

**BOARD OF COUNSELING  
REGULATORY COMMITTEE MEETING  
Thursday, November 2, 2017– 1:00 p.m.  
Second Floor – Perimeter Center, Board Room 1**

**1:00 p.m. Call to Order – Johnston Brendel, Ed.D, LPC, LMFT, Chairperson**

**Ordering of the Agenda**

**Approval of Minutes\***

**Public Comment**

**Old Business**

- **Petition for Rulemaking - doctoral internship and practicum hours**
- **Review definitions of required courses**
- **Foreign degree discussion**

**New Business**

- **Discussion on QMHP**
  - **Degrees approved as human services and related fields**
  - **Variances**
  - **Other topics**
- **Discussion on draft joint guidance document on assessment titles and signatures**
- **Affirmative criminal conviction reports**
- **CSAC endorsement requirements**
- **CSAC-A supervisor requirements**
- **Supervisor requirements and standards of practice**
- **Periodic review discussion**
- **Next Regulatory meetings**

**4:00 p.m. Adjourn**

# Approval of Minutes

## July 21, 2017

**DRAFT**  
**VIRGINIA BOARD OF COUNSELING**  
**REGULATORY COMMITTEE MEETING**  
**Thursday, May 18, 2017**

The Regulatory Committee of the Virginia Board of Counseling ("Board") convened at 1:09 p.m. on Thursday, May 18, 2017 at the Department of Health Professions, 9960 Mayland Drive, Richmond, Virginia. Dr. Charles Gressard called the meeting to order.

**COMMITTEE CHAIRPERSON:** Charles Gressard, Ph.D., LPC, LMFT, LSATP, Chairperson

**COMMITTEE MEMBERS PRESENT:** Johnston Brendel, Ed.D., LPC, LMFT  
Kevin Doyle, Ed.D., LPC, LSATP  
Danielle Hunt, LPC  
Vivian Sanchez-Jones, Citizen Member

**COMMITTEE MEMBERS ABSENT:** Cinda Caiella, LMFT

**STAFF PRESENT:** Tracey Arrington-Edmonds, Licensing Specialist  
Christy Evans, Discipline Case Specialist  
Jaime Hoyle, Esq., Executive Director  
Jennifer Lang, Deputy Executive Director  
Charlotte Lenart, Licensing Manager  
Elaine Yeatts, Senior Policy Analyst

**ORDERING OF THE AGENDA:**

Ms. Yeatts requested that she be able to provide an update on the Council for Accreditation of Counseling & Related Educational Programs (CACREP) under old business. A motion was made to approved the revised agenda; it was seconded and passed with all in favor.

**APPROVAL OF MINUTES:**

A motion was made by Ms. Hunt to approve the minutes of the January 26, 2017 meeting; it was seconded by Dr. Doyle and passed with all in favor.

**PUBLIC COMMENT:**

None (no public attendees).

**DISCUSSION:**

**I. Old Business:**

- **CACREP Update:** 18VAC 115-20 Regulations Governing the Practice of Professional Counseling (LPC) requirement for CACREP accreditation for educational programs (action 4259) was approved by the Governor's Office. Any amendments will be discussed at the next scheduled meeting following the May 15, 2017 through July 14, 2017 public comment period.

- **Adoption of Proposed Amendments for the Certification of Substance Abuse Counselors (CSAC) & Certified Substance Abuse Counselor Assistants (CSAC-A) Regulations Standards of Practice:** The Committee members approved the Adoption of Proposed Amendments for the CSAC & CSAC-A Regulations Standards of Practice as presented.

II. **New Business:**

- **Discussion of the Licensed Substance Abuse Treatment Practitioners (LSATP) endorsement requirements:** Dr. Doyle moved to amend section 18VAC115-60-50 of the Regulations Governing Licensed Substance Abuse Treatment Practitioners and to delete Regulations 18VAC115-60-50(6) which requires official transcript documenting the applicant's completion of the education requirements prescribed in 18VAC115-60-60 and 18VAC115-60-70.
- **Foreign degree discussion:** The Committee Members agreed to discuss foreign degree requirements at the next scheduled meeting.
- **Review definition of required courses:** Staff will email Committee Members a list of definitions to review and to be discussed at the next scheduled meeting.
- **Discussion on continuing competency requirements for first year renewals:** Ms. Hunt moved that Regulations Governing the Practice of Professional Counseling, Marriage and Family Therapist (LMFT) and Licensed Substance Abuse Treatment Practitioners be amended to state that first-time licensees by examination will not be required to verify continuing education on the first renewal date following initial licensure.
- **Discussion on deficient internship hours for LPC, LMFT & LSATP:** The Committee Members agreed to discuss the requirements and options at the next scheduled meeting.
- **NEXT SCHEDULED MEETING:** at 10:00 a.m. on July 21, 2017

**ADJOURNMENT:**

The meeting adjourned at 3:35 p.m.

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Charles Gressard, Ph.D., LPC, LMFT, LSATP  
Chairperson

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Date

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Jaime Hoyle, JD  
Executive Director

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Date

# Petition for Rulemaking

**Agenda Item: Response to Petition for Rulemaking**

**Included in your agenda package are:**

A copy of the petition received from Dominique Adkins

A copy of comment on the NOIRA

A DRAFT copy of regulation 18VAC115-20-52

**Board action:**

To amend 18VAC115-20-52 as drafted or as further amended



# COMMONWEALTH OF VIRGINIA

## Board of Counseling

9960 Mayland Drive, Suite 300  
Richmond, Virginia 23233-1463

**DHP** MAR 10 2017

(804) 367-4610 (Tel)  
(804) 527-4435 (Fax)

### 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.*

<b>Please provide the information requested below. (Print or Type)</b>		
Petitioner's full name (Last, First, Middle initial, Suffix, <b>Adkins, Dominique, P</b>		
Street Address <b>7759 Legere Ct</b>	Area Code and Telephone Number <b>516-448-3515</b>	
City <b>McLean</b>	State <b>VA</b>	Zip Code <b>22102</b>
Email Address (optional) <b>Dominique.Adkins14@gmail.com</b>	Fax (optional) <b>703-360-0899</b>	

**Respond to the following questions:**

- 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.  
  
**18VAC115-20-52. Residency requirements.**  
 I would like to add a new rule listed in section 2.
- Please summarize the substance of the change you are requesting and state the rationale or purpose for the new or amended rule.  
  
 I would like to propose doctoral practicum and internship hours/supervision in a CACREP accredited Counseling program be accepted towards residency hours without preregistration of supervision up to 900 direct/indirect hours and up to 100 supervision hours if the professor or supervisor has an active LPC license and if the applicant can provide logs and verification of their supervisor's license when submitting for licensure. Based on the acceptance of hours in a master's program, a doctoral level program is post grad and provides more extensive clinical work, experience, and supervision. Doctoral Level Counseling Programs that adhere to the following CACREP guidelines are stricter than the Master's level program and are carefully overseen by licensed professors and supervisors with NCC and ACS credentials. Additionally, within the Master's level internship course, students are not obligated to register their supervisors and those hours are counted in excess of 600 hours up to 900 hours. With the increase of CACREP accredited doctoral counseling and counseling education programs in Virginia, this new rule would address the students' unique clinical experience and acknowledge their commitment to the counseling profession and community. Below I have included the CACREP guidelines for Doctoral level practicum and internship to provide a better understanding of the standards used in CACREP accredited doctoral programs.

