person; and
4. The manner in which interested persons may submit notice to the Commission of their intention to attend the public hearing and any written comments.

G. Prior to adoption of a proposed Rule, the Commission shall allow persons to submit written data, facts, opinions, and arguments, which shall be made available to the public.

H. The Commission shall grant an opportunity for a public hearing before it adopts a Rule or amendment if a hearing is requested by:

1. At least twenty-five (25) persons;
2. A State or federal governmental subdivision or agency; or
3. An association having at least twenty-five (25) members.

I. If a hearing is held on the proposed Rule or amendment, the Commission shall publish the place, time, and date of the scheduled public hearing. If the hearing is held via electronic means, the Commission shall publish the mechanism for access to the electronic hearing.

1. All persons wishing to be heard at the hearing shall notify the executive director of the Commission or other designated member in writing of their desire to appear and testify at the hearing not less than five (5) business days before the scheduled date of the hearing.

2. Hearings shall be conducted in a manner providing each person who wishes to comment a fair and reasonable opportunity to comment orally or in writing.

3. All hearings will be recorded. A copy of the recording will be made available on request.

4. Nothing in this subsection shall be construed as requiring a separate hearing on each Rule. Rules may be grouped for the convenience of the Commission at hearings required by this subsection.

J. Following the scheduled hearing date, or by the close of business on the scheduled hearing date if the hearing was not held, the Commission shall consider all written and oral comments received.

K. If no written notice of intent to attend the public hearing by interested parties is received, the Commission may proceed with promulgation of the proposed Rule without a public hearing.

L. The Commission shall, by majority vote of all members, take final action on the proposed Rule and shall determine the effective date of the Rule, if any, based on the Rulemaking record and the full text of the Rule.

M. Upon determination that an emergency exists, the Commission may consider and adopt an emergency Rule without prior notice, opportunity for comment, or hearing, provided that the usual Rulemaking procedures provided in the Compact and in this article shall be retroactively applied to the Rule as soon as reasonably possible, in no event later than ninety (90) days after the effective date of the Rule. For the purposes of this provision, an emergency Rule is one that must be adopted immediately in order to:

1. Meet an imminent threat to public health, safety, or welfare;
2. Prevent a loss of Commission or Member State funds;
3. Meet a deadline for the promulgation of an administrative Rule that is established by federal law or Rule; or
4. Protect public health and safety.

N. The Commission or an authorized committee of the Commission may direct revisions to a previously adopted Rule or amendment for purposes of correcting typographical errors, errors in format, errors in consistency, or grammatical errors. Public notice of any revisions shall be posted on the website of the Commission. The revision shall be subject to challenge by any person for a period of thirty (30) days after posting. The revision may be challenged only on grounds that the revision results in a material change to a Rule. A challenge shall be made in writing and delivered to the chair of the Commission prior to the end of the notice period. If no challenge is made, the revision will take effect without further action. If the revision is challenged, the revision may not take effect without the approval of the Commission.

Article XII.

Oversight, Dispute Resolution, and Enforcement.

A. Oversight

1. The executive, legislative, and judicial branches of State government in each Member State shall enforce this Compact and take all actions necessary and appropriate to effectuate the Compact's purposes and intent. The provisions of this Compact and the Rules promulgated hereunder shall have standing as statutory law.

2. All courts shall take judicial notice of the Compact and the Rules in any judicial or administrative proceeding in a Member State pertaining to the subject matter of this Compact which may affect the powers, responsibilities, or actions of the Commission.

3. The Commission shall be entitled to receive service of process in any such proceeding and shall have standing to intervene in such a proceeding for all purposes. Failure to provide service of process to the Commission shall render a judgment or order void as to the Commission, this Compact, or promulgated Rules.

B. Default, Technical Assistance, and Termination

1. If the Commission determines that a Member State has defaulted in the performance of its obligations or responsibilities under this Compact or the promulgated Rules, the Commission shall:

a. Provide written notice to the defaulting State and other Member States of the nature of the default, the proposed means of curing the default and/or any other action to be taken by the Commission; and

b. Provide remedial training and specific technical assistance regarding the default.

c. If a State in default fails to cure the default, the defaulting State may be terminated from the Compact upon an affirmative vote of a majority of the Member States, and all rights, privileges, and benefits conferred by this Compact may be terminated on the effective date of termination. A cure of the default does not relieve the offending State of obligations or liabilities incurred during the period of default.

d. Termination of membership in the Compact shall be imposed only after all other means of securing compliance have been exhausted. Notice of intent to suspend or terminate shall be given by the Commission to the governor, the majority and minority leaders of the defaulting State's legislature, and each of the Member States.

e. A State that has been terminated is responsible for all assessments, obligations, and liabilities incurred through the effective date of termination, including obligations that extend beyond the effective date of termination.

f. The Commission shall not bear any costs related to a State that is found to be in default or that has been terminated from the Compact, unless agreed upon in writing between the Commission and the defaulting State.

g. The defaulting State may appeal the action of the Commission by petitioning the U.S. District Court for the District of Columbia or the federal district where the Commission has its principal offices. The prevailing member shall be awarded all costs of such litigation, including reasonable attorney's fees.

H. Dispute Resolution

1. Upon request by a Member State, the Commission shall attempt to resolve disputes related to the Compact that arise among Member States and between member and non-Member States.

2. The Commission shall promulgate a Rule providing for both mediation and binding dispute resolution for disputes as appropriate.

I. Enforcement

1. The Commission, in the reasonable exercise of its discretion, shall enforce the provisions and Rules of this Compact.

2. By majority vote, the Commission may initiate legal action in the United States District Court for the District of Columbia or the federal district where the Commission has its principal offices against a Member State in default to enforce compliance with the provisions of the Compact and its promulgated Rules and bylaws. The relief sought may include both injunctive relief and damages. In the event judicial enforcement is necessary, the prevailing member shall be awarded all costs of such litigation, including reasonable attorney's fees.

3. The remedies herein shall not be the exclusive remedies of the Commission. The Commission may pursue any other remedies available under federal or State law.

Article XIII.

Date of Implementation of the Counseling Compact Commission and Associated Rules, Withdrawal, and Amendment.

