

10:00 a.m. Call to Order – Canek Aguirre, Chairperson

- Welcome/Introductions
- Establishment of a Quorum
- Mission of the Board/Evacuation Procedures -----Page 3
- 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.-----Page 5

Approval of Minutes

November 3, 2023, Board Meeting*	Page 7
June 21 Informal Conference (Informational Purposes)	Page 12

Agency Director Report (Verbal Report) - Arne Owens

Chair Report (Verbal Report) - Canek Aguirre

Legislation and Regulatory Report - Erin Barrett, JD, DHP Director of Legislative and Regulatory Affairs

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•	General Assembly Update	Page 15
٠	House Bill 606	Page 20
•	Consideration of Stephenson Petition for Rulemaking*	Page 24
•	Amendment to Guidance Document 140-9*	Page 32
•	Discussion regarding paid internships	Page 39

Staff Reports

- Executive Director's Report Jaime Hoyle, JD, Executive Director, Boards of Counseling, Psychology, and Social Work (Handout)
- Deputy Executive Director's Report Jennifer Lang, Deputy Executive Director, Boards of Counseling, Psychology, and Social Work------Page 41
- Deputy Executive Director's Report, Licensing Charlotte Lenart, Boards of Counseling, Psychology, and Social Work------Page 44

New Business – Ms. Hoyle

- - Status Opdate and Discussion
 Appointment of Commissioner*
- 1

House Bill 606 (Price): Clinical Social Workers; Licensure Examination Alternative
 Letter Study Update and Discussion (Handout)

Elections – Mr. Aguirre

Bylaws------Page 71

Meeting Dates

- 2025 Proposed Meeting Dates (Handout)
- Next Full Board Meeting: September 27, 2024
- Meeting Adjournment

*Indicates a Board vote is required.

This information is in **DRAFT** form and is subject to change. The official agenda and packet will be approved by the Board at the meeting. One printed copy of the agenda and packet will be available for the public to view at the meeting pursuant to Virginia Code Section 2.2-3707(F).



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.

EMERGENCY EGRESS

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, <u>leave the room</u> <u>immediately</u>. Follow any instructions given by the Security staff.

<u>Board Room 1</u>

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.

The Virginia Department of Health Professions Perimeter Center 9960 Mayland Drive, Suite 300 Henrico, VA 23233-1463

To the Behavioral Science Boards and Staff:

The concept of 'the public' is grand and fraught with debate – but it is not without meaning; it is simply so rich with meaning that it overwhelms. I wish to convey to this Board what 'public dialogue' means – in the hopes that someone here holds the notion of the 'public interest' close to their heart.

Public dialogue is not synonymous with public comment platforms. *Effective* public dialogue is something else entirely.

Effective public dialogue creates a "mandate of democratic publicity."¹ The mandate of democratic publicity is not manifested in legal or bureaucratic authority – and should not be conflated with it. Democratic publicity, instead, emerges from civil society through the "exchange of opinion about the sphere of public life and the common world, and the decision of what manner of action is to be taken in it."²

Submitting public comments does not yield an exchange of opinion; it does not provide for shared judgement and decision-making. The public comment platform provides a speech receptacle: one party speaks and the other choose whether it wants to listen.

After investing considerable time reading the meeting minutes, bylaws, guidance documents, and reports produced by this institution, I have come to realize that the VDHP Behavioral Science Boards have an impending colossus on their hands. A rough description of this colossus was presented by the Psychology Board's Deputy Executive Director:

"...the three behavioral science boards received 724 new cases in 2023, a 31% increase in [*sic*] since 2020. If pending General Assembly bills are passed, creating new license types for the Boards of Psychology and Counseling, the discipline cases are expected to increase significantly ... additional discipline staff will be necessary to continue to move cases through the process within reasonable timeframes." – *Draft Meeting Minutes, Board of Psychology, Feb 27th, 2024.*

¹ Habermas, Jürgen. 1991. Page 244 in *The Structural Transformation of the Public Sphere: An Inquiry into a Category of Bourgeois Society*. MIT Press.

² Arendt, Hannah. 1968. Page 223 in "The Crisis in Culture: Its Social and Its Political Significance" Pp. 197-226 in *Between Past and Future: Eight Exercises in Political Thought*. New York: Viking Press.

The supply of complaints is escalating tremendously—threatening to burden this institution with a Sisyphean struggle of processing and closing, processing and closing, processing and closing ... And, to what end? What will be achieved through all your hard work?

It might be possible to wholly excise the tumor of complaints – rather than accept its malignant growth as a predestined outcome. To do so would require a serious treatment of *the underlying cause for complaint*. The complaints themselves tell us *why* Virginians are complaining. They are a precious clue in how to solve this particular problem.

In more psychological terms, the complaints are a 'presenting problem,' the symptomatic expression of a deeper, structural pathology. Presenting problems can only be seriously treated when their root cause is identified. Do the Behavioral Science Boards wish to grasp the *root causes for complaint*?

It appears, paradoxically, that the Behavioral Science Boards are working tirelessly to entrench the complaint colossus by lopsidedly focusing their efforts on supplying Virginians with more practitioners. The supply is expanding, and this office recognizes that more complaints will have to be dealt with. But, the burden of hundreds upon hundreds of endlessly replicating complaints attaches only incidentally to the increasing quantity of service providers.

The root causes of these complaints may possibly be found instead in the *qualities of services* and in the available *modalities for resolution*.³

The Behavioral Science Boards might extend more gracious invitations to engage in a public dialogue about the root causes of complaints – even go so far as to speak directly with the people writing all these hundreds of complaints. This approach might yield a fruitful alternative to endlessly 'processing and closing' this colossus.

Civil H

Carol J. Petty, PhD Faculty, Department of Sociology and Anthropology Affiliate Faculty, Center for Social Science Research George Mason University

³ This is simply a provisional hypothesis that can only be substantiated, revised, and/or refuted through a serious study of the contents of the complaints themselves and the motivations of the complainants.

DRAFT



Virginia Board of Social Work

Quarterly Board Meeting Minutes Friday, November 3, 2023, at 10:00 a.m. 9960 Mayland Drive, Henrico, VA 23233 Board Room 1

PRESIDING OFFICER:	Canek Aguirre, Citizen Member, Board Chairperson
BOARD MEMBERS PRESENT:	Eboni Bugg, MSW, LCSW Elke Cox, MSW, LCSW Martha Meadows, MSW, LCSW Denise Purgold, MSW, LCSW Sherwood Randolph, MSW, LCSW
BOARD MEMBERS ABSENT:	Gloria Manns, MSW, LCSW Teresa Reynolds, MSW, LCSW Ruth Ann Smulik, Citizen Member
BOARD STAFF PRESENT:	Jaime Hoyle, JD, Executive Director Shaderra Jefferson, Licensing Specialist Jennifer Lang, Deputy Executive Director- Discipline Charlotte Lenart, Deputy Executive Director- Licensing Sharniece Vaughan, Licensing Specialist
DHP STAFF PRESENT:	Erin Barrett, JD, Director of Legislative and Regulatory Affairs, Department of Health Professions James Jenkins, RN, Agency Deputy Director, Special Advisor to the Governor on Workforce Matt Novak, Policy & Economic Analyst, Department of Health Professions
BOARD COUNSEL PRESENT:	James Rutkowski, Assistant Attorney General
PRESENTATION SPEAKERS:	Barbara Hodgdon, PhD, Deputy Director, Healthcare Workforce Data Center, DHP
PUBLIC ATTENDEES:	Demetria Davis, LCSW Debra Riggs, Executive Director, National Association of Social Workers (NASW)
CALL TO ORDER:	Mr. Aguirre called the Board Meeting to order at 10:06 a.m.
ROLL CALL/ESTABLISHMENT OF A QUORUM:	An introduction was done of all Board members and staff. Six members of the Board were present at roll call; therefore, a quorum was established.
MISSION STATEMENT:	Mr. Aguirre read the mission statement of the Department of Health Professions, which was also the mission statement of the Board.
ADOPTION OF AGENDA:	Mr. Aguirre announced that two petitions for rulemaking need to be added to the legislative report. Mr. Randolph made a motion, which was properly seconded by Ms. Cox, to adopt the agenda with the two additions. The motion passed unanimously.
PUBLIC COMMENT:	No public comment was provided.
APPROVAL OF MINUTES:	The Board reviewed the minutes from the last meeting held on August 18, 2023.

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AGENCY REPORT:

Motion: Ms. Randolph made a motion, which Ms. Purgold properly seconded, to approve the minutes from the August 18, 2023 meeting as presented. The motion passed unanimously.

Mr. Jenkins thanked the Board members for their commitment and service to the Board and profession.

Mr. Jenkins provided an overview of the Behavioral Health Care efforts and indicated that he and Ms. Hoyle will be providing a presentation in November on the Right Help Right Now updates sharing the progress on workforce developments and initiatives.

Mr. Jenkins announced that the Agency is currently planning for the next General Assembly session.

BOARD CHAIR REPORT:

Nothing to report.

PRESENTATIONS:

• Virginia's Licensed Master's Social Work Workforce

Dr. Hodgdon presented a PowerPoint presentation on the Master's Social Work Workforce in Virginia. The presentation concluded that there was an increase in LMSWs, two thirds of LMSW have a micro concentration and a fourth have a macro concentration, of the macro LMSWs licensees, 68% stated they provide clinical services and 82% of micro LMSW stated that they provide clinical services, a majority of the LMSWs are not eligible for licensure and the lowest concentration of LMSWs are located in the South and Southwest Virginia.

• Virginia's Licensed Clinical Social Work Workforce

Dr. Hodgdon presented a PowerPoint presentation on the Clinical Social Work Workforce in Virginia. The presentation concluded that there was an increase in licensees, a younger age distribution of licensees, diversity index is increasing overtime for LCSWs, median income is higher than median education dept and the percentage of LCSW intending to retire by 65 years of age has decreased.

LEGISLATION & REGULATORY REPORT:

• Chart of Regulatory Actions

Ms. Barrett reviewed with the Board the current regulatory actions for the Board of Social work as of October 23, 2023. A copy of the chart was included in the agenda packet.