## C. DOCTORAL LEVEL PRACTICUM AND INTERNSHIP

### PRACTICUM

1. Doctoral students participate in a supervised doctoral-level counseling practicum of a minimum of 100 hours, of which 40 hours must be providing direct counseling services. The nature of doctoral-level practicum experience is to be determined in consultation with counselor education program faculty and/or a doctoral committee.
2. During the doctoral student's practicum, supervision is provided by a counselor education program faculty member or an individual with a graduate degree (preferably doctoral) in counseling or a related mental health profession with specialized expertise to advance the student's knowledge and skills.
3. Individuals serving as practicum supervisors have (1) relevant certifications and/or licenses, (2) knowledge of the program's expectations, requirements, and evaluation procedures for students, and (3) relevant training in counseling supervision.
4. Doctoral students participate in an average of one hour per week of individual and/or triadic supervision throughout the practicum. When individual/triadic supervision is provided by the counselor education program faculty, practicum courses should not exceed a 1:6 faculty:student ratio
5. Group supervision is provided on a regular schedule with other students throughout the practicum and must be performed by a counselor education program faculty member. Group supervision of practicum students should not exceed a 1:12 faculty:student ratio.
6. Doctoral students are covered by individual professional counseling liability insurance policies while enrolled in practicum.

### INTERNSHIP

7. Doctoral students are required to complete internships that total a minimum of 600 clock hours. The 600 hours must include supervised experiences in at least three of the five doctoral core areas (counseling, teaching, supervision, research and scholarship, leadership and advocacy). Doctoral students are covered by individual professional counseling liability insurance policies while enrolled in a counseling or supervision internship.
8. During internships, the student receives an average of one hour per week of individual and/or triadic supervision, performed by a supervisor with a doctorate in counselor education or an individual with a graduate degree and specialized expertise to advance the student's knowledge and skills.
9. Group supervision is provided on a regular schedule with other students throughout the internship and must be performed by a counselor education program faculty member.

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

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

1. To establish the **qualifications** for registration, certification, licensure 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: *Dominique Aalkins*

Date: 3/1/17



Virginia.gov Agencies | Governor



Logged in as

Elaine J. Yeatts

**Department of Health Professions****Board Board of Counseling****Chapter Regulations Governing the Practice of Professional Counseling [18 VAC 115 – 20]**

Action	<b><u>Acceptance of doctoral practicum/internship hours towards residency requirements</u></b>
Stage	<b><u>NOIRA</u></b>
Comment Period	Ends 10/4/2017

All good comments for this forum [Show Only Flagged](#)[Back to List of Comments](#)

Commenter: Dr. Austin

9/5/17 9:55 am

**Support this**

I support this petition and would like it to go in effect as soon as possible. Previous doctoral students weren't able to have the quick turn around of an approval of a supervisor as they are now. This results in lost hours and lost supervision. Additionally if master's students hours are able to count without registration then it seems appropriate for the same to be extended in a doctoral program.

Commenter: Kathy Holmes

9/25/17 2:36 pm

**Support**

I support this petition.

Commenter: Wounded Warriors

9/25/17 2:59 pm

**I believe in this change**

I support this petition. It seems ridiculous the same standards are not extended to doctoral level cacep accredited programs that they are for for master's level students.

**BOARD OF COUNSELING**

**Acceptance of doctoral practicum/internship hours towards residency requirements**

**18VAC115-20-52. Residency requirements.**

A. Registration. Applicants who render counseling services shall:

1. With their supervisor, register their supervisory contract on the appropriate forms for board approval before starting to practice under supervision;
2. Have submitted an official transcript documenting a graduate degree as specified in 18VAC115-20-49 to include completion of the coursework and internship requirement specified in 18VAC115-20-51; and
3. Pay the registration fee.

B. Residency requirements.

1. The applicant for licensure shall have completed a 3,400-hour supervised residency in the role of a professional counselor working with various populations, clinical problems, and theoretical approaches in the following areas:
  - a. Assessment and diagnosis using psychotherapy techniques;
  - b. Appraisal, evaluation, and diagnostic procedures;
  - c. Treatment planning and implementation;
  - d. Case management and recordkeeping;
  - e. Professional counselor identity and function; and
  - f. Professional ethics and standards of practice.

2. The residency shall include a minimum of 200 hours of in-person supervision between supervisor and resident in the consultation and review of clinical counseling services provided by the resident. Supervision shall occur at a minimum of one hour and a maximum of four hours per 40 hours of work experience during the period of the residency. For the purpose of meeting the 200-hour supervision requirement, in-person may include the use of secured technology that maintains client confidentiality and provides real-time, visual contact between the supervisor and the resident. Up to 20 hours of the supervision received during the supervised internship may be counted towards the 200 hours of in-person supervision if the supervision was provided by a licensed professional counselor.
3. No more than half of the 200 hours may be satisfied with group supervision. One hour of group supervision will be deemed equivalent to one hour of individual supervision.
4. Supervision that is not concurrent with a residency will not be accepted, nor will residency hours be accrued in the absence of approved supervision.
5. The residency shall include at least 2,000 hours of face-to-face client contact in providing clinical counseling services. The remaining hours may be spent in the performance of ancillary counseling services.
6. A graduate-level internship in excess of 600 hours, which was completed in a program that meets the requirements set forth in 18VAC115-20-49, may count for up to an additional 300 hours towards the requirements of a residency.
7. Supervised practicum and internship hours in a CACREP-accredited doctoral counseling program may be accepted for up to 900 hours of the residency requirement and up to 100 of the required hours of supervision provided the supervisor holds a current, unrestricted license as a professional counselor.

~~7-8.~~ The residency shall be completed in not less than 21 months or more than four years. Residents who began a residency before August 24, 2016, shall complete the residency by August 24, 2020. An individual who does not complete the residency after four years shall submit evidence to the board showing why the supervised experience should be allowed to continue.

~~8-9.~~ The board may consider special requests in the event that the regulations create an undue burden in regard to geography or disability that limits the resident's access to qualified supervision.

~~9-10.~~ Residents may not call themselves professional counselors, directly bill for services rendered, or in any way represent themselves as independent, autonomous practitioners or professional counselors. During the residency, residents shall use their names and the initials of their degree, and the title "Resident in Counseling" in all written communications. Clients shall be informed in writing of the resident's status and the supervisor's name, professional address, and phone number.

~~10-11.~~ Residents shall not engage in practice under supervision in any areas for which they have not had appropriate education.

~~11-12.~~ Residency hours approved by the licensing board in another United States jurisdiction that meet the requirements of this section shall be accepted.

C. Supervisory qualifications. A person who provides supervision for a resident in professional counseling shall:

1. Document two years of post-licensure clinical experience;
2. Have received professional training in supervision, consisting of three credit hours or 4.0 quarter hours in graduate-level coursework in supervision or at least 20 hours of

continuing education in supervision offered by a provider approved under 18VAC115-20-106; and

3. Shall hold an active, unrestricted license as a professional counselor or a marriage and family therapist in the jurisdiction where the supervision is being provided. At least 100 hours of the supervision shall be rendered by a licensed professional counselor. Supervisors who are substance abuse treatment practitioners, school psychologists, clinical psychologists, clinical social workers, or psychiatrists and have been approved to provide supervision may continue to do so until August 24, 2017.

D. Supervisory responsibilities.

1. Supervision by any individual whose relationship to the resident compromises the objectivity of the supervisor is prohibited.

2. The supervisor of a resident shall assume full responsibility for the clinical activities of that resident specified within the supervisory contract for the duration of the residency.

3. The supervisor shall complete evaluation forms to be given to the resident at the end of each three-month period.

4. The supervisor shall report the total hours of residency and shall evaluate the applicant's competency in the six areas stated in subdivision B 1 of this section.