A. The Compact shall come into effect on the date on which the Compact statute is enacted into law in the tenth Member State. The provisions, which become effective at that time, shall be limited to the powers granted to the Commission relating to assembly and the promulgation of Rules. Thereafter, the Commission shall meet and exercise Rulemaking powers necessary to the implementation and administration of the Compact.

B. Any State that joins the Compact subsequent to the Commission's initial adoption of the Rules shall be subject to the Rules as they exist on the date on which the Compact becomes law in that State. Any Rule that has been previously adopted by the Commission shall have the full force and effect of law on the day the Compact becomes law in that State.

C. Any Member State may withdraw from this Compact by enacting a statute repealing the same.

1. A Member State's withdrawal shall not take effect until six (6) months after enactment of the repealing statute.

2. Withdrawal shall not affect the continuing requirement of the withdrawing State's Professional Counseling Licensing Board to comply with the investigative and Adverse Action reporting requirements of this act prior to the effective date of withdrawal.

D. Nothing contained in this Compact shall be construed to invalidate or prevent any Professional Counseling licensure agreement or other cooperative arrangement between a Member State and a non-Member State that does not conflict with the provisions of this Compact.

E. This Compact may be amended by the Member States. No amendment to this Compact shall become effective and binding upon any Member State until it is enacted into the laws of all Member

States.

Article XIV.

Construction and Severability.

This Compact shall be liberally construed so as to effectuate the purposes thereof. The provisions of this Compact shall be severable and if any phrase, clause, sentence, or provision of this Compact is declared to be contrary to the constitution of any Member State or of the United States or the applicability thereof to any government, agency, person, or circumstance is held invalid, the validity of the remainder of this Compact and the applicability thereof to any government, agency, person, or circumstance shall not be affected thereby. If this Compact shall be held contrary to the constitution of any Member State, the Compact shall remain in full force and effect as to the remaining Member States and in full force and effect as to the Member State affected as to all severable matters.

Article XV.

Binding Effect of Compact and Other Laws.

A. A Licensee providing Professional Counseling services in a Remote State under the Privilege to Practice shall adhere to the laws and regulations, including scope of practice, of the Remote State.

B. Nothing herein prevents the enforcement of any other law of a Member State that is not inconsistent with the Compact.

C. Any laws in a Member State in conflict with the Compact are superseded to the extent of the conflict.

D. Any lawful actions of the Commission, including all Rules and bylaws properly promulgated by the Commission, are binding upon the Member States.

E. All permissible agreements between the Commission and the Member States are binding in accordance with their terms.

F. In the event any provision of the Compact exceeds the constitutional limits imposed on the legislature of any Member State, the provision shall be ineffective to the extent of the conflict with the constitutional provision in question in that Member State.

2. That the Board of Counseling shall promulgate regulations to implement the provisions of this act to be effective within 280 days of its enactment.

3. That the provisions of this act shall become effective on January 1, 2024.



COMMONWEALTH of VIRGINIA

David E. Brown, D.C.
Director

Department of Health Professions

Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

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TEL (804) 367- 4400
FAX (804) 527- 4475

August 30, 2022

Erin Holland
41 Fairview Circle South
Portsmouth, Virginia 23702

Dear Ms. Holland:

The Board of Counseling is in receipt of your petition for rulemaking, in which you request that the Board amend Guidance Document 115-1.4, Guidance on Technology-Assisted Counseling.

Guidance documents cannot be modified by the petition for rulemaking process under Virginia Code § 2.2-4007, which is the process by which the public can request that the Board amend regulations. Your comments on the petition for rulemaking form and Guidance Document 115-1.4 will be provided to the Board at its next meeting for consideration.

Very truly yours,

A handwritten signature in blue ink that reads 'Jaime H. Hoyle'.

Jaime Hoyle
Executive Director
Virginia Board of Counseling

cc: Erin L. Barrett
Agency Regulatory Coordinator



Petition for Rule-making

The Code of Virginia (§ 2.2-4007) and the Public Participation Guidelines of this board require a person who wishes to petition the board to develop a new regulation or amend an existing regulation to provide certain information. Within 14 days of receiving a valid petition, the board will notify the petitioner and send a notice to the Register of Regulations identifying the petitioner, the nature of the request and the plan for responding to the petition. Following publication of the petition in the Register, a 21-day comment period will begin to allow written comment on the petition. Within 90 days after the comment period, the board will issue a written decision on the petition. If the board has not met within that 90-day period, the decision will be issued no later than 14 days after it next meets.

Please provide the information requested below. (Print or Type)

Petitioner's full name (Last, First, Middle initial, Suffix,)

Holland, Erin, M

Street Address

41 Fairview Circle South

Area Code and Telephone Number

757-376-9201

City

Portsmouth

State

Virginia

Zip Code:

2 3 7 0 2

Email Address (optional)

erinholland84@gmail.com

Respond to the following questions:

1. What regulation are you petitioning the board to amend? Please state the title of the regulation and the section/sections you want the board to consider amending.

Guidance Document 115-1.4 Guidance on Technology-Assisted Counseling

2. Please summarize the substance of the change you are requesting and state the rationale or purpose for the new or amended rule. Currently, the LPC Licensure Process Handbook states on page 9 that Residency Requirements include "2,000 hours of face-to-face client contact must be documented within this 3,400 hour residency." Due to the pandemic, the Board has broadened the term in its periodic review of the regulations to state "Face-to-face" means the in-person delivery of clinical counseling services for a client or the use of visual, real-time, interactive, secured technology for delivery of such services."

I am petitioning for teleaudio to be allowed in the 2,000 hours of client contact towards clinical counseling services, while being closely monitored by the resident's supervisor on what falls under teleaudio counseling and what does not. Of course, doing such things as scheduling appointments is not considered teleaudio counseling and should not count towards Residency Requirements. However the Licensure Process is skewed towards those who are working in the traditional outpatient model, and not every Resident is doing so. Also, with COVID-19 and now Monkey Pox concerns, not everyone wants to come in person for services. Some patients cannot do teleaudio, or are more comfortable with phone sessions. What about those in rural areas with poor internet connections? Those who cannot afford internet, or the homeless who have subsidized phones with audio only, but no data? The elderly who cannot figure out televideo, but can make a phonecall? Should our residents who work with them be excluded from counting those hours?