Legislative Actions

Ms. Barrett indicated that during Governor Younkin recent visit he announced that he may be supporting legislation to eliminate the Board of Health Professions. Ms. Barnett explained that the Board of Health Professions does not develop any policies for the Agency. Therefore, it is unlikely that there will be any appointments to the Board of Health Professions until the Governor makes a decision.

Ms. Barrett gave an update on the Music Therapy Regulations and advised the Board that the Music Therapy Advisory Board recently met to come up with proposed reduction in requirement for Music Therapist. The proposed reduction in regulations from the Music Therapy Advisory Board will not come before the Board until she receives guidance from Secretary's office.

• Definition of "generalist social work"

Ms. Barrett stated that the Office of Attorney General suggested the Board define "generalist social work" in the proposed regulations. Ms. Barrett stated that the Board could either amend the proposed regulations with a definition of generalist social work or could delete section C in 18VAC140-20-37 from the current proposed action. After a lengthy discussion, the Board decided to leave section 37 as is and to review it at a later date.

Motion: Mr. Randolph made a motion, which Ms. Bugg properly seconded, to keep the original language in 18VAC140.20.37 of the current proposed regulations and issue a Notice of Intended Action (NOIRA) to amend section 37 of regulations 18VAC140.20. The motion passed unanimously.

• Completion of Periodic Review of Public Participation Guidelines Contained in 18VAC140-11

Ms. Barrett reviewed the Public Participation Guidelines with the Board.

Motion: Ms. Buggs made a motion, which Ms. Meadows properly seconded, to retain 18VAC140-11 as is. The motion passed unanimously.

Consideration of petition for rulemaking (Petitioner-Erin Tomlinson)

The Board considered the request to amend 18VAC140-20-105(B)(1)(d) to include Eye Movement Desensitization and Reprocessing International Association (EMDRIA) and American Psychology Association (APA) as approved trainings. The Board accepted the petition for rulemaking for adding APA as a continuing education provider but did not elect to include EMDRIA training in the list of approved providers, as most EMDRIA training is approved by one of the entities already listed in the regulation or by the APA.

Motion: Mr. Randoph made a motion, which Ms. Purgold properly seconded, to accept the petition and initiate rule making and accept APA as an approved provider and to initiate a Notice of Intended Action (NOIRA) to amend rule 18VAC140-20-105(B)(1)(d). The motion passed unanimously.

Consideration of petition for rulemaking (Petitioner – Shanta Clay)

The Board considered the request to amend 18VAC140-20-70 to set passage of the licensure examination at 99 for all levels of licensure. The Board does not control or evaluate the passing score on the national examination, the passing score changes depending on the test version used, and the Board does include individual passing scores in regulations for examinations as a policy.

Motion: Ms. Purgold made a motion, which Ms. Bugg properly seconded, to deny the petitioner request. The motion passed unanimously.

EXECUTIVE DIRECTOR'S REPORT:

Ms. Hoyle thanked staff and announced that the Governor had appointed Ruth Ann Smulik as the Board's citizen member.

Ms. Hoyle informed the Board that as part of her work for the Governor's Right Help, Right Now behavioral health initiative, she attended a faith-based forum, and that Ms. Cox was also in attendance.

With respect to workforce, the Board of Social Work continues to be praised for its

November 3, 2023	Quarterly Board Meeting Minutes	Virginia Board of Social Work
	actions to balance protecting the public but also workforce shortage. Ms. Hoyle indicated that sl states to discuss reciprocity. She hopes to have meeting.	he had reached out to the bordering
	Ms. Hoyle also informed the Board that the con Work Boards conflicted with the Board meeting attending on behalf of the Board and will provid	g, but that Ms. Austin was currently
DISCIPLINE REPORT:	Ms. Lang reported that from January 1 to Octob Work received 128 completed investigations fro represents a 41% increase when compared to the	om the Enforcement Division. This
	<u>Staffing</u> Ms. Lang reported that in addition to herself, the time staff member, Christy Evans. Ms. Lang and process for the three behavioral science boards a cases, Ms. Evans also manages compliance mor education audits. However, Ms. Lang reported t hired as a part-time audit specialist, which will a on discipline and managing the informal confere	d Ms. Evans manage the disciplinary and, in addition to the discipline hitoring and the annual continuing hat Cheryl Branch was recently allow Ms. Evans more time to focus
	<u>Hearings</u> Ms. Lang announced that a formal hearing will following the quarterly board meeting. She requ as soon as possible if they will not be available panel of the board is available to move forward	tested that board members advise her to attend, so that she can ensure a
LICENSING REPORT:	Ms. Lenart report on the licensure statistics and Board of Social Work. A copy of the report give packet. She indicated that staff continue to work satisfaction survey and applications are currently business days.	en was included in the agenda c hard which is reflective of the 97%
	Ms. Lenart stated that Shaderra Jefferson was re licensing specialist and Darlene Graham retired Board.	
COMMITTEE REPORTS:	Ms. Lenart reported that staff recently updated t application instructions immediately following t	
	• Ad Hoc Committee Mr. Randolph and Ms. Buggs met on October 3 needed to present testing information to local in committee determined that a better use of the Be to have ongoing communication with the social communication to address regulatory issues, AS Theory support program for test takers, Social W the limitation of the Board.	stitutions and colleges. The oard's time and resources would be work community by having timely SWB pass rates, ASWB's Fifth
NEXT MEETING DATES:	The next meeting is scheduled for Friday, March	h 29, 2024.
ADJOURNMENT:	Mr. Aguirre adjourned the meeting at 12:09 p.m	1.

Canek Aguirre, Citizen Member, Chair

Jaime Hoyle, JD, Executive Director



Virginia Board of Social Work Informal Conferences – Agency Subordinate June 21, 2024

The informal conferences, held before an Agency Subordinate of the Board of Social Work, were convened at 10:13 a.m. on June 21, 2024 at the Department of Health Professions, 9960 Mayland Drive, Ste. 201, Henrico, Virginia, Board Room 1.

Agency Subordinate:John Salay, LCSWBoard Staff:Christy Evans, Discipline Case Manager, Board of Social Work

Cases Considered:

Margaret Midboe, LCSW

Attorney for Respondent: Others Present: License No.: Case No.: Nora Ciancio, Esquire Emily Tatum, Senior Adjudication Specialist, APD 0904009726 224596

Margaret Midboe appeared in person, with legal counsel, and discussed the allegations in the Notice dated May 6, 2024.

A recommended decision will be mailed to Margaret Midboe 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 Ms. Midboe 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 1:11 p.m.

Jennifer Lang, Deputy Executive Director Virginia Board of Social Work June 24, 2024

Date

Board of Social Work Current Regulatory Actions As of June 14, 2024

In the Governor's office

None.

In the Secretary's office

VAC	Stage	Subject Matter	Submitted from agency	Time in current location	Notes
18VAC140-30	Proposed	Initial regulations for licensure of music therapists	1/19/2022	763 days	Implements licensure of music therapists pursuant to directive by the General Assembly

At the Department of Planning and Budget

VAC	Stage	Subject Matter	Submitted from agency	Time in current location	Notes
18VAC140-20	Proposed	Amendments resulting from 2022 periodic review	12/19/2022	36 days	Amendments from 2022 periodic review excluding the section 37 changes that were filed in a separate action

At the Office of the Attorney General

None.

Recently effective or awaiting publication

VAC	Stage	Subject Matter	Publication date	Effective date
18VAC140- 20	NOIRA	Acceptance of APA approved trainings as CE	6/17/2024	Comment period 6/17/2024 – 7/17/2024. Board will vote on proposed regulations at next Board meeting.

18VAC140- 20	NOIRA	2022 periodic review changes to section 37	6/17/2024	Comment period 6/17/2024 – 7/17/2024. Board will vote on proposed regulations at next Board meeting.
18VAC140- 20	Final	Reduction in CE hours for continuation of approval to be a supervisor	6/17/2024	Effective date 7/17/2024

March 2024 Social Work General Assembly Update

Duplicate bills removed

HB 326 Social Work Licensure Compact; authorizes Virginia to become a signatory to Compact.

Chief patron: Glass

Social Work Licensure Compact. Authorizes Virginia to become a signatory to the Social Work Licensure Compact. The Compact allows social workers who have or are eligible for an active, unencumbered license in the compact member state where they reside to apply for a multistate license. After verifying eligibility, the social worker is granted a multistate license that authorizes practice in all other compact member states. The Compact takes effect when it is enacted by a seventh member state. Identical to SB239

02/22/24 Senate: Rereferred to Finance and Appropriations 02/29/24 Senate: Reported from Finance and Appropriations (12-Y 2-N) 03/04/24 Senate: Constitutional reading dispensed (40-Y 0-N) 03/05/24 Senate: Read third time 03/05/24 Senate: Passed Senate (26-Y 14-N)

Awaiting Governor signature (Deadline April 8)

HB 606 Clinical social workers, licensure examination alternative.

Chief patron: Price

DEAD

Summary as introduced:

Board of Social Work; licensure of clinical social workers; examination alternative; regulation amendments. Directs the Board of Social Work to amend the regulations for the licensure of clinical social workers to allow applicants to utilize an examination alternative, which shall consist of at least 1,500 hours of supervised experience that is obtained within the five calendar years immediately preceding the date of application. The bill clarifies that the examination alternative shall be in addition to any other supervised clinical experience required for licensure. 02/12/24 House: Read third time and passed House (50-Y 45-N)
02/12/24 House: VOTE: Passage (50-Y 45-N)
02/13/24 Senate: Constitutional reading dispensed
02/13/24 Senate: Referred to Committee on Rehabilitation and Social Services
03/01/24 Senate: Failed to report (defeated) in Rehabilitation and Social Services (6-Y 8-N)

Letter sent requiring Board of Social Work to provide report.

HB 120 DPOR and DHP; certain suspensions not considered disciplinary action.

Chief patron: Sullivan

Summary as introduced:

Department of Professional and Occupational Regulation; Department of Health Professions; certain suspensions not considered disciplinary action. Prohibits any board of the Department of Professional and Occupational Regulation or the Department of Health Professions issuing a suspension upon any regulant of such board pursuant to such regulant's having submitted a check, money draft, or similar instrument for payment of a fee required by statute or regulation that is not honored by the bank or financial institution named from considering or describing such suspension as a disciplinary action.