5. The supervisor shall provide supervision as defined in 18VAC115-20-10.

# QMHP Discussion

**Project 5242 - Emergency/NOIRA**

**BOARD OF COUNSELING**

**Initial regulations for registration**

CHAPTER 80

REGISTRATION OF QUALIFIED MENTAL HEALTH PROFESSIONALS

**Part I. General Provisions.**

**18VAC115-80-10. Definitions.**

“Accredited” means a school that is listed as accredited on the United States Department of Education College Accreditation database found on the United State Department of Education website.

“Applicant” means a person applying for registration as a qualified mental health professional.

“Board” shall mean the Virginia Board of Counseling.

“Collaborative mental health services” means those rehabilitative supportive services that are provided by a qualified mental health professional, as set forth in a service plan under the direction of and in collaboration with either a mental health professional licensed in Virginia or a person under supervision, that has been approved by and is a pre-requisite for licensure by the Boards of Counseling, Psychology, or Social Work.

“DBHDS” means the Virginia Department of Behavioral Health and Developmental Services.

“Face-to-face” means the physical presence of the individuals involved in the supervisory relationship or the use of technology that provides real-time, visual and audio contact among the individuals involved.

“Mental health professional” means a person who by education and experience is professionally qualified and licensed in Virginia to provide counseling interventions designed to facilitate an individual’s achievement of human development goals and remediate mental, emotional, or behavioral disorders and associated distresses which interfere with mental health and development.

“Qualified mental health professional or QMHP” means a person who by education and experience is professionally qualified and registered by the board to provide collaborative mental health services for adults or children. A QMHP shall not engage in independent or autonomous practice. A QMHP shall provide such services as an employee or independent contractor of the DBHDS or a provider licensed by the DBHDS.

“Qualified Mental Health Professional-Adult or QMHP-A” means a registered QMHP who is trained and experienced in providing mental health services to adults who have a mental illness. A QMHP-A shall provide such services as an employee or independent contractor of the DBHDS or a provider licensed by the DBHDS.

“Qualified Mental Health Professional-Child or QMHP-C” means a registered QMHP who is trained and experienced in providing mental health services to children or adolescents who have a mental illness. A QMHP-C shall provide such services as an employee or independent contractor of the DBHDS or a provider licensed by the DBHDS.

“Registrant” means a QMHP registered with the board.

**18VAC115-80-20. Fees required by the board.**

A. The board has established the following fees applicable to the registration of qualified mental health professionals:

<u>Registration</u>	<u>\$50</u>
<u>Renewal of registration</u>	<u>\$30</u>
<u>Late renewal</u>	<u>\$20</u>



Reinstatement of a lapsed registration	\$75
Duplicate certificate of registration	\$10
Returned check	\$35
Reinstatement following revocation or suspension	\$500

B. Unless otherwise provided, fees established by the board shall not be refundable.

**18VAC115-80-30. Current name and address.**

Each registrant shall furnish the board his current name and address of record. Any change of name or address of record or public address, if different from the address of record, shall be furnished to the board within 60 days of such change. It shall be the duty and responsibility of each registrant to inform the board of his current address.

**Part II. Requirements for registration.**

**18VAC115-80-40. Requirements for registration as a QMHP-A.**

A. An applicant for registration shall submit a completed application and a fee as prescribed in 18VAC115-80-20 on forms provided by the board.

B. An applicant for registration as a QMHP-A shall provide evidence of either:

1. A master's degree in psychology, social work, counseling, substance abuse, or marriage and family therapy from an accredited college or university with an internship or practicum of at least 500 hours of experience with persons who have mental illness;

2. A master's or bachelor's degree in human services or a related field from an accredited college with no less than 1,500 hours of supervised experience to be obtained within a five-year period immediately preceding application for registration and as specified in subsection C of this section;

3. A bachelor's degree from an accredited college in an unrelated field that includes at least 15 semester credits or 22 quarter hours in a human services field and with no less than 3,000 hours of supervised experience to be obtained within a five-year period

immediately preceding application for registration and as specified in subsection C of this section;

4. A registered nurse licensed in Virginia with no less than 1,500 hours of supervised experience to be obtained within a five-year period immediately preceding application for registration and as specified in subsection C of this section; or

5. A licensed occupational therapist with no less than 1,500 hours of supervised experience to be obtained within a five-year period immediately preceding application for registration and as specified in subsection C of this section.

C. Experience required for registration.

1. In order to be registered as a QMHP-A, an applicant who does not have a master's degree as set forth in subsection B 1 of this section shall provide documentation of experience in providing direct services to individuals as part of a population of adults with mental illness in a setting where mental health treatment, practice, observation or diagnosis occurs. The services provided shall be appropriate to the practice of a QMHP-A and under the supervision of a licensed mental health professional or a person under supervision approved by a board as a pre-requisite for licensure under the Boards of Counseling, Psychology, or Social Work.

2. Supervision shall consist of face-to-face training in the services of a QMHP-A until the supervisor determines competency in the provision of such services, after which supervision may be indirect in which the supervisor is either on-site or immediately available for consultation with the person being trained.

3. Hours obtained in a bachelor's or master's level internship or practicum in a human services field may be counted towards completion of the required hours of experience.

4. A person receiving supervised training in order to qualify as a QMHP-A may register with the board.

**18VAC115-80-50. Requirements for registration as a QMHP-C.**

A. An applicant for registration shall submit a completed application and a fee as prescribed in 18VAC115-80-20 on forms provided by the board.

B. An applicant for registration as a QMHP-C shall provide evidence of either:

1. A master's degree in psychology, social work, counseling, substance abuse, or marriage and family therapy from an accredited college or university with an internship or practicum of at least 500 hours of experience with persons who have mental illness;

2. A master's or bachelor's degree in a human services field or in special education from an accredited college with no less than 1,500 hours of supervised experience to be obtained within a five-year period immediately preceding application for registration and as specified in subsection C of this section;

3. A registered nurse licensed in Virginia with no less than 1,500 hours of supervised experience to be obtained within a five-year period immediately preceding application for registration and as specified in subsection C of this section; or

4. A licensed occupational therapist with no less than 1,500 hours of supervised experience to be obtained within a five-year period immediately preceding application for registration and as specified in subsection C of this section.

C. Experience required for registration.

1. In order to be registered as a QMHP-C, an applicant who does not have a master's degree as set forth in subsection B 1 of this section shall provide documentation of 1,500 hours of experience in providing direct services to individuals as part of a population of

children or adolescents with mental illness in a setting where mental health treatment, practice, observation or diagnosis occurs. The services provided shall be appropriate to the practice of a QMHP-C and under the supervision of a licensed mental health professional or a person under supervision approved by a board as a pre-requisite for licensure under the Boards of Counseling, Psychology, or Social Work.

2. Supervision shall consist of face-to-face training in the services of a QMHP-C until the supervisor determines competency in the provision of such services, after which supervision may be indirect in which the supervisor is either on-site or immediately available for consultation with the person being trained.

3. Hours obtained in a bachelor's or master's level internship or practicum in a human services field may be counted towards completion of the required hours of experience.

4. A person receiving supervised training in order to qualify as a QMHP-C may register with the board.

**18VAC115-80-60. Registration of QMHPs with prior experience.**

Until December 31, 2018, persons who have been employed as QMHPs prior to December 31, 2017 may be registered with the board by submission of a completed application, payment of the application fee, and submission of an attestation from an employer that they met the qualifications for a QMHP-A or a QMHP-C during the time of employment. Such persons may continue to renew their registration without meeting current requirements for registration provided they do not allow their registration to lapse or have board action to revoke or suspend, in which case they shall meet the requirements for reinstatement.