3. State the legal authority of the board to take the action requested. In general, the legal authority for the adoption of regulations by the board is found in § 54.1-2400 of the Code of Virginia. If there is other legal authority for promulgation of a regulation, please provide that Code reference.

54.1-2400.1. To establish the qualifications for registration, certification, licensure, permit, or the issuance of a multistate licensure privilege in accordance with the applicable law which are necessary to ensure competence and integrity to engage in the regulated professions.

Signature:

Erin M Holland, LPC

Date:

8/25/2022

Virginia Department of Health Professions
Revenue and Expenditures Summary
Department 10900 - Counseling
For the Period Beginning July 1, 2021 and Ending June 30, 2022

Account Number	Account Description	Amount	Budget	Amount	
				Under/(Over)	% of Budget
4002400	Fee Revenue				
4002401	Application Fee	522,190.00	294,600.00	(227,590.00)	177.25%
4002406	License & Renewal Fee	1,644,355.00	1,563,135.00	(81,220.00)	105.20%
4002407	Dup. License Certificate Fee	5,185.00	825.00	(4,360.00)	628.48%
4002409	Board Endorsement - Out	10,580.00	1,740.00	(8,840.00)	608.05%
4002421	Monetary Penalty & Late Fees	3,470.00	13,960.00	10,490.00	24.86%
4002430	Board Changes Fee	1,980.00	-	(1,980.00)	0.00%
4002432	Misc. Fee (Bad Check Fee)	620.00	140.00	(480.00)	442.86%
	Total Fee Revenue	2,188,380.00	1,874,400.00	(313,980.00)	116.75%
4003000	Sales of Prop. & Commodities				
4003020	Misc. Sales-Dishonored Payments	430.00	-	(430.00)	0.00%
	Total Sales of Prop. & Commodities	430.00	-	(430.00)	0.00%
	Total Revenue	2,188,810.00	1,874,400.00	(314,410.00)	116.77%
5011110	Employer Retirement Contrib.	19,774.97	24,577.00	4,802.03	80.46%
5011120	Fed Old-Age Ins- Sal St Emp	16,826.24	22,465.00	5,638.76	74.90%
5011140	Group Insurance	2,172.35	2,278.00	105.65	95.36%
5011150	Medical/Hospitalization Ins.	24,073.00	39,324.00	15,251.00	61.22%
5011160	Retiree Medical/Hospitalizatn	1,815.51	1,904.00	88.49	95.35%
5011170	Long term Disability Ins	988.91	1,037.00	48.09	95.36%
	Total Employee Benefits	65,650.98	91,585.00	25,934.02	71.68%
5011200	Salaries				
5011230	Salaries, Classified	162,445.04	169,962.00	7,516.96	95.58%
5011250	Salaries, Overtime	20,302.60	-	(20,302.60)	0.00%
	Total Salaries	182,747.64	169,962.00	(12,785.64)	107.52%
5011300	Special Payments				
5011310	Bonuses and Incentives	115.40	-	(115.40)	0.00%
5011340	Specified Per Diem Payment	2,400.00	2,500.00	100.00	96.00%
5011380	Deferred Compnstn Match Pmts	288.00	1,728.00	1,440.00	16.67%
	Total Special Payments	2,803.40	4,228.00	1,424.60	66.31%
5011400	Wages				
5011410	Wages, General	41,133.90	123,695.00	82,561.10	33.25%
	Total Wages	41,133.90	123,695.00	82,561.10	33.25%
5011600	Terminatn Personal Svce Costs				
5011660	Defined Contribution Match - Hy	3,665.90	-	(3,665.90)	0.00%
	Total Terminatn Personal Svce Costs	3,665.90	-	(3,665.90)	0.00%
5011930	Turnover/Vacancy Benefits				
	Total Personal Services	296,001.82	389,470.00	93,468.18	76.00%
5012000	Contractual Svs				
5012100	Communication Services				
5012110	Express Services	-	295.00	295.00	0.00%
5012120	Outbound Freight Services	6.51	-	(6.51)	0.00%
5012130	Messenger Services	18.12	-	(18.12)	0.00%
5012140	Postal Services	12,503.93	12,000.00	(503.93)	104.20%