02/22/24 House: Impact statement from DPB 02/24/24 Senate: Signed by President 03/01/24 House: Enrolled Bill communicated to Governor on March 1, 2024 03/01/24 Governor: Governor's Action Deadline 11:59 p.m., March 8, 2024 03/08/24 Governor: Approved by Governor-Chapter 18 (effective 7/1/24)

HB 722 Regulatory Budget Program; established, report.

Chief patron: Webert

DEAD

Summary as introduced:

Department of Planning and Budget; Regulatory Budget Program established;

report. Directs the Department of Planning and Budget to establish a Regulatory Budget Program under which each executive branch agency subject to the Administrative Process Act shall reduce overall regulatory requirements by 30 percent by January 1, 2027. The bill requires the Department to report to the Speaker of the House of Delegates and the Chairman of the Senate Committee on Rules on the status of the Program no later than October 1 of each year, beginning October 1, 2025. Finally, the bill provides that the Department, in consultation with the Office of the Governor, shall issue guidance for agencies regarding the Program and how an agency can comply with the requirements of the Program. The bill has an expiration date of January 1, 2027.

01/09/24 House: Referred to Committee on General Laws 01/22/24 House: Assigned GL sub: Professions/Occupations and Administrative Process 01/25/24 House: Subcommittee recommends striking from docket (8-Y 0-N) 01/30/24 House: Stricken from docket by General Laws (22-Y 0-N)

HB 1293 Behavioral health and nursing; revision of policies that hinder, etc., health care workforce.

Chief patron: Willett

DEAD

Summary as introduced:

Behavioral health; nursing; work group; report. Directs the Virginia Health Workforce Development Authority to convene a work group to identify and propose revisions to current regulations and policies that hinder the development, retention, and productivity of the health care workforce in behavioral health and nursing.

01/10/24 House: Prefiled and ordered printed; offered 01/10/24 01/10/24 House: Referred to Committee on Rules 01/25/24 House: Assigned Rules sub: Studies Subcommittee 01/29/24 House: Subcommittee recommends continuing to 2025 02/01/24 House: Continued to 2025 in Rules

HB 1428 Regulatory boards; application review timelines.

Chief patron: Shin

DEAD

Summary as introduced:

Department of Professional and Occupational Regulation; application review timelines. Requires each regulatory board within the Department of Professional and Occupational Regulation to adopt a timeline of each stage that a completed application for licensure, certification, or registration will undergo as it is reviewed by such board. The bill also requires that such regulatory board approve any completed application within 30 days of its receipt unless such board has reasonable certainty that such application includes grounds for denial.

01/18/24 House: Referred to Committee on General Laws 01/26/24 House: Assigned GL sub: Professions/Occupations and Administrative Process 02/08/24 House: Subcommittee recommends striking from docket (7-Y 0-N) 02/08/24 House: Stricken from docket by General Laws (20-Y 0-N)

SB 682 Health professions; universal licensure, requirements.

Chief patron: Suetterlein

DEAD

Summary as introduced:

Health professions; universal licensure; requirements. Requires health regulatory boards within the Department of Health Professions to recognize licenses or certifications issued by other United States jurisdictions, as defined in the bill, as fulfillment for licensure or certification in the Commonwealth if certain conditions are met. The bill also requires such health regulatory boards to recognize work experience as fulfillment for licensure or certification in the Commonwealth if certain conditions are met. The bill does not apply to licensure for physicians or dentists.

02/08/24 Senate: Engrossed by Senate - committee substitute 02/08/24 Senate: Motion to rerefer to committee agreed to 02/08/24 Senate: Rereferred to Rules 02/09/24 Senate: Continued to 2025 in Rules (8-Y 6-N 1-A)

Agenda Item: Review of request for report following 2024 General Assembly

Included in your agenda package:

- HB606, which would have required the Board to accept an examination alternative for licensure; and
- May 2024 letter received from Senator Favola, Chair of the Senate Committee on Rehabilitation & Social Services, directing the Board to provide a report to the General Assembly.

Action needed:

• No action needed. For review only.

	24100866D
1	HOUSE BILL NO. 606
2 3	Offered January 10, 2024
	Prefiled January 9, 2024
4	A BILL to direct the Board of Social Work to amend the regulations for the licensure of clinical social
5	workers to allow an applicant who has taken but has not successfully completed the licensing
6 7	examination to utilize an examination alternative.
'	Patron—Price
8	
9	Referred to Committee on General Laws
10	
11	Be it enacted by the General Assembly of Virginia:
12	1. § 1. That the Board of Social Work (the Board) shall amend the regulations for the licensure of
13	clinical social workers to allow an applicant to utilize an examination alternative that allows the Board
14 15	to ascertain the qualifications and fitness of the applicant for licensure as a clinical social worker. The examination alternative shall consist of at least 1,500 hours of supervised clinical experience that is
13 16	obtained within the five calendar years immediately preceding the date of application. Such supervised
17	experience completed as an examination alternative shall be in addition to any other supervised clinical
18	experience required for licensure. An applicant who has taken but not successfully completed the
19	licensing examination shall be eligible to utilize the examination alternative, and such applicant may use
20	supervised experience hours previously accumulated towards such examination alternative, provided that
21	such hours were earned in addition to any other supervised clinical experience required for licensure.
22	An applicant's eligibility for licensure as a clinical social worker shall be based on the applicant's
23	supervised experience hours and shall not be contingent on the applicant's current employment. An
24 25	applicant may utilize both the examination alternative and the licensing examination pathways
43	concurrently.

HB606

SENATE OF VIRGINIA

BARBARA A. FAVOLA 40TH SENATORIAL DISTRICT PART OF ARLINGTON COUNTY 2319 18TH ST. NORTH ARLINGTON, VIRGINIA 22201-3506



April 23, 2024

COMMITTEE ASSIGNMENTS: REHABILITATION AND SOCIAL SERVICES, CHAIR AGRICULTURE. CONSERVATION AND NATURAL RESOURCES EDUCATION AND HEALTH FINANCE AND APPROPRIATIONS RULES

Chair Canek Aguirre Virginia Board of Social Work Perimeter Center 9960 Mayland Drive, Suite 300 Henrico, Virginia 23233-1463

RE: HB606, Delegate Price

Chair Aguirre,

I write to you in regards to House Bill 606, sponsored by Delegate Marcia Price, that sought to create an alternative path to licensure in Virginia that did not include passing the Association of Social Work Board (ASWB) exam. The Senate Committee on Rehabilitation and Social Services failed to pass the bill at its February 23, 2024, meeting.

While the legislation did not advance this session, there was testimony that compels me, as the Chair of the Committee, to request additional information from the Virginia Social Work Board (the Board). Most notably the testimony we heard related to claims of disparate pass rates on the ASWB exam among White non-Hispanic test-takers and Black and Brown test-takers. Please share with me any data you may have on the pass rates of each racial and ethnic cohorts. The existence of racial and ethnic bias in the ASWB test is concerning and something that the Board must investigate and take steps to correct if findings support this claim.

In any case, there is always value in preparing and supporting a professionally accepted alternative path to licensure. I believe that alternative licensure paths have merit as long as there is some verification of competency. Based on comments from members of the Rehabilitation and Social Services Committee, others share my belief as well.

The legislation would have directed the Board to amend the regulations for the licensure of clinical social workers to allow applicants to utilize an examination alternative. This alternative would have consisted of at least 1,500 hours of supervised experience that is obtained within the five calendar years immediately preceding the date of application. These hours would have been in addition to any other supervised clinical experience required for licensure.

I would like to suggest the Board review the current regulations related to the licensure of clinical social workers and evaluate the effectiveness of the exam as a regulatory instrument. I would encourage as part of your review that you consider:

- 1. The use of any anti-bias measures currently required of professional-level licensure exams;
- 2. Current and proposed efforts the Board has made to diversify the clinical social worker workforce and improve instruction and support at Virginia's schools of social work;
- 3. Steps other states are actively taking related to creating alternative licensure pathways. This analysis should include any positive or negative implications or outcomes including cautionary indicators;
- 4. The Board's capacity to manage any alternative pathway including one that may include at least 1500 hours of supervised clinical experience beyond what is currently required;
- 5. Additional, objective oversight measures that might be utilized by the Board in the absence of the exam. This review should include the consideration of objective, alternative competence measurements that could be consistently utilized by the Board as the regulators of the clinical social work license;
- 6. Any steps the Board is taking towards strengthening supervision, credentialing, oversight, and accountability to include an evaluation of supervisory hours as an equivalent replacement for an exam and a step towards licensure.
- 7. And, the state-level impact on the Social Work Licensure Compact if Virginia moves forward with an alternative licensure pathway. This review should include the impact on the Commonwealth's ability to remain in the Compact but also on individuals who earn their license through an alternative path being eligible for the multi-state license.

The Senate Committee on Rehabilitation and Social Services would be interested in a report on your review if that is something you could produce. I realize that this list is extensive and may create a workload not currently on the Board's agenda, but given the testimony the Committee received, I would like to be fully prepared for this type of legislation next session.

From meetings I held and testimony the Committee heard, it is my understanding that part of the role of a regulatory association like ASWB is to provide services to its members like the Board in Virginia. I encourage you to use them as a resource. Dr. Stacey Hardy-Chandler, Executive Director of ASWB, shared with me that they regularly conduct independent assessment research as part of professional exam standards. She also shared that ASWB has embarked on a regulatory research agenda in partnership with educational institutions and researchers to consider alternative competence measurement formats, contextual factors impacting disparate outcomes and other alternatives for regulators to have a voice in their licensure decisions. I encourage including a summary of that work in any report you are able to provide to the Senate Committee on Rehabilitation and Social Services.

If the Board is able, I would ask that you provide an update to the Chair of the Senate Rehabilitation and Social Services Committee by November 1, 2024, with any recommendations on action that the General Assembly should consider to support efforts to diversify and strengthen the clinical social workforce in Virginia. I appreciate the important work you and the Virginia Social Work Board does and look forward to working with you to create a more diverse, highly qualified social worker workforce in the Commonwealth.

Sincerely,

Barbara Farsla

Barbara Favola Chair, Senate Committee on Rehabilitation and Social Services

Agenda Item: Consideration of Stephenson Petition for Rulemaking

Included in your agenda packet:

- Petition for rulemaking to amend requirements for supervisors to include licensed professional counselors
- ▶ 18VAC140-20-50(B)
- > A summary of comments provided on TownHall.