**Part III. Renewal of registration.**

**18VAC115-80-70. Annual renewal of registration.**

All registrants shall renew their registration on or before June 30 of each year. Along with the renewal form, the registrant shall submit the renewal fee as prescribed in 18VAC115-80-20.

**18VAC115-80-80. Continued competency requirements for renewal of registration.**

A. Qualified mental health professionals shall be required to have completed a minimum of eight contact hours of continuing education for each annual registration renewal. A minimum of one of these hours shall be in a course that emphasizes ethics.

B. Qualified mental health professionals shall complete continuing competency activities that focus on increasing knowledge or skills in areas directly related to the services provided by a QMHP.

C. The following organizations, associations, or institutions are approved by the board to provide continuing education provided the hours are directly related to the provision of mental health services:

1. Federal, state, or local governmental agencies, public school systems, or licensed health facilities; and
2. Entities approved for continuing education by a health regulatory board within the Department of Health Professions.

D. Attestation of completion of continuing education is not required for the first renewal following initial registration in Virginia.

E. The board may grant an extension for good cause of up to one year for the completion of continuing education requirements upon written request from the registrant prior to the renewal date. Such extension shall not relieve the registrant of the continuing education requirement.

F. The board may grant an exemption for all or part of the continuing education requirements due to circumstances beyond the control of the registrant such as temporary disability, mandatory military service, or officially declared disasters upon written request from the registrant prior to the renewal date.

G. All registrants shall maintain original documentation of official transcripts showing credit hours earned or certificates of participation for a period of three years following renewal.

H. The board may conduct an audit of registrants to verify compliance with the requirement for a renewal period. Upon request, a registrant shall provide documentation as follows:

1. Official transcripts showing credit hours earned; or
2. Certificates of participation.

I. Continuing education hours required by a disciplinary order shall not be used to satisfy renewal requirements.

#### **Part IV. Standards of practice; disciplinary action; reinstatement.**

##### **18VAC115-80-90. Standards of practice.**

A. The protection of the public health, safety, and welfare and the best interest of the public shall be the primary guide in determining the appropriate professional conduct of all persons whose activities are regulated by the board.

B. Persons registered by the board shall:

1. Practice in a manner that is in the best interest of the public and does not endanger the public health, safety, or welfare.
2. Practice only within the competency area for which they are qualified by training or experience and shall not provide clinical mental health services for which a license is required pursuant to Code of Virginia, Title 54.1, Chapters 35, 36, and 37.

3. Report to the board known or suspected violations of the laws and regulations governing the practice of qualified mental health professionals.

4. Neither accept nor give commissions, rebates, or other forms of remuneration for the referral of clients for professional services and make appropriate consultations and referrals based on the interest of patients or clients.

5. Stay abreast of new developments, concepts, and practices which are necessary to providing appropriate services.

C. In regard to confidentiality and client records, persons registered by the board shall:

1. Not willfully or negligently breach the confidentiality between a practitioner and a client. A breach of confidentiality that is required or permitted by applicable law or beyond the control of the practitioner shall not be considered negligent or willful.

2. Disclose client records to others only in accordance with applicable law.

3. Maintain client records securely, inform all employees of the requirements of confidentiality and provide for the destruction of records that are no longer useful in a manner that ensures client confidentiality.

4. Maintain timely, accurate, legible, and complete written or electronic records for each client, to include dates of service and identifying information to substantiate treatment plan, client progress, and termination.

D. In regard to dual relationships, persons registered by the board shall:

1. Not engage in dual relationships with clients or former clients that are harmful to the client's well-being, or which would impair the practitioner's objectivity and professional judgment, or increase the risk of client exploitation. This prohibition includes, but is not

limited to, such activities as providing services to close friends, former sexual partners, employees, or relatives; or engaging in business relationships with clients.

2. Not engage in sexual intimacies or romantic relationships with current clients. For at least five (5) years after cessation or termination of professional services, practitioners shall not engage in sexual intimacies or romantic relationships with a client or those included in collateral therapeutic services. Because sexual or romantic relationships are potentially exploitative, the practitioner shall bear the burden of demonstrating that there has been no exploitation. A client's consent to, initiation of or participation in sexual behavior or involvement with a practitioner does not change the nature of the conduct nor lift the regulatory prohibition.

3. Recognize conflicts of interest and inform all parties of obligations, responsibilities, and loyalties to third parties.

E. Upon learning of evidence that indicates a reasonable probability that another mental health provider is or may be guilty of a violation of standards of conduct as defined in statute or regulation, persons registered by the board shall advise their clients of their right to report such misconduct to the Department of Health Professions in accordance with § 54.1-2400.4 of the Code of Virginia.

**18VAC115-80-100. Grounds for revocation, suspension, restriction, or denial of registration.**

In accordance with §54.1-2400(7) of the Code of Virginia, the board may revoke, suspend, restrict, or decline to issue or renew a registration based upon the following conduct:

1. Conviction of a felony, or of a misdemeanor involving moral turpitude, or violation of or aid to another in violating any provision of Chapter 35 (§54.1-3500 et seq.) of Title 54.1 of



the Code of Virginia, any other statute applicable to the practice of qualified mental health professionals, or any provision of this chapter;

2. Procuring or maintaining a registration, including submission of an application or applicable board forms, by fraud or misrepresentation;

3. Conducting one's practice in such a manner so as to make it a danger to the health and welfare of one's clients or to the public; or if one is unable to practice with reasonable skill and safety to clients by reason of illness, abusive use of alcohol, drugs, narcotics, chemicals, or any other type of material, or as a result of any mental or physical condition;

4. Violating or abetting another person in the violation of any provision of any statute applicable to the practice of qualified mental health professionals, or any regulation in this chapter;

5. Performance of functions outside the board-registered area of competency;

6. Performance of an act likely to deceive, defraud, or harm the public;

7. Intentional or negligent conduct that causes or is likely to cause injury to a client or clients;

8. Action taken against a health or mental health license, certification, registration, or application in Virginia or other jurisdiction;

9. Failure to cooperate with an employee of the Department of Health Professions in the conduct of an investigation; or

10. Failure to report evidence of child abuse or neglect as required in §63.2-1509 of the Code of Virginia, or elder abuse or neglect as required in §63.2-1606 of the Code of Virginia.

**18VAC115-80-110. Late renewal and reinstatement.**

A. A person whose registration has expired may renew it within one year after its expiration date by paying the late renewal fee and the registration fee as prescribed in [18VAC115-80-20](#) for the year in which the registration was not renewed and by providing documentation of completion of continuing education as prescribed in [18VAC115-80-80](#).

B. A person who fails to renew registration after one year or more shall:

1. Apply for reinstatement;

2. Pay the reinstatement fee for a lapsed registration;

3. Submit evidence of completion of 20 hours of continuing education consistent with requirements of [18VAC115-80-80](#).

C. A person whose registration has been suspended or who has been denied reinstatement by board order, having met the terms of the order, may submit a new application and fee for reinstatement of registration as prescribed in [18VAC115-80-20](#). Any person whose registration has been revoked by the board may, three years subsequent to such board action, submit a new application and fee for reinstatement of registration as prescribed in [18VAC115-80-20](#). The board in its discretion may, after an administrative proceeding, grant the reinstatement sought in this subsection.