5012150 Printing Services	-	120.00	120.00	0.00%
5012160 Telecommunications Svcs (VITA)	753.36	900.00	146.64	83.71%
5012190 Inbound Freight Services	22.52	-	(22.52)	0.00%
Total Communication Services	13,304.44	13,315.00	10.56	99.92%
5012200 Employee Development Services				
5012210 Organization Memberships	1,400.00	1,400.00	-	100.00%
5012240 Employee Trainng/Workshop/Conf	500.00	-	(500.00)	0.00%
Total Employee Development Services	1,900.00	1,400.00	(500.00)	135.71%
5012300 Health Services				
5012360 X-ray and Laboratory Services	189.00	140.00	(49.00)	135.00%
Total Health Services	189.00	140.00	(49.00)	135.00%
5012400 Mgmnt and Informational Svcs	-			
5012420 Fiscal Services	21,177.08	18,000.00	(3,177.08)	117.65%
5012440 Management Services	380.50	134.00	(246.50)	283.96%
5012460 Public Infrmtnl & Relatn Svcs	367.73	5.00	(362.73)	7354.60%
5012470 Legal Services	194.75	475.00	280.25	41.00%
Total Mgmnt and Informational Svcs	22,120.06	18,614.00	(3,506.06)	118.84%
5012500 Repair and Maintenance Svcs				
5012510 Custodial Services	740.90	-	(740.90)	0.00%
5012530 Equipment Repair & Maint Srvc	18.36	-	(18.36)	0.00%
5012560 Mechanical Repair & Maint Srvc	-	34.00	34.00	0.00%
Total Repair and Maintenance Svcs	759.26	34.00	(725.26)	2233.12%
5012600 Support Services				
5012640 Food & Dietary Services	1,461.01	1,075.00	(386.01)	135.91%
5012660 Manual Labor Services	320.27	1,170.00	849.73	27.37%
5012670 Production Services	3,235.24	5,380.00	2,144.76	60.13%
5012680 Skilled Services	26,253.67	16,764.00	(9,489.67)	156.61%
Total Support Services	31,270.19	24,389.00	(6,881.19)	128.21%
5012800 Transportation Services				
5012820 Travel, Personal Vehicle	5,727.22	4,979.00	(748.22)	115.03%
5012830 Travel, Public Carriers	1,877.39	-	(1,877.39)	0.00%
5012850 Travel, Subsistence & Lodging	2,472.98	1,950.00	(522.98)	126.82%
5012880 Trvl, Meal Reimb- Not Rprtble	1,531.25	988.00	(543.25)	154.98%
Total Transportation Services	11,608.84	7,917.00	(3,691.84)	146.63%
Total Contractual Svs	81,151.79	65,809.00	(15,342.79)	123.31%
5013000 Supplies And Materials				
5013100 Administrative Supplies				
5013120 Office Supplies	3,359.04	597.00	(2,762.04)	562.65%
Total Administrative Supplies	3,359.04	597.00	(2,762.04)	562.65%
5013400 Medical and Laboratory Supp.				
5013420 Medical and Dental Supplies	2.95	-	(2.95)	0.00%
Total Medical and Laboratory Supp.	2.95	-	(2.95)	0.00%
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	3,361.99	780.00	(2,581.99)	431.02%
5015000 Continuous Charges				
5015100 Insurance-Fixed Assets				
5015160 Property Insurance	90.55	46.00	(44.55)	196.85%
Total Insurance-Fixed Assets	90.55	46.00	(44.55)	196.85%
5015300 Operating Lease Payments				

5015340 Equipment Rentals	593.81	540.00	(53.81)	109.96%
5015350 Building Rentals	88.80	-	(88.80)	0.00%
5015360 Land Rentals	-	60.00	60.00	0.00%
5015390 Building Rentals - Non State	16,779.42	16,684.00	(95.42)	100.57%
Total Operating Lease Payments	17,462.03	17,284.00	(178.03)	101.03%
5015500 Insurance-Operations				
5015510 General Liability Insurance	567.20	170.00	(397.20)	333.65%
5015540 Surety Bonds	19.18	11.00	(8.18)	174.36%
Total Insurance-Operations	586.38	181.00	(405.38)	323.97%
Total Continuous Charges	18,138.96	17,511.00	(627.96)	103.59%
5022000 Equipment				
5022100 Computer Hrdware & Sftware				
5022170 Other Computer Equipment	107.03	-	(107.03)	0.00%
Total Computer Hrdware & Sftware	107.03	-	(107.03)	0.00%
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%
5022620 Office Furniture	1,894.98	-	(1,894.98)	0.00%
Total Office Equipment	1,894.98	42.00	(1,852.98)	4511.86%
Total Equipment	2,002.01	119.00	(1,883.01)	1682.36%
Total Expenditures	400,656.57	473,689.00	73,032.43	84.58%
Allocated Expenditures				
20100 Behavioral Science Exec	176,779.92	191,282.90	14,502.97	92.42%
30100 Data Center	173,782.91	155,040.07	(18,742.84)	112.09%
30200 Human Resources	28,376.31	38,734.35	10,358.04	73.26%
30300 Finance	139,792.32	138,197.53	(1,594.79)	101.15%
30400 Director's Office	48,498.06	52,692.70	4,194.64	92.04%
30500 Enforcement	434,033.94	484,299.06	50,265.12	89.62%
30600 Administrative Proceedings	129,866.94	65,079.76	(64,787.17)	199.55%
30700 Impaired Practitioners	658.49	453.73	(204.76)	145.13%
30800 Attorney General	6,621.36	2,487.05	(4,134.31)	266.23%
30900 Board of Health Professions	5,980.50	6,621.13	640.63	90.32%
31100 Maintenance and Repairs	165.41	2,194.18	2,028.77	7.54%
31300 Emp. Recognition Program	1,978.50	3,511.47	1,532.98	56.34%
31400 Conference Center	2,941.82	5,526.69	2,584.87	53.23%
31500 Pgm Devlpmnt & Implmentn	15,444.90	23,400.94	7,956.04	66.00%
31600 Healthcare Work Force	28,862.71	38,050.18	9,187.48	75.85%
Total Allocated Expenditures	1,193,784.09	1,207,571.74	13,787.65	98.86%
Net Revenue in Excess (Shortfall) of Expenditures	594,369.34	193,139.26	(401,230.08)	307.74%

Virginia Department of Health Professions
 Revenue and Expenditures Summary
 Department 10900 - Counseling
 For the Period Beginning July 1, 2021 and Ending June 30, 2022