Staff Note: 11 comments were provided on this petition: 10 opposed the petition and one provided partial support

Action Needed:

Motion or accept the petition for rulemaking and issue a NOIRA to amend requirements pursuant to the petition

Or

> Motion to deny the petition for rulemaking

Virginia Department of Health Professions Board of Social Work BEHA		Email: <u>socialwork@dhp.virginia.gov</u> (804) 367-4441 (Tel) (804) 977-9915 (Fax) DHP – MAILROOM
SCIE	NCES	JAN 10 2024

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,)

Stephenson, Sophia, K.

Street Address	Area Code and Telephone Number	
3629 Mullis Ct	804-543-2060	
City	State Zip Code:	
City Hayes	Virginia <u>2 3 0 7 2</u>	

sophiekstephenson@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.

I am pentitioning for the board to amend the 'Regulations Governing the Practice of Social Work', 18VAC140-20-50, section B.

2. Please summarize the substance of the change you are requesting and state the rationale or purpose for the new or amended rule. I am requesting for the board to change the limitation for supervisors to change to include Licensed Professional Counselors (LPC's) as approved supervisors. If a social worker intends to practice as an LCSW in a theraputic field, a LPC is more than qualified to provide the appropriate supervision needed for them to receive supervisory hours. The licensing requirements for an LPC and LCSW are very similar in terms of hours needed to receive those certifications and the education that they would receive in the field while being supervised. Keeping the requirements for supervisors so limited makes it incredibly difficult for social workers to obtain supervision hours in areas that are in need of more LCSW's, further limiting the opportunities for future social workers, or the desire for them to pursue licensure. Changing this limitation to include LPC's as approved supervisors would allow for social workers to have more opportunities to pursue licensure and enrich the field of social work.

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.

Signature:

Jophia Stephene

Date: 01/03/2024

18VAC140-20-50. Experience requirements for a licensed clinical social worker.

B. Requirements for supervisors.

1. The supervisor shall hold an active, unrestricted license as a licensed clinical social worker in the jurisdiction in which the clinical services are being rendered with at least two years of post-licensure clinical social work experience. The board may consider supervisors with commensurate qualifications if the applicant can demonstrate an undue burden due to geography or disability or if supervision was obtained in another United States jurisdiction.

2. The supervisor shall have received professional training in supervision, consisting of a three credit-hour graduate course in supervision or at least 14 hours of continuing education offered by a provider approved under <u>18VAC140-20-105</u>. The graduate course or hours of continuing education in supervision shall be obtained by a supervisor within five years immediately preceding registration of supervision.

3. The supervisor shall not provide supervision for a family member or provide supervision for anyone with whom the supervisor has a dual relationship.

4. The board may consider supervisors from jurisdictions outside of Virginia who provided clinical social work supervision if they have commensurate qualifications but were either (i) not licensed because their jurisdiction did not require licensure or (ii) were not designated as clinical social workers because the jurisdiction did not require such designation.



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program, supervision, and studying for the LPC exam. I am intimately familiar with what is required to become eligible to take the LPC exam. I have hosted grad students in various programs working towards earning a degree that would enable them to pursue the LPC credential. There are at least 3 grad degrees that can lead to the LPC as opposed to one MSW degree for the LCSW. At one time I could provide at least a year of supervision for those seeking the LPC. I am opposed to the petition unless the Board of Counseling approves LCSWs to provide supervision to those seeking the LPC credential. I take offense to the Board of Counseling excluding LCSWs from providing supervision to those seeking the LPC credential as I take offense to the petition that seeks to allow LPCs to provide supervision to those with an MSW. I intend to submit my own petition asking that LCSWs be allowed to provide supervision towards those seeking the LPC credential.

CommentID: 222213

Commenter: Joseph G Lynch LCSW

2/20/24 11:58 pm

Opposed to Petition for Rulemaking #402

I want to voice opposition to the Petition for Rulemaking #402 that request an "*Amendment to requirements for supervisors to include licensed professional counselors*" The Board of Social Work has made progress over the last 30 years to move toward the goal of LCSW's who are Board Approved Supervisors being the sole providers of supervision for those seeking the LCSW license. There are over 800 Board Approved Supervisors and a supervise in social work may arrange for virtual supervision from any of those 800+ supervisors. There no longer exist a claim of a lack of available supervisors based on geography. Any supervisee can now find a LCSW Board Approved Supervisor so I am opposed to this petition.

CommentID: 222221

Commenter: Debra ARiggs

2/22/24 2:03 pm

Professional Counselors Supervising Social Workers for a license

Thank you for the opportunity to comment on the Petition for Rule Making and proposal to allow licensed professional counselors to supervise social workers under the jurisdiction of the Virginia Board of Social Work. This rule is ill-advised and potentially detrimental to the integrity and efficacy of social work practice. There are several compelling reasons why this rule should be vehemently opposed:

Divergent Educational Backgrounds: Licensed counselors and social workers undergo vastly different educational trajectories. While social work education emphasizes a comprehensive understanding of social justice, human rights, and systemic oppression, counseling programs typically focus on individual mental health and therapeutic interventions. These distinct educational backgrounds do not adequately prepare counselors to supervise social workers, as they lack the necessary knowledge and skills related to macro-level social work practice and clinical practice.

Incompatibility of Ethical Codes: Social workers adhere to a distinct Code of Ethics established by the National Association of Social Workers (NASW), which emphasizes principles such as social justice, cultural competence, and advocacy. Conversely, licensed counselors adhere to ethical guidelines set forth by organizations like the American Counseling Association (ACA) or the American Psychological Association (APA), which may prioritize different values and priorities. Allowing counselors to supervise social workers may create ethical conflicts and undermine the integrity of social work practice.

Differences in Scope of Practice: Social workers and counselors serve distinct roles within the mental health and human services field. Social workers are trained to address a broad range of social issues, including poverty, homelessness, and systemic injustices, while counselors primarily focus on providing therapy and mental health interventions to individuals, couples, or families. The supervision provided by counselors may not adequately address the multifaceted needs of social work clients or prepare social workers to address systemic barriers to well-being.

Risk to Client Welfare: Social work supervision plays a critical role in ensuring the safety and well-being of clients served by social workers. Supervisors are responsible for guiding practitioners in ethical decision-making, professional development, and the application of evidence-based interventions. Allowing counselors to supervise social workers may compromise the quality of supervision and place clients at risk of receiving inadequate or inappropriate services.

Educational Curriculum Disparities: The educational curriculum for social work and counseling programs differs significantly in terms of content, focus, and skill development. Social work education emphasizes a holistic understanding of human behavior within the context of social systems, while counseling programs prioritize clinical assessment, diagnosis, and therapeutic interventions. These differences in educational curriculum may result in gaps in knowledge and skill development that hinder counselors' ability to effectively supervise social workers.

In conclusion, the proposal to allow licensed counselors to supervise social workers is misguided and poses significant risks to the integrity and effectiveness of social work practice. Rather than blurring the lines between distinct professions, efforts should be focused on enhancing collaboration and communication between social workers and counselors while upholding the unique roles and contributions of each profession.

CommentID: 222222

Commenter: Anonymous

2/22/24 3:59 pm

Oppose this

I oppose this ruling and #402. Thank you for giving us our freedom to voice our opinion.

CommentID: 222223

Commenter: Karen Martin

2/26/24 2:54 pm

Oppose

LPCs should not be able to supervise for LCSWs as they have different guiding principals, different course work and different scope of practice. One cannot adquately supervise/train the other.

CommentID: 222227

Commenter: Autumn Richardson, Innovative Care LLC

2/29/24 11:57 am

Oppose

I want to voice opposition to the Petition for Rulemaking #402 that request an "*Amendment to requirements for supervisors to include licensed professional counselors*" The Board of Social Work has made progress over the last 30 years to move toward the goal of LCSW's who are Board Approved Supervisors being the sole providers of supervision for those seeking the LCSW license. There are over 800 Board Approved Supervisors and a supervisee in social work may arrange for virtual supervision from any of those 800+ supervisors. There no longer exist a claim of a lack of available supervisors based on geography. Any supervisee can now find a LCSW Board Approved Supervisor so I am opposed to this petition.

CommentID: 222242

Commenter: Anonymous

2/29/24 12:00 pm

Oppose

I believe this proposed change in regulations is not in the best interest of the SW Profession and may potentially detrimental to the integrity and efficacy of social work practice. There are several compelling reasons why this rule should be strongly opposed:

Divergent Educational Backgrounds: Licensed counselors and social workers undergo vastly different educational trajectories. While social work education emphasizes a comprehensive understanding of social justice, human rights, and systemic oppression, counseling programs typically focus on individual mental health and therapeutic interventions. These distinct educational backgrounds do not adequately prepare counselors to supervise social workers, as they lack the necessary knowledge and skills related to macro-level social work practice and clinical practice.

Incompatibility of Ethical Codes: Social workers adhere to a distinct Code of Ethics established by the National Association of Social Workers (NASW), which emphasizes principles such as social justice, cultural competence, and advocacy. Conversely, licensed counselors adhere to ethical guidelines set forth by organizations like the American Counseling Association (ACA) or the American Psychological Association (APA), which may prioritize different values and priorities. Allowing counselors to supervise social workers may create ethical conflicts and undermine the integrity of social work practice.

Differences in Scope of Practice: Social workers and counselors serve distinct roles within the mental health and human services field. Social workers are trained to address a broad range of social issues, including poverty, homelessness, and systemic injustices, while counselors primarily focus on providing therapy and mental health interventions to individuals, couples, or families. The supervision provided by counselors may not adequately address the multifaceted needs of social work clients or prepare social workers to address systemic barriers to well-being.

Risk to Client Welfare: Social work supervision plays a critical role in ensuring the safety and well-being of clients served by social workers. Supervisors are responsible for guiding practitioners in ethical decision-making, professional development, and the application of evidence-based

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3/5/24, 8:10 AM

Virginia Regulatory Town Hall View Comments

interventions. Allowing counselors to supervise social workers may compromise the quality of supervision and place clients at risk of receiving inadequate or inappropriate services. **Educational Curriculum Disparities:** The educational curriculum for social work and counseling programs differs significantly in terms of content, focus, and skill development. Social work education emphasizes a holistic understanding of human behavior within the context of social systems, while counseling programs prioritize clinical assessment, diagnosis, and therapeutic interventions. These differences in educational curriculum may result in gaps in knowledge and skill development that hinder counselors' ability to effectively supervise social workers.