Discussion on Degrees  
Approved for QMHP Human  
Services and Related Fields

## **Virginia Board of Counseling**

### **Approved Degrees in Human Services and Related Fields**

The Board will need to develop a guidance document to provide information on which degree meets the human services or related field criteria. Currently, DBHDS approves the following:

Art Therapy  
Behavioral Sciences  
Child Development  
Child and Family Studies/Services  
Cognitive Sciences  
Community Mental Health  
Counseling (MH, Vocational, Pastoral, etc.)  
Counselor Education  
Early Childhood Development  
Education (with a focus in psychology and/or special education)  
Educational Psychology  
Family Development/Relations  
Gerontology  
Health and Human Services  
Human Development  
Human Services  
Marriage and Family Therapy  
Music Therapy  
Nursing  
Pharmacy  
Psychiatric Rehabilitation  
Psychology  
Rehabilitation Counseling  
Social Work  
Sociology  
Special Education  
Speech Therapy  
Therapeutic Recreation  
Vocational Rehabilitation



## **Approved Degrees in Human Services and Related Fields**

The state of Virginia does not have a certification process for QMHPs; accordingly, no license or certificate is available. To qualify for these designations, coursework must be verified as **successfully completed with credit earned** and the applicant/employee's credentials and work experience must meet the following:

Below is a list of approved Bachelors or post-graduate degrees that meet the standard for QMHPs. Qualifying degrees must have been awarded from among the schools listed on the U.S. Department of Education College Accreditation database. Schools that are not listed on the database do not meet the standard as accredited. Degrees obtained outside the United States can be reviewed individually.

While this list below is comprehensive, it may not be all-inclusive given how education institutions may rename their degrees. Providers need to insure that the major studied as well as the classes taken must meet the intent of a Human Services degree.

### **Human Services and Related Fields Approved Degrees**

- Art Therapy
- Behavioral Sciences
- Child Development
- Child and Family Studies/Services
- Cognitive Sciences
- Community Mental Health
- Counseling (MH, Vocational, Pastoral, etc.)
- Counselor Education
- Early Childhood Development
- Education (with a focus in psychology and/or special education)
- Educational Psychology
- Family Development/Relations
- Gerontology
- Health and Human Services
- Human Development



- Human Services
- Marriage and Family Therapy
- Music Therapy
- Nursing
- Pharmacy
- Psychiatric Rehabilitation
- Psychology
- Rehabilitation Counseling
- Social Work
- Sociology
- Special Education
- Speech Therapy
- Therapeutic Recreation
- Vocational Rehabilitation

## **EXPERIENCE**

Experience means working directly with individuals identified as part of the target population in a setting where mental health treatment, practice, observation, and diagnosis occur.

**QMHP-C's** the experience must be with children who have a serious emotional disturbance or mental illness.

**QMHP-A's** the experience must be with individuals who have been diagnosed with a mental illness.

Supervised internships, practicums and field experiences obtained as a part of a college degree program at an accredited college count towards the clinical experience requirement. The experience requirement is based on full time experience (40 hours a week). Partial credit towards the experience requirement can be counted on a prorated basis (i.e. 20 hours equals half time). Supervision should have been provided by an individual who meets DBHDS supervisory requirements.

**\*\*All hiring decisions are up to the provider and the individual's personnel file must support the individual hired meets the qualifications required for the position. The Office of Licensing is not responsible for the decision to hire or not hire the individual. \*\***



### When verifying credentials or degrees:

Providers should obtain an official transcript or transcripts from the individual seeking employment. With regard to transcripts, providers should pay close attention to what classes were taken as well as to whether or not the individual passed the class. Transcripts will typically list all classes the individual was enrolled in however the individual may have withdrawn from the class or may not have passed the class. If that is the case, then that particular class cannot be counted toward the total human services class hours. Acceptable forms of transcripts include:

- Electronic transcripts from:
  - eSCRIP-SAFE, Parchment/Naviance/Avow/Docufide, OKCollegeStart (XAP), National Student Clearinghouse, Credentials Solutions, Join Service Transcripts (military JST)
- Electronic transcripts in PDF format sent directly from the counselor or registrar of the high school or university/college's email account (.edu)
- Transcripts mailed or hand-delivered with a print date in a sealed envelope from the institution.
- Faxed transcripts from institutions, which have a signed and returned Admissions/Registrar's Fax Agreement form indicating the document is official.

Draft Joint Guidance  
Document on Assessment  
Titles and Signatures



**Draft Joint Guidance Document on Assessment Titles and Signatures Draft**

**Commonwealth of Virginia**

**Boards of Psychology, Counseling, and Social Work**

Conducting client evaluations or assessments pertaining to diagnosis and psychosocial or mental health functioning is within the scope of practice of several licensed mental health professionals. Although some jurisdictions have attempted to define by regulation or statute what types of assessments may be done by what specific mental health professionals, Virginia has not taken that approach. In Virginia, each profession is regulated by its own regulatory body, and each takes its own approach to training and standards of practice.

Just as different healthcare specialists may rely on similar but not identical assessment procedures, different behavioral health professionals may approach assessment practice with both shared and distinctive skills and tools. Historically, protection of the public has relied upon each profession's Board oversight to hold its own members to a customary discipline-wide standard of practice, with the additional expectation that each practitioner limit his or her domain of practice to professional areas of personal competence.

In the case of shared or overlapping services across professional licenses, however, a further public safeguard includes this joint agreement among behavioral health professions to encourage members within each licensure category to represent themselves and their work unambiguously by clearly documenting their professional alliances and qualifying licensure title. This unambiguous representation of each behavioral professional's basis for assessment work involves careful attention to specific labeling and self-presentation in the following ways:

- **Clear and Unambiguous Work Product Heading:** Because labels given to assessment work products may confuse healthcare service recipients, headings placed on an assessment product or report should clearly communicate the examiner's licensed profession.
  - Avoid the use of labels that suggest an assessment might have been conducted by a professional with a different license than the one(s) the examiner holds.
  - Suggested Work Product headings are included in the Table below.
  
- **Clear and Unambiguous Examiner Titles:** The title in a signature block or other relevant self-designation on a document summarizing an assessment work product should clearly convey the examiner's professional identity and field(s) of licensure.
  - Titles such as "psychological examiner" or "clinical examiner" have the potential to confuse service recipients by failing to convey the examiner's profession.
  - In contrast, such terms as "Clinical Psychologist" or "Licensed Clinical Psychologist," "School Psychologist" or "Licensed School Psychologist," "Applied Psychologist" or "Licensed Applied Psychologist," "Licensed Professional Counselor," or "Licensed Clinical Social Worker" point clearly to the licensee's legal title in Virginia and help service recipients identify the examiner's oversight Board.
  - Listing the Examiner's specific License number is optional.
  - Suggested Signature Titles are included in the Table below.