Account Number	Account Description	July	August	September	October	November	December	January	February	March	April	May	June	Total
4002400	Fee Revenue													
4002401	Application Fee	47,480.00	49,090.00	40,245.00	39,100.00	36,330.00	42,105.00	47,315.00	43,805.00	41,895.00	40,760.00	45,220.00	48,845.00	522,190.00
4002406	License & Renewal Fee	58,420.00	14,595.00	8,140.00	7,840.00	7,310.00	19,010.00	31,630.00	10,115.00	7,430.00	8,800.00	500,995.00	970,070.00	1,644,355.00
4002407	Dup. License Certificate Fee	640.00	350.00	365.00	340.00	140.00	160.00	540.00	270.00	260.00	240.00	660.00	1,220.00	5,185.00
4002409	Board Endorsement - Out	925.00	925.00	690.00	1,285.00	895.00	715.00	480.00	1,050.00	900.00	1,220.00	910.00	585.00	10,580.00
4002421	Monetary Penalty & Late Fees	65.00	70.00	50.00	20.00	110.00	80.00	40.00	1,485.00	575.00	445.00	280.00	250.00	3,470.00
4002430	Board Changes Fee	180.00	90.00	240.00	150.00	330.00	120.00	30.00	150.00	240.00	150.00	90.00	210.00	1,980.00
4002432	Misc. Fee (Bad Check Fee)	100.00	69.82	30.18	85.00	-	50.00	-	-	-	100.00	50.00	135.00	620.00
	Total Fee Revenue	107,810.00	65,189.82	49,760.18	48,820.00	45,115.00	62,240.00	80,035.00	56,875.00	51,300.00	51,715.00	548,205.00	1,021,315.00	2,188,380.00
4003000	Sales of Prop. & Commodities													
4003020	Misc. Sales-Dishonored Payments	142.41	72.59	-	165.00	-	50.00	-	-	-	-	-	-	430.00
	Total Sales of Prop. & Commodities	142.41	72.59	-	165.00	-	50.00	-	-	-	-	-	-	430.00
	Total Revenue	107,952.41	65,262.41	49,760.18	48,985.00	45,115.00	62,290.00	80,035.00	56,875.00	51,300.00	51,715.00	548,205.00	1,021,315.00	2,188,810.00
5011000	Personal Services													
5011100	Employee Benefits													
5011110	Employer Retirement Contrib.	2,576.91	1,730.68	1,730.68	1,730.68	1,730.68	1,730.68	1,730.68	1,730.68	1,730.68	1,487.16	1,243.64	621.82	10,774.97
5011120	Fed Old-Age Ins- Sal St Emp	2,487.59	1,700.86	1,451.98	1,404.69	1,623.07	1,693.07	1,486.13	1,362.35	1,293.52	997.60	912.66	512.72	10,826.24
5011140	Group Insurance	280.17	189.80	189.80	189.80	189.80	189.80	189.80	189.80	189.80	164.62	139.44	69.72	2,172.35
5011150	Medical/Hospitalization Ins.	3,157.50	2,127.00	2,127.00	2,127.00	2,127.00	2,127.00	2,127.00	2,127.00	2,127.00	1,772.50	1,418.00	709.00	24,073.00
5011160	Retiree Medical/Hospitalization	234.16	158.62	158.62	158.62	158.62	158.62	158.62	158.62	158.62	137.58	116.54	58.27	1,815.51
5011170	Long term Disability Ins	127.55	86.40	86.40	86.40	86.40	86.40	86.40	86.40	86.40	74.94	63.48	31.74	988.91
	Total Employee Benefits	8,863.88	5,993.36	5,744.48	5,697.19	5,915.57	5,885.57	5,778.63	5,654.85	5,586.02	4,634.40	3,893.76	2,003.27	65,650.98
5011200	Salaries													
5011230	Salaries, Classified	21,245.13	14,163.42	14,163.42	14,163.42	14,163.42	14,163.42	14,163.42	14,163.42	14,163.42	12,284.42	10,405.42	5,202.71	162,445.04
5011250	Salaries, Overtime	4,713.86	3,303.87	815.58	1,885.64	2,328.40	1,827.04	2,365.59	1,200.20	1,862.42	-	-	-	20,302.60
	Total Salaries	25,959.99	17,467.29	14,979.00	16,049.06	16,491.82	15,990.46	16,529.01	15,363.62	16,025.84	12,284.42	10,405.42	5,202.71	182,747.64
5011310	Bonuses and Incentives	-	-	-	-	-	-	-	-	-	-	114.40	-	114.40
5011340	Specified Per Diem Payment	-	250.00	500.00	300.00	150.00	250.00	-	-	450.00	150.00	250.00	100.00	2,400.00
5011380	Deferred Compnstn Match Pmts	36.00	24.00	24.00	24.00	24.00	24.00	24.00	24.00	24.00	24.00	24.00	12.00	288.00
	Total Special Payments	36.00	274.00	524.00	324.00	174.00	274.00	24.00	24.00	474.00	174.00	389.40	112.00	2,803.40
5011400	Wages													
5011410	Wages, General	7,128.93	5,129.08	4,363.51	2,676.05	5,087.48	5,131.93	3,259.88	2,807.70	1,245.13	1,053.03	1,658.88	1,592.30	41,133.90
	Total Wages	7,128.93	5,129.08	4,363.51	2,676.05	5,087.48	5,131.93	3,259.88	2,807.70	1,245.13	1,053.03	1,658.88	1,592.30	41,133.90
5011600	Terminatn Personal Svce Costs													
5011660	Defined Contribution Match - Hy	446.38	317.36	317.36	317.36	317.36	317.36	317.36	317.36	317.36	289.17	260.98	130.49	3,665.90
	Total Terminatn Personal Svce Co	446.38	317.36	317.36	317.36	317.36	317.36	317.36	317.36	317.36	289.17	260.98	130.49	3,665.90
	Total Personal Services	42,434.18	29,181.09	25,928.35	25,063.66	27,986.23	27,599.32	25,908.88	24,167.53	23,648.35	18,435.02	16,608.44	9,040.77	296,001.82
5012000	Contractual Svcs													
5012100	Communication Services													
5012120	Outbound Freight Services	-	-	-	-	-	-	-	-	-	-	-	6.51	6.51
5012130	Messenger Services	-	-	-	-	-	-	-	-	-	-	-	18.12	18.12
5012140	Postal Services	664.20	1,018.85	425.78	1,847.14	1,020.10	791.82	1,486.86	1,207.55	610.11	1,188.70	1,326.83	915.99	12,503.93
5012160	Telecommunications Svcs (VITA)	61.61	59.29	67.56	65.07	58.82	48.62	55.74	58.19	63.56	79.17	86.99	48.74	753.36
5012190	Inbound Freight Services	15.00	4.75	-	1.19	-	1.58	-	-	-	-	-	-	22.52
	Total Communication Services	740.81	1,082.89	493.34	1,912.21	1,080.11	840.44	1,544.18	1,265.74	673.67	1,267.87	1,431.94	971.24	13,304.44
5012200	Employee Development Services													
5012210	Organization Memberships	900.00	-	-	-	-	-	500.00	-	-	-	-	-	1,400.00
5012240	Employee Training/Workshop/Conf	-	-	-	-	-	-	-	500.00	-	-	-	-	500.00
	Total Employee Development Sen	900.00	-	-	-	-	-	500.00	500.00	-	-	-	-	1,900.00
5012300	Health Services													
5012360	X-ray and Laboratory Services	-	-	-	-	-	189.00	-	-	-	-	-	-	189.00
	Total Health Services	-	-	-	-	-	189.00	-	-	-	-	-	-	189.00
5012400	Mgmt and Informational Svcs													
5012420	Fiscal Services	15,441.82	1,444.43	303.94	163.24	147.10	117.32	357.44	646.11	257.62	722.61	642.01	933.44	21,177.08
5012440	Management Services	248.71	-	62.48	-	-	54.20	4.22	-	-	-	10.89	-	380.50
5012460	Public Infrmtl & Relain Svcs	-	63.09	-	-	-	-	-	-	25.84	-	-	279.00	367.73
5012470	Legal Services	-	-	-	94.75	-	-	-	-	-	-	-	100.00	194.75
	Total Mgmt and Informational Svcs	15,690.53	1,507.52	366.42	257.99	147.10	171.52	361.66	646.11	283.26	722.61	652.90	1,312.44	22,120.06
5012500	Repair and Maintenance Svcs													
5012510	Custodial Services	61.44	61.44	-	6.32	122.89	120.17	61.44	61.44	61.44	61.44	61.44	61.44	740.90
5012530	Equipment Repair & Maint Svcs	-	4.59	-	-	-	4.59	-	4.59	-	-	4.59	-	18.36
	Total Repair and Maintenance Svcs	61.44	66.03	-	6.32	122.89	124.76	61.44	66.03	61.44	61.44	66.03	61.44	759.26
5012600	Support Services													
5012640	Food & Dietary Services	-	-	237.96	176.35	267.07	66.25	-	43.84	436.54	-	233.00	-	1,461.01
5012660	Manual Labor Services	-	33.51	109.75	9.68	-	1.61	64.45	-	10.15	91.12	-	-	320.27
5012670	Production Services	-	370.38	726.30	119.87	22.20	36.00	128.50	533.51	429.15	203.14	637.49	28.70	3,235.24
5012680	Skilled Services	1,449.43	1,288.36	1,393.34	1,151.96	2,098.20	2,336.68	2,023.20	2,864.09	3,089.09	2,821.54	2,112.57	3,625.21	26,253.67
	Total Support Services	1,449.43	1,692.25	2,467.35	1,457.86	2,387.47	2,438.93	2,153.31	3,505.89	3,954.78	3,034.83	3,074.18	3,653.91	31,270.19
5012800	Transportation Services													
5012820	Travel, Personal Vehicle	-	145.04	767.20	870.80	337.12	708.96	-	-	1,395.81	449.29	664.56	388.44	5,727.22
5012830	Travel, Public Carriers	-	-	-	-	-	-	-	-	-	1,877.39	-	-	1,877.39
5012850	Travel, Subsistence & Lodging	-	-	435.38	218.21	218.21	218.88	-	-	616.22	328.32	437.76	-	2,472.98
5012880	Trvl, Meal Reimb- Not Rptible	-	-	249.00	144.75	135.00	132.50	-	-	402.50	200.00	267.50	-	1,531.25
	Total Transportation Services	-	145.04	1,451.58	1,233.76	690.33	1,060.34	-	-	2,414.53	2,855.00	1,369.82	388.44	11,608.84
	Total Contractual Svcs	18,842.21	4,493.73	4,778.69	4,868.14	4,427.90	4,824.99	4,620.59	5,983.77	7,387.68	7,941.75	6,594.87	6,387.47	81,151.79
5013000	Supplies And Materials													
5013100	Administrative Supplies													
5013120	Office Supplies	186.85	202.9											