In conclusion, the proposal to allow licensed counselors to supervise social workers is misguided and poses significant risks to the integrity and effectiveness of social work practice. Rather than blurring the lines between distinct professions, efforts should be focused on enhancing collaboration and communication between social workers and counselors while upholding the unique roles and contributions of each profession. CommentID: 222243

Commenter: Lindsay Pugh

3/2/24 10:57 am

Oppose

Due to the significant difference in LPC and LCSW requirements, ethics, and education, I am opposed to the power imbalance inherent in this role and oppose the proposed decision to allow LPCs to provide supervision to license-eligible social workers.

CommentID: 222248

Commenter: William, M.A.; Doctoral Candidate

3/2/24 4:59 pm

Partial Support - Possibiliy of Flexibility and Compromise

Until 2019, the Board of Counseling allowed LCSWs (and Psychologists) to supervise LPCs towards licensure. I want to say at the beginning of this comment that I also support changing those new rules to allow LCSWs to supervise Residents in Counseling as well. I do not think it unreasonable to ask both Boards to work together to ensure there is a two-way arrangement.

I think that at least **part** of the supervised hours should be able to come from people in other, closely related, disciplines. Perhaps the Board could decide that only up to half of supervised experience hours could come from an LPC. I also think it could be fair to say that an LPC must have a doctorate in order to supervise Social Workers towards becoming LCSWs. I certainly see no reason that an LPC with a doctorate should not be allowed to supervise some portion of a Social Worker's hours if that Social Worker wants.

To respond to some of the concerns others have here, I would point out that, in terms of codes of ethics, everyone with a license is bound to follow the rules of the licensure Board they are licensed under. Social Workers would have to follow their Board's regulations regardless of who is supervising them. Even within a discipline individuals only have to follow their professional association's Code of Ethics if they are a member of that organization, which many professionals are not - so we already have many professionals in these fields who are not actually bound by their professional organization's code of ethics. This may be unfortunate, but it is already the case. However, they are all bound by state licensure Board regulations, which does not change under this proposed new flexibility in supervision. *This rule would not change anything about the regulations that Social Workers in Virginia have to follow, aside from the new option for supervision*. Some individuals in this public comment section may make broad claims about risk to the public, but I see no actual evidence of that. I do not think that having LCSWs supervise LPC Residents before 2019 was a risk to the public.

Virginia Regulatory Town Hall View Comments

This new rule would increase access to options for supervision. Yes, supervision may be completed online, but many people prefer in-person supervision, and may wish to work at a site that only has an LPC available as a potential supervisor. On-site supervision has numerous advantages, including that your supervisor may know the area, population, or even a specific client's situation. Finally, many individuals in our fields specialize. It is not unreasonable for a Social Worker who is accruing hours towards licensure to want a supervisor who has specific knowledge of a population they are interested in. What are they to do if no approved supervisor Social Workers in their area have knowledge with that population? For example, if one wants to work with individuals with Cluster C personality disorders, it may be hard to find a supervisor with that particular skill set. If an LPC with such a skill set happens to be available, and both parties are willing to agree to that supervision arrangement, why not have some flexibility to allow it?

In summary, I think it would be beneficial to allow LPCs and LCSWs (at the very least those who have doctorates) to supervise each other for a portion of hours towards licensure in each other's disciplines. I believe this is a very moderate compromise that would help a lot of people, share specialized knowledge across disciplines, and increase access to high quality and specialized supervision. Thank you for considering this, and I do hope both Boards can work this out. CommentID: **222250**

Commenter: Angelica Gehlich

3/4/24 4:04 pm

Oppose

Hello,

I am writing in opposition of this petition for change based on the different paths and backgrounds of LPCs and LCSW and the detrimental impacts to the SW field if LPCs are held at a higher esteem than LCSWs stemming from the suggestion that LPCs can supervise MSW supervisees but LCSWs are unable to supervise LPCs. I support collaboration between the fields, but this petition would create an incorrect hierarchy in mental healthcare. It would be terrible for the community and people we serve to disregard the differences between LPCs and LCSWs.

CommentID: 222251

Commenter: Jackson Caswell

3/4/24 8:20 pm

Oppose

As a supervisee in social work, I would feel concerned about the differences in licensure, education, and requirements between myself in pursuing my LCSW and an LPC supervisor.

CommentID: 222252

Agenda Item: Amendment of Guidance Document to reflect regulatory change

Included in your agenda package:

- Draft revisions to Guidance Document 140-9, reflecting regulatory changes in supervisor CE requirements;
- Final published changes to 18VAC140-20-50 regarding supervisor CE requirements.

Action needed:

• Motion to amend Guidance Document 140-9 as presented.

Virginia Board of Social Work

Content for Training on Supervision for Clinical Social Work

Introduction:

Regulations Governing the Practice of Social Work (Section 18VAC-140-20-50.(C) of the Regulations Governing the Practice of Social Work applies apply specifically to those practitioners who provide providing supervision to social workers who intend to apply for clinical licensure in the Commonwealth of Virginia.

The requirement states that supervisors must have <u>an initial</u> 14 hours of continuing education in supervision or a three-hour graduate level course in supervision. -A supervisor must <u>thereafter</u> <u>obtain 7 hours of continuing education in supervision renew the training</u> every five years. -This requirement recognizes the essential role good supervision plays in the training and mentoring of Social Workers desiring licensure. -The supervisory role <u>has-uses a set of</u> unique knowledge and <u>a set of</u> skills that can be articulated and taught.

Content domains for training:

To clarify the supervisory training, the Board has reviewed a number of existing courses and an updated study produced by the Association of Social Work Boards ("ASWB") in collaboration with the National Association of Social Workers ("NASW"). The Board recommends a Clinical Supervision Course address the following seven Domains:

- Context of Supervision
 - Understanding Scope of Practice
 - Communities of Practice
 - Interdisciplinary Supervision
 - Cultural Awareness and Cross-Cultural Supervision
 - Dual Supervision and Conflict Resolution
 - Parallel Process
 - Theories of Supervision
- Conduct of Supervision
 - Confidentiality
 - Contracting for Supervision
 - Leadership and Role Model
 - Competency
 - Supervisory Signing Off
 - Self-Care
- Legal and Regulatory Issues
 - o Liability
 - Regulations
 - Documentation

- Other Legal Concerns
- Ethical Issues
 - Ethical Decision Making
 - o Boundaries
 - Self-Disclosure
 - o Attending to Safety
 - o Alternative Practice
- Technology
 - Distance Supervision
 - Risk Management
- Evaluation and Outcomes
- Termination

The ASWB and NASW study enumerates each of these competencies in each of these areas. The total study can be secured at <u>https://members.aswb.org/best-practices/supervision-resources/</u> and at

https://www.socialworkers.org/LinkClick.aspx?fileticket=GBrLbl4BuwI%3D&portalid=0.

Additional knowledge content:

A course should also incorporate knowledge of the following:

- The Virginia Board of Social Work Regulations, particularly:
 - 1. Supervision, supervisory responsibilities, and requirements
 - 2. Regulations on the standards of practice
- The Social Work Code of Ethics (NASW or the Clinical Social Work Association)

Teachers/Trainers for a course in supervision:

Teachers/Trainers should instruct persons taking a course in supervision in the competencies as outlined in accordance with acceptable teaching practices to include, but <u>which are not limited</u> to: the didactic method, discussion, role play, <u>and the distribution of relevant readings</u>. Teachers/Trainers should be clinicians with supervisory experience and knowledge of theory and practice in the art of supervision.

Board of Social Work

Reduction in CE hours for continuation of approval to be a supervisor

18VAC140-20-50. Experience requirements for a licensed clinical social worker.

A. Supervised experience. Supervised post-master's degree experience without prior written board approval will not be accepted toward licensure, except supervision obtained in another United States jurisdiction may be accepted if it met the requirements of that jurisdiction. Prior to registration for supervised experience, a person shall satisfactorily complete the educational requirements of 18VAC140-20-49.

1. Registration. An individual who proposes to obtain supervised post-master's degree experience in Virginia shall, prior to the onset of such supervision, or whenever there is an addition or change of a supervisor to a supervisor not currently approved by the board:

a. Register on a form provided by the board;

b. Submit a copy of a supervisory contract completed by the supervisor and the supervisee;

c. Submit an official transcript documenting a graduate degree and clinical practicum as specified in 18VAC140-20-49; and

d. Pay the registration of supervision fee set forth in 18VAC140-20-30.

2. Hours. The applicant shall have completed a minimum of 3,000 hours of supervised post-master's degree experience in the delivery of clinical social work services and in ancillary services that support such delivery. A minimum of one hour and a maximum of four hours of face-to-face supervision shall be provided per 40 hours of work experience for a total of at least 100 hours. No more than 50 of the 100 hours may be obtained in

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group supervision, nor shall there be more than six persons being supervised in a group unless approved in advance by the board. The board may consider alternatives to faceto-face supervision if the applicant can demonstrate an undue burden due to hardship, disability, or geography.

a. Supervised experience shall be acquired in no less than two nor more than four consecutive years.

b. Supervisees shall obtain throughout their hours of supervision a minimum of 1,380 hours of supervised experience in face-to-face client contact in the delivery of clinical social work services. The remaining hours may be spent in ancillary services supporting the delivery of clinical social work services.

3. An individual who does not complete the supervision requirement after four consecutive years of supervised experience may request an extension of up to 12 months. The request for an extension shall include evidence that demonstrates extenuating circumstances that prevented completion of the supervised experience within four consecutive years.

B. Requirements for supervisors.

1. The supervisor shall hold an active, unrestricted license as a licensed clinical social worker in the jurisdiction in which the clinical services are being rendered with at least two years of post-licensure clinical social work experience. The board may consider supervisors with commensurate qualifications if the applicant can demonstrate an undue burden due to geography or disability or if supervision was obtained in another United States jurisdiction.