Virginia License	Suggested Report Heading	Suggested Signature Title
<p>Clinical Psychologists</p> <p>School Psychologists</p> <p>Applied Psychologists</p>	<p>“Psychological Assessment”</p> <p>“Psychological Evaluation”</p> <p>“Psychological Report”</p> <p>Note: Additional, more specific, terms may be added, depending on the focus of the report and the Psychologist’s area(s) of further post-doctoral training and competence (e.g., Forensic, Geriatric, Pediatric, Medical, Neuropsychological).</p>	<p>“Clinical Psychologist” or</p> <p>“Licensed Clinical Psychologist”</p> <p>“School Psychologist” or</p> <p>“Licensed School Psychologist”</p> <p>“Applied Psychologist” or</p> <p>“Licensed Applied Psychologist”</p> <p>Note: Board Certification or other credentials may be added underneath the Psychologist’s licensure category (e.g., “Board Certified in Neuropsychology”) and associated initials may be added after the Psychologist’s degree (e.g., John Smith, Ph.D., ABPP), especially if relevant given to the heading and focus of the document. However, terms such as “neuropsychologist,” “forensic psychologist,” and others hold no legal standing in Virginia. Therefore, reports still should carry the appropriate signature title listed above in order to indicate to the public the licensure category and associated state Board regulating this practice.</p>
<p>Licensed Professional Counselors</p>	<p>“Counseling Assessment”</p> <p>“Counseling Evaluation”</p> <p>“Counseling Report”</p>	<p>“Licensed Professional Counselor”</p>
<p>Licensed Clinical Social Workers</p>	<p>“Social Work Assessment”</p> <p>“Social Work Evaluation”</p> <p>“Social Work Report”</p>	<p>“Licensed Clinical Social Worker”</p>

Clarify conflict with required labels: When a mental health professional’s employer, work setting, or legal work context requires a particular label be used for assessment reports and the required label conflicts with the above suggestions and therefore might introduce confusion about the professional identity of the examiner, the licensed professional should clarify his or her professional identity to the client at the outset of the evaluation and make this explicit within the report and in the signature block (e.g., “Psychological Evaluation” by XXXXXXX, Clinical Psychologist [or Licensed Clinical Psychologist]).

UPDATED Following 5/16/17 Board Meeting

In offering this collective guidance to its licensees, Virginia's Behavioral Science Licensure Boards are adding no formal regulatory restrictions to the use of various professional terms, beyond the protected titles that already reside in their respective regulations. Rather, these Boards are jointly recommending best practice guidelines for regulated members of their respective professions to minimize public confusion and clearly communicate to clients which Board governs the practice of each licensed examiner. The Boards believe this guidance will best represent their members to the public and best direct service recipients to each examiner's specific standards of competence.

# Affirmative Criminal Conviction Reports

## **Affirmative Criminal Convictions:**

Currently, we require applicants to self-disclose criminal conviction histories and we make licensure decisions based on those self-reports and court records that are subsequently obtained. Other Boards within DHP have found that self-reporting a criminal conviction on an application is not always reliable. Ultimately, DHP will require criminal background checks for all boards, but until that is implemented, it is the Board of Counseling's responsibility to ensure that complete information is reviewed if an applicant provides an affirmative answer to a criminal conviction. We would like to request that applicants provide a Personal Criminal History/Background Record from the jurisdiction where the conviction occurred. In Virginia, this report is known as a "Criminal Record Check" (SP-167) which allows personal requests for a criminal record search. Perhaps this could be added to Guidance Document 140-2 as required documentation.

### **"The following information will be requested from an applicant with a criminal conviction:**

- A certified copy of all conviction orders (obtained from the courthouse of record);
- Evidence that all court ordered requirements were met (i.e., letter from the probation officer if on supervised probation, paid fines and restitution, etc.);
- A letter from the applicant explaining the factual circumstances leading to the criminal offense(s); and
- Letters from employers concerning work performance (specifically from Social Work related employers, if possible)."

# CSAC Endorsement Requirements

## **CSAC Endorsement Requirements**

On August 19, 2016, the Board approved the NCACII, MAC and AADC national certifications as substantially equivalent to the CSAC certification (Guidance Document 115-1.9). This now allows the Board to approve those who hold these certifications through endorsement; however, in June 2017 staff discovered that the Virginia Certification Board (VCB) was approving individuals for the CAADC certification without taking the required AADC examination. The AADC examination was waived for those who held a master's degree. VCB confirmed that effective July 31, 2017, the waiving of the examination is no longer applicable. However, if an applicant applied prior to July 31, 2017 for the AADC and did not complete their application (application was pending needing more information, etc.) the VCB will still waive the examination.

Staff proposes that the Guidance Document 115-1.9 be amended to the following:

### **Virginia Board of Counseling**

#### **National Certifications approved by the Board for Certification as a Substance Abuse Counselor by endorsement**

In Regulations Governing the Certification of Substance Abuse Counselors and Substance Abuse Counseling Assistants, Section 18VAC115-30-45 states that: "Every application for certification by endorsement shall submit verification of a current certification in good standing issued by NAADAC or other board-recognized national certification in substance abuse counseling obtained by educational and experience standards substantially equivalent to those set forth in this chapter."

For the purpose of meeting the requirement of Section 45, the Board has determined that the following national certifications are deemed substantially equivalent with the verification of passing score on a national examination at the level for which the applicant holds certification:

- The National Certified Addiction Counselor Level II (NCAC II) accreditation from the National Certification Commission for Addiction Professionals (NCC AP)/NAADAC, the Association of Addiction Professionals;
- The Master Addiction Counselor (MAC) accreditation from the National Certification Commission for Addiction Professionals (NCC AP)/NAADAC, the Association of Addiction Professionals; or
- The Advanced Alcohol & Drug Counselor (AADC) accreditation from the International Certification & Reciprocity Consortium (IC&RC)

# CSAC-A Supervisor Requirements



## **CSAC-A Supervisor Requirements:**

Can a supervisor that does not hold licensure or certification with the Board but holds a national certification such as a CADAC, CAADC, NCACII working for a non-for-profit be approved? The current Regulations do not state the qualifications for a CSAC-A supervisor; however, the Code states the following:

*Such certified substance abuse counseling assistant shall be supervised or directed either by a licensed substance abuse treatment practitioner, or by any other mental health professional licensed by the Department, or by a certified substance abuse counselor, or, in an exempt setting as described in § 54.1-3501, another person with substantially equivalent education, training, and experience, or such counseling assistant shall be in compliance with the supervision requirements of a licensed facility.*

# Supervisor Requirements and Standards of Practice

## **18VAC115-20-52(C) and (D)**

**C. Supervisory qualifications.** A person who provides supervision for a resident in professional counseling shall:

1. Document two years of post-licensure clinical experience;
2. Have received professional training in supervision, consisting of three credit hours or 4.0 quarter hours in graduate-level coursework in supervision or at least 20 hours of continuing education in supervision offered by a provider approved under 18VAC115-20-106; and
3. Shall hold an active, unrestricted license as a professional counselor, or a marriage and family therapist in the jurisdiction where the supervision is being provided. At least 100 hours of the supervision shall be rendered by a licensed professional counselor. Supervisors who are substance abuse treatment practitioners, school psychologists, clinical psychologists, clinical social workers, or psychiatrists and have been approved to provide supervision may continue to do so until August 24, 2017.

### **D. Supervisory responsibilities.**

1. Supervision by any individual whose relationship to the resident compromises the objectivity of the supervisor is prohibited.
2. The supervisor of a resident shall assume full responsibility for the clinical activities of that resident specified within the supervisory contract for the duration of the residency.
3. The supervisor shall complete evaluation forms to be given to the resident at the end of each three-month period.
4. The supervisor shall report the total hours of residency and shall evaluate the applicant's competency in the six areas stated in subdivision B 1 of this section.
5. The supervisor shall provide supervision as defined in 18VAC115-20-10

## APPROVED CLINICAL SUPERVISOR(ACS) CERTIFICATION

The Approved Clinical Supervisor (ACS) credential identifies those mental health professionals who have met national professional supervision standards. The ACS promotes the clinical supervisor's professional identity, visibility and accountability, and encourages professional growth. As of 2016, 15 states recognize the ACS as a supervision credential of choice.