5015470	Private Vendor Service Charges:	4.07	4.07	(8.14)	-	-	-	-	-	(7.97)	7.97	-	-	
	Total Service Charges	4.07	4.07	(8.14)	-	-	-	-	-	(7.97)	7.97	-	-	
5015500	Insurance-Operations													
5015510	General Liability Insurance	567.20	-	-	-	-	-	-	-	-	-	-	567.20	
5015540	Surety Bonds	19.18	-	-	-	-	-	-	-	-	-	-	19.18	
	Total Insurance-Operations	586.38	-	-	-	-	-	-	-	-	-	-	586.38	
	Total Continuous Charges	1,720.77	1,653.93	1,389.11	1,414.86	1,621.16	1,445.68	1,459.38	1,482.50	1,384.25	1,439.67	1,656.31	1,471.34	18,138.96
5022000	Equipment													
5022170	Other Computer Equipment	16.21	-	-	-	-	58.02	-	-	-	-	9.26	23.54	107.03
	Total Computer Hardware & Software	16.21	-	-	-	-	58.02	-	-	-	-	9.26	23.54	107.03
5022620	Office Furniture	-	-	-	-	-	-	-	-	-	-	-	1,894.98	1,894.98
	Total Office Equipment	-	-	-	-	-	-	-	-	-	-	-	1,894.98	1,894.98
	Total Equipment	16.21	-	-	-	-	58.02	-	-	-	-	9.26	1,918.52	2,002.01
5023000	Plant and Improvements													
5023200	Construction of Plant and Improvements													
5023280	Construction, Buildings Improvements	-	-	-	-	-	-	-	-	-	-	-	-	-
	Total Construction of Plant and Improvements	-	-	-	-	-	-	-	-	-	-	-	-	-
	Total Plant and Improvements	-	-	-	-	-	-	-	-	-	-	-	-	-
	Total Expenditures	63,200.22	35,531.70	32,496.20	31,757.31	34,308.59	33,991.12	32,102.16	32,026.01	32,816.69	28,251.31	25,199.71	18,975.55	400,656.57
	Allocated Expenditures													
20100	Behavioral Science Executive Director	19,910.07	13,957.81	13,856.74	14,519.34	16,040.28	14,652.64	14,597.70	13,622.07	13,747.55	15,611.31	17,161.80	9,102.62	176,779.92
20200	OptVet-Med/ASLP Executive Director	-	-	-	-	-	-	-	-	-	-	-	-	-
20400	Nursing / Nurse Aide	-	-	-	-	-	-	-	-	-	-	-	-	-
20800	Funeral/LTCAPT Executive Director	-	-	-	-	-	-	-	-	-	-	-	-	-
30100	Technology and Business Services	15,360.37	12,731.65	11,942.08	8,726.56	18,021.68	19,268.24	18,892.40	8,176.45	12,933.97	13,334.66	22,429.73	11,965.11	173,782.91
30200	Human Resources	2,917.45	278.61	257.77	2,031.18	311.10	153.77	359.54	11,612.16	4,533.46	1,502.37	1,533.11	2,885.80	28,376.31
30300	Finance	16,780.93	12,931.67	12,909.88	11,663.78	8,588.62	16,775.55	10,969.20	11,342.05	7,514.76	10,850.00	12,759.58	6,706.30	139,792.32
30400	Director's Office	6,233.68	4,364.45	4,271.19	4,322.46	4,047.18	3,703.40	4,546.90	4,534.37	3,786.56	4,062.00	3,125.00	1,500.86	48,498.06
30500	Enforcement	45,551.73	26,368.31	26,775.80	29,654.23	33,285.74	37,624.38	43,059.87	45,298.33	44,663.04	40,740.12	42,046.95	18,965.44	434,033.94
30600	Administrative Proceedings	25,842.68	12,550.00	12,674.31	8,084.43	3,735.53	13,901.93	15,653.69	5,126.24	5,578.01	13,136.31	10,873.94	2,709.86	129,866.94
30700	Health Practitioners' Monitoring Program	2.08	3.61	2.96	6.55	110.03	93.95	71.00	64.10	74.90	104.97	66.93	57.41	668.49
30800	Attorney General	627.43	-	-	2,832.81	0.01	-	1,421.73	-	-	1,739.38	-	-	6,621.36
30900	Board of Health Professions	675.65	1,592.33	409.78	930.86	635.44	1,086.03	465.89	(1,192.49)	20.49	627.31	469.87	259.32	5,980.50
31000	SRTA	-	-	-	-	-	-	-	-	-	-	-	-	-
31100	Maintenance and Repairs	-	-	-	-	-	-	-	-	-	-	130.15	35.27	165.41
31300	Employee Recognition Program	43.79	293.12	8.07	51.54	-	542.51	4.00	5.42	2.04	187.45	730.79	109.76	1,978.50
31400	Conference Center	21.10	211.35	125.61	19.79	13.10	13.01	13.00	25.59	(5.09)	4,663.24	(2,172.58)	13.71	2,941.82
31500	Program Development and Implementation	1,864.09	1,431.32	1,345.94	1,268.11	798.12	919.91	1,030.37	912.47	1,485.54	1,743.29	1,510.71	1,135.05	15,444.90
31600	Healthcare Workforce	2,800.11	1,996.77	1,949.54	3,318.57	1,997.53	1,978.19	1,969.74	4,074.71	2,662.06	2,439.75	2,325.51	1,350.22	28,862.71
31800	CBC (Criminal Background Check Unit)	-	-	-	-	-	-	-	-	-	-	-	-	-
31900	31900 Not in Use	-	-	-	-	-	-	-	-	-	-	-	-	-
32000	32000 Not in Use	-	-	-	-	-	-	-	-	-	-	-	-	-
32100	32100 Not in Use	-	-	-	-	-	-	-	-	-	-	-	-	-
98700	Cash Transfers	-	-	-	-	-	-	-	-	-	-	-	-	-
	Total Allocated Expenditures	138,631.16	88,710.99	86,529.68	87,430.23	87,584.36	110,713.51	113,055.01	103,601.48	96,997.28	110,742.16	112,991.49	56,796.73	1,193,784.09
	Net Revenue in Excess (Shortfall) of Expenditures	\$ (93,878.97)	\$ (58,980.28)	\$ (69,265.70)	\$ (70,202.54)	\$ (76,777.95)	\$ (82,414.63)	\$ (65,122.17)	\$ (78,752.49)	\$ (78,513.97)	\$ (87,278.47)	\$ 410,013.80	\$ 945,542.72	\$ 594,369.34