2. The supervisor shall have received professional training in supervision, consisting of a three credit-hour graduate course in supervision or at least 14 hours of continuing education offered by a provider approved under 18VAC140-20-105. The After the initial

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graduate course or <u>14</u> hours of continuing education in supervision<u>, at least seven hours</u> of continuing education in supervision shall be obtained by a supervisor within five years immediately preceding registration of supervision.

3. The supervisor shall not provide supervision for a family member or provide supervision for anyone with whom the supervisor has a dual relationship.

4. The board may consider supervisors from jurisdictions outside of Virginia who provided clinical social work supervision if they have commensurate qualifications but were either (i) not licensed because their jurisdiction did not require licensure or (ii) were not designated as clinical social workers because the jurisdiction did not require such designation.

C. Responsibilities of supervisors. The supervisor shall:

1. Be responsible for the social work activities of the supervisee as set forth in this subsection once the supervisory arrangement is accepted;

2. Review and approve the diagnostic assessment and treatment plan of a representative sample of the clients assigned to the applicant during the course of supervision. The sample should be representative of the variables of gender, age, diagnosis, length of treatment, and treatment method within the client population seen by the applicant. It is the applicant's responsibility to ensure the representativeness of the sample that is presented to the supervisor;

3. Provide supervision only for those social work activities for which the supervisor has determined the applicant is competent to provide to clients;

4. Provide supervision only for those activities for which the supervisor is qualified by education, training, and experience;

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5. Evaluate the supervisee's knowledge and document minimal competencies in the areas of an identified theory base, application of a differential diagnosis, establishing and monitoring a treatment plan, development and appropriate use of the professional relationship, assessing the client for risk of imminent danger, understanding the requirements of law for reporting any harm or risk of harm to self or others, and implementing a professional and ethical relationship with clients;

6. Be available to the applicant on a regularly scheduled basis for supervision;

7. Maintain documentation, for five years post-supervision, of which clients were the subject of supervision; and

8. Ensure that the board is notified of any change in supervision or if supervision has ended or been terminated by the supervisor.

D. Responsibilities of supervisees.

1. Supervisees may not directly bill for services rendered or in any way represent themselves as independent, autonomous practitioners, or licensed clinical social workers.

2. During the supervised experience, supervisees shall use their names and the initials of their degree, and the title "Supervisee in Social Work" in all written communications.

3. Clients shall be informed in writing of the supervisee's status and the supervisor's name, professional address, and telephone number.

4. Supervisees shall not supervise the provision of clinical social work services provided by another person.

5. While providing clinical social work services, a supervisee shall remain under boardapproved supervision until licensed in Virginia as a licensed clinical social worker.

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Agenda Item: Discussion regarding paid internships

Included in your agenda package:

• Email received from office of Senator Favola concerning possibility of paid internships as a means to increase workforce.

Action needed:

• Discussion only.

Hi Erin,

I'm sorry that on the original email I missed the period in your address.

------ Forwarded message ------From: Holly Hazard <<u>hhazard@senate.virginia.gov</u>> Date: Wed, Apr 3, 2024 at 6:15 PM Subject: Opportunity for paid internship in social works To: <u>arne.owens@dhp.virginia.gov</u> <<u>arne.owens@dhp.virginia.gov</u>>, <<u>erinbarrett@dhp.virginia.gov</u>> Cc: Sen. Barbara A. Favola <<u>bfavola@senate.virginia.gov</u>>

Dear Mr. Owens,

I'm writing as Senator Favola has received several letters of inquiry as to how the Commonwealth might expand opportunities for paid internships in the social work profession. As I'm sure you are aware, we have a significant shortage today of licensed social workers and the <u>Bureau of Labor Statistics expects demand to grow significantly in the next decade.</u>

In some preliminary research I've found one opportunity for paid internships in this area with the Department of Veterans Affairs. However, given the growing shortage of workers, I'm hopeful you may have some other ideas for expanding paid social work internships in the Commonwealth.

If there are already significant opportunities, could you please let me know? If not, could you please let me know what ideas you may have for expanding the opportunities for qualified professionals to enter this vital field of health care work.

My best regards,

Holly Hazard Chief of Staff Office of Senator Barbara Favolaffice of Senator Barbara Favola



Staff Discipline Reports Jan 1, 2024 - Jun 7, 2024

NEW CASES RECEIVED BY BOARD Jan 1, 2024 - Jun 7, 2024

92

TOTAL OPEN INVESTIGATIONS (ENFORCEMENT) 35

OPEN CASE STAGES as of Jun 7, 2024	-
Probable Cause Review	155
Scheduled for Informal Conferences	3
Scheduled for Formal Hearings	15
Other (pending CCA, PHCO, hold, etc.)	1
Cases with APD for processing (IFC, FH, Consent Order)	2
TOTAL CASES AT BOARD LEVEL	176

	COI	NFERENCES AND HEARINGS		
		Informal Conferences		
Conferences Held: Scheduled Conferences:	n/a Jun 21, 2024	Aug 30, 2024	Dec 6, 2024	
		Formal Hearings		
Hearings Held: Scheduled Hearings:	n/a Sep 19-20	Dec 20, 2024		

CASES CLOSED Jan 1, 2	024 - Jun 7,	2024
Closed – No violation		70
Closed – Undetermined		9
Closed – Violation		
Conference/Hearing held	0	
Consent Order	0	1
Confidential Consent Agreement	1	
Mandatory Suspension	0	
Summary Suspension	0	
Credentials/Reinstatement – Denied		0
Credentials/Reinstatement – Approved		0
Credentials/Reinstatement – Withdrawn		0
TOTAL CASES CLOSED		80



Closed Case Categories		
Abuse/Abandonment/Neglect (2)	Business Practice Issues (2)	■ Compliance (1)
■ Diagnosis/Treatment (10) 1 violation (Sup in SW)	Fraud, patient care (3)	■ Inability to Safely Practice (19)
Inappropriate Relationship (2)	No jurisdiction (41)	

AVERAGE CASE PROCESSING T (counted on closed cases)	IMES
Average time for case closures	300
Avg. time in Enforcement (investigations)	84
Avg. time in APD (IFC/FH preparation)	24
Avg. time in Board (includes hearings, reviews, etc).	216



Discipline Staff for Behavioral Science Boards

Jennifer Lang, Deputy Executive Director Christy Evans, Discipline and Compliance Case Manager Cheryl Branch, Audit Specialist (part-time) Discipline Reviewer, Board of Counseling (part-time) Discipline Reviewer, Board of Psychology (part-time) Discipline Reviewer, Board of Social Work (part-time)

CASES RECEIVED YEAR-TO-DATE F Jan 1, 2024 – Jun 7, 2024	PER BOARD
Board of Counseling	220
Board of Psychology	85
Board of Social Work	92
TOTAL CASES RECEIVED	397

CURRENT OPEN CASES PER BOARD

as of Jun 7, 2024	
Board of Counseling	193
Board of Psychology	127
Board of Social Work	177
TOTAL CASES WITH BOARD STAFF	497



Virginia Department of Health Professions Board of Social Work Perimeter Center 9960 Mayland Drive, Suite 300 Henrico, VA 23233-1463 Email: socialwork@dhp.virginia.gov Phone: (804) 367-4441 E-Fax: (804) 977-9915 Website: www.dhp.virginia.gov/social

LICENSING REPORT

Satisfaction Survey Results	
2024 2 nd Quarter (October 1 – December 31, 2023)	94.8%
2024 3 rd Quarter (January 1 – March 31, 2024)	95.4%

Total as of June 20, 2024*

Current Active Licenses/Registratio	ns
Associate Social Worker	1
Licensed Baccalaureate Social Worker	60
Licensed Clinical Social Work	11,194
Licensed Master's Social Worker	1,491
Registered Social Worker	6
Supervisees in Social Work	3,448
Total	16,200



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Licenses and Registrations Issued

Licenses and Registrations Issued	January 2024	February 2024	March 2024	April 2024	May 2024
Licensed Baccalaureate Social Worker (LBSW)	2	1	0	2	0
Licensed Clinical Social Worker (LCSW)	128	144	97	134	141
Licensed Master's Social Worker (LMSW)	30	36	31	26	29
Supervisees in Social Work	103	110	92	64	106
Total	263	291	220	226	276

Applications Received

Licenses and Registrations Issued	January 2024*	February 2024*	March 2024*	April 2024*	May 2024*
Licensed Baccalaureate Social Worker (LBSW)	5	2	2	4	7
Licensed Clinical Social Worker (LCSW)	142	153	164	151	159
Licensed Master's Social Worker (LMSW)	50	33	38	44	48
Supervisees in Social Work	119	104	93	77	134
Total	316	292	297	276	348



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

Additional Information:

• Board of Social Work Staffing Information:

- The Board currently has two full-time, and one part-time staff members to answer phone calls, emails and to process applications across all license types.
 - Licensing Staff:
 - Sharniece Vaughan Licensing Supervisor (Full-Time)
 - Vacant Licensing Specialist (Full-Time)
 - Shaderra Jefferson– Licensing Specialist (Full-Time)
 - Gabriella Smith Licensing Administration Assistant (Part-Time)

Business Process Updates

- Licensure Process Handbook updated
- > Automated emails to applicants and licensees updated
- Examination Information FAQs added
- Supervisor Registry update scheduled for 7/1/2024

2024 SESSION

HB 326 Social Work Licensure Compact; authorizes Virginia to become a signatory to Compact.

Introduced by: Jackie H. Glass | all patrons ... notes | add to my profiles

SUMMARY AS PASSED HOUSE: (all summaries)

Social Work Licensure Compact. Authorizes Virginia to become a signatory to the Social Work Licensure Compact. The Compact allows social workers who have or are eligible for an active, unencumbered license in the compact member state where they reside to apply for a multistate license. After verifying eligibility, the social worker is granted a multistate license that authorizes practice in all other compact member states. The Compact takes effect when it is enacted by a seventh member state. This bill is identical to **SB 239**.