Alabama  
Arizona  
Arkansas  
Colorado  
Florida  
Georgia  
Iowa  
Maryland  
Mississippi  
Nevada  
New Jersey  
Oregon  
Rhode Island  
South Dakota  
Tennessee

### Changes to the Approved Clinical Supervisor (ACS) Credential Application in 2016

Beginning July 1, 2016, CCE made several changes to the ACS credential requirements. CCE's goal is to encourage safe and effective practice among our credential holders. In order to align with more stringent state counselor licensure standards, CCE made the following changes to the ACS application requirements:

- Mental health experience increased to five years and 4,000 hours;
- Alternate entry was eliminated;
- Supervision training course increased to 45 clock hours; and
- Continuing education in clinical supervision increased to 20 clock hours.

Degree, licensure, personal disclosure statement and clinical supervision requirements did not change.

*Applications **postmarked** prior to July 1, 2016 will be reviewed under the previous standards stated the previous application packet. Note that the Professional Disclosure Statement must be professionally written and address the content areas as stated in the requirements. Please carefully read the application instructions and submit all documentation to CCE in one packet to avoid review delays.*

## **REQUIREMENTS**

### **Education**

- A master's degree or higher in a mental health field. Degrees must be from a postsecondary educational institution or program accredited by an accrediting agency or state approval agency recognized by the U.S. Secretary of Education.
- Please submit a copy of your (official or unofficial) transcript with your application. Web-printed transcripts must identify the school and the degree conferred.

### **Applicants with non-U.S. degrees:**

- If you earned your degree(s) outside the United States, you will need to have the degree(s) evaluated by an international transcript evaluation service and submit the results to CCE with your application. CCE accepts evaluations completed by World Education Services, Inc.; Educational Credential Evaluators, Inc.; and the American Association of Collegiate Registrars and Admissions Officers International Education Services.

### **Current status as one of the following:**

- A. National Certified Counselor (NCC)
- B. Licensed or certified mental health provider
- C. Licensed or certified clinical supervisor

Please submit a copy of the license or credential with your application.

### **Self-Assessment and Professional Disclosure**

You will need to submit a professional disclosure statement intended for your supervisees. A statement you currently distribute to supervisees can be submitted provided it addresses the 10 required areas listed below. If you are not currently employed in a supervisory capacity, write the disclosure statement as if you were. If the supervisory responsibilities are an aspect of your employment (e.g., counselor educator), write the statement from that perspective. An effective disclosure statement demonstrates an understanding of the multiple responsibilities of a clinical supervisor. Your statement must include:

1. Your name, business address, e-mail and telephone number;
2. A listing of your degrees, credentials and licenses;
3. The general mental health competency areas for which you are qualified to provide supervision (e.g., addictions counseling, career counseling);
4. A statement documenting your training in supervision and experience in providing supervision;
5. A general statement addressing your model of or approach to supervision, including role of the supervisor, objectives and goals of supervision, and modalities (e.g., tape review, live observation);
6. A description of the evaluation procedures you use in the supervisory relationship;

7. A statement defining the limits and scope of confidentiality and privileged communication within the supervisory relationship and with your own supervisor if applicable;
8. A fee schedule or statement of free service;
9. Emergency contact information where your supervisee can reach you in the event of an emergency; and
10. A statement indicating that you will follow the Approved Clinical Supervisor Code of Ethics in addition to your credentialing board's code of ethics.

### **Required Specialized Training**

Clinical supervision training must be specific to providing supervision or becoming a supervisor.

You must document completion of one of the following:

- a. A three-semester-hour graduate course in clinical supervision from a CACREP-accredited program (by transcript)

**OR**

- b. A 45-clock-hour NBCC-approved workshop training in clinical supervision (by certificate copy)

**OR**

- c. A total of 45 clock hours of clinical supervision training specific to providing supervision or becoming a supervisor, which must include each of the following content areas (Submit the transcript/certificate and the course syllabus/outline.):

- Roles and functions of clinical supervisors
- Models of clinical supervision
- Mental health–related professional development
- Methods and techniques in clinical supervision
- Supervisory relationship issues
- Cultural issues in clinical supervision
- Group supervision
- Legal and ethical issues in clinical supervision
- Evaluation of supervisee competence and the supervision process

### **Clinical Supervision Experience/Endorsement**

You must submit an endorsement form documenting a minimum of 100 hours of your own supervised clinical supervision of individuals providing mental health services. Your supervision experience may include individual and/or group supervision, with a maximum of 10 members in a supervision group. You may use supervision of graduate students in training to fulfill this requirement. The endorser of your supervision must be a current NCC or licensed or certified mental health provider, and must have training in clinical supervision.

### **Mental Health–Related Experience**

You must document a minimum of five years of post-master's experience in mental health services that includes at least 4,000 hours of direct service with clients.

You may substitute a conferred doctorate and/or completed internship for up to three years and 900 hours of the total required.

**Completed doctoral internship:** Each school year of internship counts for one year and 300 hours of experience, or the number of hours stated in the internship course requirements.

**Conferred doctorate:** Each school year of enrollment in a doctoral program counts for one year and 300 hours of experience.

## **CONTINUING EDUCATION REQUIREMENTS**

### **Recredentialing/Continuing Education Requirements**

Recredentialing is necessary every five years in order to continue using the ACS credential. To recredential, you must be able to document completion of 20 hours of continuing education activities during your five-year credentialing period.

- Continuing education must be specific to clinical supervision.
- Up to nine hours of supervision of your work as a clinical supervisor can apply toward the required 20 continuing education hours.
- Failure to submit the signed recredentialing attestation, payment and any requested continuing education documentation by the expiration date on your certificate will result in expiration of your credential.

Use the CE log to record the activities that you attend for recredentialing of your ACS credential. We will allocate clock hours as described in ACS Certification Maintenance Requirements.

### **Reinstating an Expired ACS Credential**

In order to reinstate an expired ACS credential, you will need to submit a reinstatement application and fee of \$50, documentation of 20 hours of continuing education, and full payment of any past-due fees.

The application fee for the ACS is \$150 (U.S. dollars).

The annual maintenance fee is \$50 (U.S. dollars).

You will receive an annual maintenance fee notice approximately six weeks before the credential anniversary date. If you have any concerns about your invoice, please contact CCE. Please be sure to pay the annual maintenance fee by the due date in order to maintain active status.

Payment of your annual maintenance fee means you agree to continue to adhere to the ACS Code of Ethics and report any charge or complaint about a criminal, civil, state board or other professional disciplinary matter(s) within 60 days of your knowledge of the complaint or charge. [Click here for more specific information.](#)



## **COSTS OF ACS CERTIFICATION**

The application fee for the ACS is \$150 (U.S. dollars).

The annual maintenance fee is \$50 (U.S. dollars).

You will receive an annual maintenance fee notice approximately six weeks before the credential anniversary date. If you have any concerns about your invoice, please contact CCE. Please be sure to pay the annual maintenance fee by the due date in order to maintain active status.

Payment of your annual maintenance fee means you agree to continue to adhere to the ACS Code of Ethics and report any charge or complaint about a criminal, civil, state board or other professional disciplinary matter(s) within 60 days of your knowledge of the complaint or charge.

## Agreement for Supervision for Clinical Licensure

This agreement is made between \_\_\_\_\_ (herein after referred to as the supervisee) and \_\_\_\_\_ (herein after referred to as the supervisor). The supervisor agrees to provide supervision in compliance with the requirements for the Licensed Professional Counselor (LPC) license in the Commonwealth of Virginia and in accordance with the terms below. The parties mutually agree to the following:

### 1. FREQUENCY AND DURATION

One hour of supervision shall be conducted at least once weekly with the supervisee. Sessions will be one hour and held individually. At such time that more than one supervisee is under agreement with the supervisor, sessions may also be provided in a group format, alternating weekly between individual and group sessions, with at least half of the total supervision hours provided in the individual (1:1) format. Group sessions will consist of no more than eight (8) supervisees.