DHP
Board Cash Balance Report

	109 - Counseling
Cash Balance as of June 30, 2021	\$ 2,528,753
YTD FY 2022 Revenue	2,188,810
Less: YTD FY 2022 Direct and Allocated Expenditures	<u>1,594,441</u>
Cash Balance as of June 30, 2022	<u><u>\$ 3,123,122</u></u>



LICENSING REPORT

Satisfaction Survey Results	
2023 2 nd Quarter (October 1 – December 31)	89.7%

Totals as of April 20, 2023*

Current Active Licenses	
Certified Substance Abuse Counselor	1,792
CSAC Supervisee	2,318
Substance Abuse Counseling Assistant	275
Licensed Marriage and Family Therapist	1,047
Marriage & Family Therapist Resident	156
Licensed Professional Counselor	8,688
Resident in Counseling	2,955
Substance Abuse Treatment Practitioner	430
Substance Abuse Treatment Residents	15
Rehabilitation Provider	144
Qualified Mental Health Prof-Adult	6,909
Qualified Mental Health Prof-Child	4,786
Trainee for Qualified Mental Health Prof	8,760
Registered Peer Recovery Specialist	581
Total	38,856*

*Unofficial numbers (for informational purposes only)

**Licenses, Certifications and Registrations Issued**

License Type	December 2022	January 2023	February 2023	March 2023	April 2023 (partial)*
Certified Substance Abuse Counselor	4	4	11	7	9
CSAC Supervisee	24	51	39	46	9
Certified Substance Abuse Counseling Assistant	1	7	3	4	3
Licensed Marriage and Family Therapist	15	13	6	7	6
Marriage & Family Therapist Resident	5	3	5	4	0
Pre-Education Review for LMFT	0	0	0	0	0
Licensed Professional Counselor	102	86	87	111	67
Resident in Counseling	55	92	121	77	33
Pre-Education Review for LPC	4	7	9	12	9
Substance Abuse Treatment Practitioner	2	4	9	8	2
Substance Abuse Treatment Residents	0	2	0	2	1
Pre-Education Review for LSATP	0	0	0	1	0
Rehabilitation Provider	0	0	0	1	0
Qualified Mental Health Prof-Adult	52	61	65	54	43
Qualified Mental Health Prof-Child	37	44	49	42	33
Trainee for Qualified Mental Health Prof	102	145	165	216	122
Registered Peer Recovery Specialist	22	23	21	22	10
Total	425	542	590	614	347