FULL TEXT

01/05/24 House: Prefiled and ordered printed; offered 01/10/24 24101350D pdf | impact statement

02/12/24 House: Printed as engrossed 24101350D-E pdf | impact statement

03/25/24 House: Bill text as passed House and Senate (HB326ER) pdf | impact statement

04/08/24 Governor: Acts of Assembly Chapter text (CHAP0690) pdf

AMENDMENTS

House subcommittee amendments and substitutes offered

House subcommittee amendments and substitutes adopted

House amendments adopted

HISTORY

01/05/24 House: Prefiled and ordered printed; offered 01/10/24 24101350D

01/05/24 House: Referred to Committee on General Laws

01/26/24 House: Assigned GL sub: Professions/Occupations and Administrative Process

02/01/24 House: Subcommittee recommends reporting with amendments (5-Y 0-N)

02/01/24 House: Subcommittee recommends referring to Committee on Health and Human Services

02/06/24 House: Reported from General Laws with amendment(s) (14-Y 5-N)

02/06/24 House: Referred to Committee on Health and Human Services

02/08/24 House: Reported from Health and Human Services (22-Y 0-N)

02/11/24 House: Read first time

02/12/24 House: Read second time

02/12/24 House: Committee amendment agreed to

02/12/24 House: Engrossed by House as amended HB326E

02/12/24 House: Printed as engrossed 24101350D-E

02/13/24 House: Read third time and passed House (86-Y 13-N)

02/13/24 House: VOTE: Passage (86-Y 13-N)

02/14/24 Senate: Constitutional reading dispensed

02/14/24 Senate: Referred to Committee on Privileges and Elections

02/20/24 Senate: Rereferred from Privileges and Elections (13-Y 1-N)

02/20/24 Senate: Rereferred to Education and Health

02/22/24 Senate: Reported from Education and Health (10-Y 4-N)

02/22/24	Senate: Rereferred to Finance and Appropriations
02/29/24	Senate: Reported from Finance and Appropriations (12-Y 2-N)
03/04/24	Senate: Constitutional reading dispensed (40-Y 0-N)
03/05/24	Senate: Read third time
03/05/24	Senate: Passed Senate (26-Y 14-N)
03/25/24	House: Enrolled
03/25/24	House: Bill text as passed House and Senate (HB326ER)
03/25/24	Senate: Signed by President
03/26/24	House: Signed by Speaker
03/27/24	House: Enrolled Bill communicated to Governor on March 27, 2024
03/27/24	Governor: Governor's Action Deadline 11:59 p.m., April 8, 2024
04/08/24	Governor: Approved by Governor-Chapter 690 (effective - see bill)
04/08/24	Governor: Acts of Assembly Chapter text (CHAP0690)

CHAPTER 690

An Act to amend the Code of Virginia by adding in Chapter 37 of Title 54.1 an article numbered 3, consisting of a section numbered 54.1-3709.4, relating to Social Work Licensure Compact. [H 326] Approved April 8, 2024

Be it enacted by the General Assembly of Virginia:

1. That the Code of Virginia is amended by adding in Chapter 37 of Title 54.1 an article numbered 3, consisting of a section numbered **54.1-3709.4**, as follows:

Article 3. Social Work Licensure Compact.

§ 54.1-3709.4. Social Work Licensure Compact.

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

SOCIAL WORK LICENSURE COMPACT. Section 1. Purpose.

The purpose of this Compact is to facilitate interstate practice of Regulated Social Workers by improving public access to competent Social Work 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 Social Work Services;

2. Reduce overly burdensome and duplicative requirements associated with holding multiple licenses;

3. Enhance the Member States' ability to protect the public's health and safety;

4. Encourage the cooperation of Member States in regulating multistate practice;

5. Promote mobility and address workforce shortages by eliminating the necessity for licenses in multiple States by providing for the mutual recognition of other Member State licenses;

6. Support military families;

7. Facilitate the exchange of licensure and disciplinary information among Member States;

8. Authorize all Member States to hold a Regulated Social Worker accountable for abiding by a Member State's laws, regulations, and applicable professional standards in the Member State in which the client is located at the time care is rendered; and

9. Allow for the use of telehealth to facilitate increased access to regulated Social Work Services.

Section 2. Definitions. As used in this Compact, and except as otherwise provided, the following definitions shall apply:

"Active Military Member" means any individual with full-time duty status in the active armed forces of the United States including members of the National Guard and Reserve.

"Adverse Action" means any administrative, civil, equitable, or criminal action permitted by a State's laws which is imposed by a Licensing Authority or other authority against a Regulated Social Worker, including actions against an individual's license or Multistate Authorization 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 Regulated Social Worker'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 Licensing Authority to address practitioners with an Impairment.

"Charter Member States" means Member States who have enacted legislation to adopt this Compact where such legislation predates the effective date of this Compact as described in Section 14.

"Compact Commission" or "Commission" means the government agency whose membership consists of all States that have enacted this Compact, which is known as the Social Work Licensure Compact Commission, as described in Section 10, and which shall operate as an instrumentality of the Member States.

"Current Significant Investigative Information" means:

1. Investigative information that a Licensing Authority, after a preliminary inquiry that includes notification and an opportunity for the Regulated Social Worker to respond has reason to believe is not groundless and, if proved true, would indicate more than a minor infraction as may be defined by the Commission; or

2. Investigative information that indicates that the Regulated Social Worker represents an immediate threat to public health and safety, as may be defined by the Commission, regardless of whether the Regulated Social Worker has been notified and has had an opportunity to respond.

"Data System" means a repository of information about Licensees, including, continuing education, examination, licensure, Current Significant Investigative Information, Disqualifying Event, Multistate License(s), and Adverse Action information or other information as required by the Commission.

"Domicile" means the jurisdiction in which the Licensee resides and intends to remain indefinitely.

"Disqualifying Event" means any Adverse Action or incident which results in an Encumbrance that disqualifies or makes the Licensee ineligible to either obtain, retain, or renew a Multistate License.

"Encumbrance" means a revocation or suspension of, or any limitation on, the full and unrestricted practice of Social Work licensed and regulated by a Licensing Authority.

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

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

"Impairment" means a condition(s) that may impair a practitioner's ability to engage in full and unrestricted practice as a Regulated Social Worker without some type of intervention and may include alcohol and drug dependence, mental health impairment, and neurological or physical impairments.

"Licensee(s)" means an individual who currently holds a license from a State to practice as a Regulated Social Worker.

"Licensing Authority" means the board or agency of a Member State or equivalent that is responsible for the licensing and regulation of Regulated Social Workers.

"Member State" means a state, commonwealth, district, or territory of the United States of America that has enacted this Compact.

"Multistate Authorization to Practice" means a legally authorized privilege to practice, which is equivalent to a license, associated with a Multistate License permitting the practice of Social Work in a Remote State.

"Multistate License" means a license to practice as a Regulated Social Worker issued by a Home State Licensing Authority that authorizes the Regulated Social Worker to practice in all Member States under Multistate Authorization to Practice.

"Qualifying National Exam" means a national licensing examination approved by the Commission.

"Regulated Social Worker" means any clinical, master's or bachelor's Social Worker licensed by a Member State regardless of the title used by that Member State.

"Remote State" means a Member State other than the Licensee's Home State.

"Rule(s)" or "Rule(s) of the Commission" means a regulation or regulations duly promulgated by the Commission, as authorized by the Compact, that has the force of law.

"Single State License" means a Social Work license issued by any State that authorizes practice only within the issuing State and does not include Multistate Authorization to Practice in any Member State.

"Social Work" or "Social Work Services" means the application of social work theory, knowledge, methods, ethics, and the professional use of self to restore or enhance social, psychosocial, or biopsychosocial functioning of individuals, couples, families, groups, organizations, and communities through the care and services provided by a Regulated Social Worker as set forth in the Member State's statutes and regulations in the State where the services are being provided.

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

"Unencumbered License" means a license that authorizes a Regulated Social Worker to engage in the full and unrestricted practice of Social Work.

Section 3. State Participation in the Compact.

A. To be eligible to participate in the Compact, a potential Member State must currently meet all of the following criteria:

1. License and regulate the practice of Social Work at either the clinical, master's, or bachelor's category.

2. Require applicants for licensure to graduate from a program that is:

a. Operated by a college or university recognized by the Licensing Authority;

b. Accredited, or in candidacy by an institution that subsequently becomes accredited, by an accrediting agency recognized by either:

(1) The Council for Higher Education Accreditation, or its successor; or

(2) The United States Department of Education; and

c. Corresponds to the licensure sought as outlined in Section 4.

3. Require applicants for clinical licensure to complete a period of supervised practice.

4. Have a mechanism in place for receiving, investigating, and adjudicating complaints about Licensees.

B. To maintain membership in the Compact a Member State shall:

1. Require that applicants for a Multistate License pass a Qualifying National Exam for the corresponding category of Multistate License sought as outlined in Section 4;

2. Participate fully in the Commission's Data System, including using the Commission's unique identifier as defined in Rules;

3. Notify the Commission, in compliance with the terms of the Compact and Rules, of any Adverse Action or the availability of Current Significant Investigative Information regarding a Licensee;

4. Implement procedures for considering the criminal history records of applicants for a Multistate License. Such 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;

5. Comply with the Rules of the Commission;

6. 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 Home State laws;

7. Authorize a Licensee holding a Multistate License in any Member State to practice in accordance with the terms of the Compact and Rules of the Commission; and

8. Designate a delegate to participate in the Commission meetings.

C. A Member State meeting the requirements of Sections 3 A and 3 B of this Compact shall designate the categories of Social Work licensure that are eligible for issuance of a Multistate License for applicants in such Member State. To the extent that any Member State does not meet the requirements for participation in the Compact at any particular category of Social Work licensure, such Member State may choose, but is not obligated to, issue a Multistate License to applicants that otherwise meet the requirements of Section 4 for issuance of a Multistate License in such category or categories of licensure.

D. The Home State may charge a fee for granting the Multistate License.

Section 4. Social Worker Participation in the Compact.

A. To be eligible for a Multistate License under the terms and provisions of the Compact, an applicant, regardless of category must:

1. Hold or be eligible for an active, Unencumbered License in the Home State.

2. Pay any applicable fees, including any State fee, for the Multistate License.

3. Submit, in connection with an application for a Multistate License, fingerprints or other biometric data for the purpose of obtaining criminal history record information from the Federal Bureau of Investigation and the agency responsible for retaining that State's criminal records.

4. Notify the Home State of any Adverse Action, Encumbrance, or restriction on any professional license taken by any Member State or non-Member State within 30 days from the date the action is taken.