### 2. AVAILABILITY

Supervision shall occur on a set and agreed upon schedule. The supervisor may be available between scheduled sessions, as needed, for phone consultation during regular business hours (M - F, 9:00 am - 6:00 pm). Supervisor will be available after hours for emergent situations.

### 3. PROCESS OF SUPERVISION

#### **The supervisor shall:**

- Qualify as an LPC in the Commonwealth of Virginia and provide this qualification to the supervisee. The supervisor shall maintain this credential for the duration of the supervision and conduct supervision according to the LPC Code of Ethics.
  - Conduct supervision as a personal endeavor and as process distinct from personal therapy or didactic instruction.
  - Provide education, oversight, and guidance in diagnosing, conceptualizing, treating and dealing with clients and conduct supervision with a focus on raw data as presented by the supervisee in supervisee's clinical work and through case study.
  - Make a reasonable effort to ensure the supervisee's competence in practice.
  - Provide ongoing and final evaluation of the supervisee's clinical skills; and submit and retain such evaluation as required by regulatory authorities.

#### **The supervisee shall:**

- Participate in supervision with a goal of increasing competency in clinical practice and attend supervision on the agreed upon basis.
  - Notify and prepare to discuss with the supervisor the diagnosis/case conceptualization and treatment of each client as well as problems in the supervisee's clinical milieu.

- Provide appropriate and current raw data and clinical materials for supervision which are representative of the supervisee's practice or of the specialty where more guidance and direction are needed.
- Avoid engaging in activity for which the supervisee lacks competency, training, education, supervision, and which may compromise client safety and wellbeing.
  - Ensure client and professional interactions that are within the guidelines of Code of Ethics
  - Request ongoing and final evaluations of clinical skills from the supervisor and provide supervisor feedback regarding the supervision process
  - Take an active role in one's own clinical and professional growth by participating in ongoing professional development activities to include but limited to training, seminars, homework assignments.

**4. COMPENSATION**

In exchange for supervisor's time, expertise and licensure, the supervisor shall be compensated \$\_\_\_\_.00 per one hour of 1:1 supervision and \$\_\_\_\_.00 per group supervision provided, payable at the time of each scheduled supervision sessions.

**5. DURATION AND TERMINATION**

The period of this agreement shall be from \_\_\_\_\_ until such time supervisee meets the hour and supervision requirements for licensure, or the agreement is otherwise terminated. This agreement may be terminated by either party upon 10 days notice. *The agreement may be immediately terminated if either party does not maintain necessary qualifications or fails to follow the Virginia LPC Board Code of Ethics or Board Rules.*

\_\_\_\_\_  
\_\_\_\_\_, LPC

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisee

\_\_\_\_\_  
Date

**Receipt of ethical guidelines**

*I have been provided a copy of the Commonwealth of Virginia Regulations Governing the Practice of Professional Counselor and hereby agree to adhere to the Code while under the clinical supervision of \_\_\_\_\_, LPC*

Supervisee Initial \_\_\_\_\_

Date \_\_\_\_\_

## Supervisory Record Form

Name of Supervisee: \_\_\_\_\_ Supervision Start Date: \_\_\_\_\_

DATE:	TIME:	SUPERVISION METHOD:
Session Focus: <input type="checkbox"/> Case Review <input type="checkbox"/> Record/Doc Review <input type="checkbox"/> Screening/Assessment/Referral <input type="checkbox"/> Ethical issues <input type="checkbox"/> Practice/Intervention Skills <input type="checkbox"/> Cultural Competency <input type="checkbox"/> Treatment planning <input type="checkbox"/> Other _____		
SUMMARY OF SESSION:		
Session Fees: \$___ <input type="checkbox"/> Billed Weekly Client Hours _____		
Received via <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Pay Pal		

DATE:	TIME:	SUPERVISION METHOD:
Session Focus: <input type="checkbox"/> Case Review <input type="checkbox"/> Record/Doc Review <input type="checkbox"/> Screening/Assessment/Referral <input type="checkbox"/> Ethical issues <input type="checkbox"/> Practice/Intervention Skills <input type="checkbox"/> Cultural Competency <input type="checkbox"/> Treatment planning <input type="checkbox"/> Other _____		
SUMMARY OF SESSION:		
Session Fees: \$___ <input type="checkbox"/> Billed Weekly Client Hours _____		
Received via <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Pay Pal		

**CONTRACT BETWEEN SUPERVISEE & SUPERVISOR**  
**EXPERIENCE AS \_\_\_\_\_**

**This agreement defines a relationship of supervision between**

\_\_\_\_\_ **and** \_\_\_\_\_  
*(name of supervisee)* *(name of supervisor)*

**Category of Supervised Experience:** \_\_\_\_\_

**Amount of Supervised Experience Required:** \_\_\_\_\_

**Amount of Supervision Required:** \_\_\_\_\_

**Supervisor's Qualifications (see below):** \_\_\_\_\_

**Site(s) of Supervision:** \_\_\_\_\_

\_\_\_\_\_

\*\*\*\*\*

**Nature of the Contract:**

This contract is to establish a supervisor-supervisee relationship between the parties named above. Should either party not adhere to their responsibilities, this contract may be terminated by either party upon written notice, immediately.

**Standards of Conduct:**

Both parties attest to adhere to the \_\_\_\_\_ Guidelines for Responsible Conduct. The supervisor is not to be considered the client of the applicant. The applicant must be a W-2 employee while being supervised.

**Onset of Experience:**

Supervisee may not start accumulating experience until they have attained licensure in the State of Utah as an \_\_\_\_\_.

Examples of activities that are not appropriate as experience activities include: attending meetings with little or no behavior analytic content, providing interventions that are not based in behavior analysis, doing non-behavior analytic administrative activities, or any other activities that are not directly related to behavior analysis.

**Appropriate Clients:**

Clients may be any persons for whom mental health services are appropriate. However, the applicant may not be related to the client or the client's primary caretaker. Applicants must work with multiple clients during the experience period.

**Supervisor Qualifications:**

During the experience period, the supervisor must be:

1. A \_\_\_\_\_ in good standing,
2. Practiced for not less than 2 years.

The supervisor may not be the applicant's relative, subordinate, or employee during the experience period. The supervisor will not be considered an employee of the applicant if the only compensation received by the supervisor from the applicant consists of payment for supervision.

**Nature of Supervision:**

The supervisor must observe the applicant engaging in mental health therapy activities in at least one hour every week. The supervisor must provide specific feedback to applicants on their performance. During the initial half of the total experience hours, observation should concentrate on applicant-client interactions. Supervision hours may be counted toward the total number of experience hours required.

**Documentation of Supervision:**

Supervisors are responsible for providing documentation for each supervisory period on a feedback form. The feedback form will require documentation of number of hours of experience, number of supervised hours, feedback on the applicant's performance, the supervisor for each supervisory period, and signatures of the applicant and supervisor. The supervisor must review the completed feedback forms with the applicant and provide a copy for the applicant each supervisory period. The supervisor and the applicant are responsible for retaining their copies of the forms (in the event of a disagreement regarding experience, DOPL will need documentation from each party). DOPL reserves the right to request this documentation at any time following an individual's application to take the certification exam. In addition, the supervisor will be required to verify the applicant's supervision on the Experience Verification Form that is provided within the application for examination.

*I have read the above and agree to the provisions set forth in this contract.*

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Supervisor's Signature

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Date

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Supervisee's Signature

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Date

SAMPLE