*Unofficial numbers (for informational purposes only)



Licenses, Certifications and Registration Applications Received

Applications Received	December 2022	January 2023	February 2023	March 2023	April 2023 (partial)*
Certified Substance Abuse Counselor	12	12	8	14	8
CSAC Supervisee	23	44	37	47	13
Certified Substance Abuse Counseling Assistant	5	4	1	6	3
Licensed Marriage and Family Therapist	9	11	10	8	4
Marriage & Family Therapist Resident	1	5	0	5	2
Pre-Education Review for LMFT	0	0	0	0	0
Licensed Professional Counselor	74	85	84	112	46
Resident in Counseling	93	97	71	74	30
Pre-Education Review for LPC	4	6	10	13	8
Substance Abuse Treatment Practitioner	5	7	6	9	6
Substance Abuse Treatment Residents	1	0	2	3	0
Pre-Education Review for LSATP	0	0	0	2	0
Rehabilitation Provider	0	0	1	1	0
Qualified Mental Health Prof-Adult	73	90	85	104	56
Qualified Mental Health Prof-Child	59	83	58	63	34
Trainee for Qualified Mental Health Prof	143	202	189	205	107
Registered Peer Recovery Specialist	22	31	19	29	11
Total	524	677	581	695	328

*Unofficial numbers (for informational purposes only)



Additional Information:

- **Board of Counseling Staffing Information:**

- The Board currently has five full-time and one part-time staff members to answer phone calls, emails and to process applications across all license, certification and registration types.
 - Licensing Staff:
 - Brenda Maida – Licensing Program Manager (Full-Time)
 - Victoria Cunningham – Licensing Specialist (Full-Time)
 - Dalyce Logan – Licensing Specialist (Full-Time)
 - Maya Weeks – Licensing Specialist (Full -Time)
 - QMHP Staff:
 - Sandie Cotman – Licensing Program Manager (Full-Time)
 - Shannon Brogan – Licensing Specialists (Full-Time)
 - Sarah Bryant - Licensing Administration Assistant (Part-Time)

- **New Technology**

- BOT technology sending standardized emails.
- Ability for applicants to upload documents during the application process.

Discipline Reports

JANUARY 1, 2023 - APRIL 14, 2023

NEW CASES RECEIVED BY BOARD JANUARY 1, 2023 - APRIL 14, 2023
128

TOTAL OPEN INVESTIGATIONS (ENFORCEMENT)
107

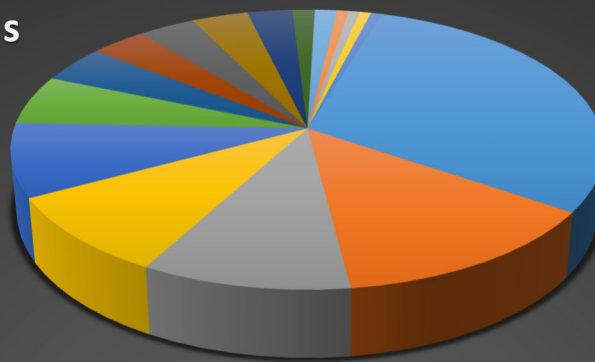
OPEN CASE STAGES as of APRIL 14, 2023	
Probable Cause Review	63
Scheduled for Informal Conferences	23
Scheduled for Formal Hearings	4
Other (pending CCA, PHCO, hold, etc.)	8
Cases with APD for processing (IFC, FH, Consent Order)	8
TOTAL CASES AT BOARD LEVEL	106

UPCOMING CONFERENCES AND HEARINGS	
Informal Conferences	<p>Conferences Held: January 27, 2023 (Special Conference Committee) February 28, 2023 (Agency Subordinate) March 31, 2023 (Special Conference Committee) April 12, 2023 (Agency Subordinate)</p> <p>Scheduled Conferences: May 19, 2023 (Special Conference Committee) June 7, 2023 (Agency Subordinate) August 25, 2023 (Special Conference Committee) September 13, 2023 (Agency Subordinate)</p>
Formal Hearings	<p>Hearings Held: n/a</p> <p>Scheduled Hearings: May 5, 2023 July 21, 2023 October 13, 2023</p>

CASES CLOSED JANUARY 1, 2023 - APRIL 14, 2023	
Closed – no violation	110
Closed – undetermined	6
Closed – violation	18
Credentials/Reinstatement – Denied	6
Credentials/Reinstatement – Approved	1
TOTAL CASES CLOSED	141

AVERAGE CASE PROCESSING TIMES (counted on closed cases)	
Average time for case closures	193
Avg. time in Enforcement (investigations)	110
Avg. time in APD (IFC/FH preparation)	63
Avg. time in Board (includes hearings, reviews, etc).	80

Closed Case Categories



- No jurisdiction (42)
- Diagnosis/Treatment (19)
2 violations
(2-LPC)
- Business Practice Issues (14)
- Inappropriate Relationship (13)
7 violations
(3-LPC, 1-RIC, 1-SA Sup., 2-QMHP-T)
- Inability to Safely Practice (12)
1 violation
(1-RPRS)
- Eligibility (8)
6 denied
(2-LPC, 5-RIC)
- Abuse/Abandonment/Neglect (6)
1 violation
(1-LPC)
- CE Noncompliance (5)
4 violations
(2-LPC, 2-QMHP-A, 1-QMHP-C)
- Fraud, patient care (5)
- Scope of Practice (5)
- Confidentiality Breach (4)
- Criminal Activity (2)
1 violation
(1-LPC)
- Fraud, non-patient care (2)
- Compliance with Board Order (1)
1 violation
(1-CSAC-A)
- Reinstatement (1)
1 approved
(1-RIC)
- Records Release (1)
- Unlicensed Activity (1)
1 violation
(1-Applicant for RIC and LPC)