5. Meet any continuing competence requirements established by the Home State.

6. Abide by the laws, regulations, and applicable standards in the Member State where the client is located at the time care is rendered.

B. An applicant for a clinical-category Multistate License must meet all of the following requirements:

1. Fulfill a competency requirement, which shall be satisfied by either:

a. Passage of a clinical-category Qualifying National Exam; or

b. Licensure of the applicant in their Home State at the clinical category, beginning prior to such time as a Qualifying National Exam was required by the Home State and accompanied by a period of continuous Social Work licensure thereafter, all of which may be further governed by the Rules of the Commission; or

c. The substantial equivalency of the foregoing competency requirements which the Commission may determine by Rule.

2. Attain at least a master's degree in Social Work from a program that is:

a. Operated by a college or university recognized by the Licensing Authority; and

b. Accredited, or in candidacy that subsequently becomes accredited, by an accrediting agency recognized by either:

(1) The Council for Higher Education Accreditation or its successor; or

(2) The United States Department of Education.

3. Fulfill a practice requirement, which shall be satisfied by demonstrating completion of either:

a. A period of postgraduate supervised clinical practice equal to a minimum of three thousand hours; or

b. A minimum of two years of full-time postgraduate supervised clinical practice; or

c. The substantial equivalency of the foregoing practice requirements which the Commission may determine by Rule.

C. An applicant for a master's-category Multistate License must meet all of the following requirements:

1. Fulfill a competency requirement, which shall be satisfied by either:

a. Passage of a masters-category Qualifying National Exam;

b. Licensure of the applicant in their Home State at the master's category, beginning prior to such time as a Qualifying National Exam was required by the Home State at the master's category and accompanied by a continuous period of Social Work licensure thereafter, all of which may be further governed by the Rules of the Commission; or

c. The substantial equivalency of the foregoing competency requirements which the Commission may determine by Rule.

2. Attain at least a master's degree in Social Work from a program that is:

a. Operated by a college or university recognized by the Licensing Authority; and

b. Accredited, or in candidacy that subsequently becomes accredited, by an accrediting agency recognized by either:

(1) The Council for Higher Education Accreditation or its successor; or

(2) The United States Department of Education.

D. An applicant for a bachelor's-category Multistate License must meet all of the following requirements:

1. Fulfill a competency requirement, which shall be satisfied by either:

a. Passage of a bachelor's-category Qualifying National Exam;

b. Licensure of the applicant in their Home State at the bachelor's category, beginning prior to such time as a Qualifying National Exam was required by the Home State and accompanied by a period of continuous Social Work licensure thereafter, all of which may be further governed by the Rules of the Commission; or

c. The substantial equivalency of the foregoing competency requirements which the Commission may determine by Rule.

2. Attain at least a bachelor's degree in Social Work from a program that is:

a. Operated by a college or university recognized by the Licensing Authority; and

b. Accredited, or in candidacy that subsequently becomes accredited, by an accrediting agency recognized by either:

(1) The Council for Higher Education Accreditation or its successor; or

(2) The United States Department of Education.

E. The Multistate License for a Regulated Social Worker is subject to the renewal requirements of the Home State. The Regulated Social Worker must maintain compliance with the requirements of Section 4 A to be eligible to renew a Multistate License.

F. The Regulated Social Worker's services in a Remote State are subject to that Member State's regulatory authority. A Remote State may, in accordance with due process and that Member State's laws, remove a Regulated Social Worker's Multistate Authorization to Practice in the Remote State for a specific period of time, impose fines, and take any other necessary actions to protect the health and safety of its citizens.

G. If a Multistate License is encumbered, the Regulated Social Worker's Multistate Authorization to Practice shall be deactivated in all Remote States until the Multistate License is no longer encumbered.

H. If a Multistate Authorization to Practice is encumbered in a Remote State, the regulated Social Worker's Multistate Authorization to Practice may be deactivated in that State until the Multistate Authorization to Practice is no longer encumbered.

Section 5. Issuance of a Multistate License.

A. Upon receipt of an application for Multistate License, the Home State Licensing Authority shall determine the applicant's eligibility for a Multistate License in accordance with Section 4 of this Compact.

B. If such applicant is eligible pursuant to Section 4 of this Compact, the Home State Licensing Authority shall issue a Multistate License that authorizes the applicant or Regulated Social Worker to practice in all Member States under a Multistate Authorization to Practice.

C. Upon issuance of a Multistate License, the Home State Licensing Authority shall designate whether the Regulated Social Worker holds a Multistate License in the Bachelor's, Masters, or Clinical category of Social Work.

D. A Multistate License issued by a Home State to a resident in that State shall be recognized by all Compact Member States as authorizing Social Work Practice under a Multistate Authorization to Practice corresponding to each category of licensure regulated in each Member State.

Section 6.

Authority of Interstate Compact Commission and Member State Licensing Authorities.

A. Nothing in this Compact, nor any Rule of the Commission, shall be construed to limit, restrict, or in any way reduce the ability of a Member State to enact and enforce laws, regulations, or other rules related to the practice of Social Work in that State, where those laws, regulations, or other rules are not inconsistent with the provisions of this Compact.

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

C. Nothing in this Compact, nor any Rule of the Commission, shall be construed to limit, restrict, or in any way reduce the ability of a Member State to take Adverse Action against a Licensee's Single State License to practice Social Work in that State.

D. Nothing in this Compact, nor any Rule of the Commission, shall be construed to limit, restrict, or in any way reduce the ability of a Remote State to take Adverse Action against a Licensee's Multistate Authorization to Practice in that State.

E. Nothing in this Compact, nor any Rule of the Commission, shall be construed to limit, restrict, or in any way reduce the ability of a Licensee's Home State to take Adverse Action against a Licensee's Multistate License based upon information provided by a Remote State.

Section 7. Reissuance of a Multistate License by a New Home State.

A. A Licensee can hold a Multistate License, issued by their Home State, in only one Member State at any given time.

B. If a Licensee changes their Home State by moving between two Member States:

1. The Licensee shall immediately apply for the reissuance of their Multistate License in their new Home State. The Licensee shall pay all applicable fees and notify the prior Home State in accordance with the Rules of the Commission.

2. Upon receipt of an application to reissue a Multistate License, the new Home State shall verify that the Multistate License is active, unencumbered, and eligible for reissuance under the terms of the Compact and the Rules of the Commission. The Multistate License issued by the prior Home State will be deactivated and all Member States notified in accordance with the applicable Rules adopted by the Commission.

3. Prior to the reissuance of the Multistate License, the new Home State shall conduct procedures for considering the criminal history records of the Licensee. Such 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.

4. If required for initial licensure, the new Home State may require completion of jurisprudence requirements in the new Home State.

5. Notwithstanding any other provision of this Compact, if a Licensee does not meet the requirements set forth in this Compact for the reissuance of a Multistate License by the new Home State, then the Licensee shall be subject to the new Home State requirements for the issuance of a Single State License in that State.

C. If a Licensee changes their 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, then the Licensee shall be subject to the State requirements for the issuance of a Single State License in the new Home 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, and only one Multistate License.

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

Section 8.

Military Families.

An Active Military Member or their spouse shall designate a Home State where the individual has a Multistate License. The individual may retain their Home State designation during the period the service member is on active duty.

Section 9.

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 Regulated Social Worker's Multistate Authorization to Practice only within that Member State, and 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 Authority 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 Licensing 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.

2. Only the Home State shall have the power to take Adverse Action against a Regulated Social Worker's Multistate License.

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 Regulated Social Worker who changes their Home State 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 Data 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 Regulated Social Worker the costs of investigations and dispositions of cases resulting from any Adverse Action taken against that Regulated Social Worker.

E. A Member State may take Adverse Action based on the factual findings of another Member 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 Social Work 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 Multistate License of a Regulated Social Worker, the Regulated Social Worker's Multistate Authorization to Practice in all other Member States shall be deactivated until all Encumbrances have been removed from the Multistate License. All Home State disciplinary orders that impose Adverse Action against the license of a Regulated Social Worker shall include a statement that the Regulated Social Worker's Multistate Authorization to Practice is deactivated in all Member States until all conditions of the decision, order, or agreement are satisfied.

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 and all other Member States 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.

J. Nothing in this Compact shall authorize a Member State to demand the issuance of subpoenas for attendance and testimony of witnesses or the production of evidence from another Member State for lawful actions within that Member State.

K. Nothing in this Compact shall authorize a Member State to impose discipline against a Regulated Social Worker who holds a Multistate Authorization to Practice for lawful actions within another Member State.

Section 10. Establishment of Social Work Licensure Compact Commission.

A. The Compact Member States hereby create and establish a joint government agency whose membership consists of all Member States that have enacted the compact known as the Social Work Licensure Compact Commission. The Commission is an instrumentality of the Compact States acting jointly and not an instrumentality of any one State. The Commission shall come into existence on or after the effective date of the Compact as set forth in Section 14.

B. Membership, Voting, and Meetings:

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

2. The delegate shall be either:

a. A current member of the State Licensing Authority at the time of appointment, who is a Regulated Social Worker or public member of the State Licensing Authority; or

b. An administrator of the State Licensing Authority or their designee.

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

4. The Commission may recommend removal or suspension of any delegate from office.

5. A Member State's State Licensing Authority shall fill any vacancy of its delegate occurring on the Commission within 60 days of the vacancy.

6. Each delegate shall be entitled to one vote on all matters before the Commission requiring a vote by Commission delegates.

7. A delegate shall vote in person or by such other means as provided in the bylaws. The bylaws may provide for delegates to meet by telecommunication, videoconference, or other means of communication.

8. The Commission shall meet at least once during each calendar year. Additional meetings may be held as set forth in the bylaws. The Commission may meet by telecommunication, video conference, or other similar electronic means.

C. The Commission shall have the following powers:

1. Establish the fiscal year of the Commission;

2. Establish code of conduct and conflict of interest policies;

3. Establish and amend Rules and bylaws;

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

5. Meet and take such actions as are consistent with the provisions of this Compact, the Commission's Rules, and the bylaws;

6. Initiate and conclude 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. Maintain and certify records and information provided to a Member State as the authenticated business records of the Commission, and designate an agent to do so on the Commission's behalf;

8. Purchase and maintain insurance and bonds;

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

10. Conduct an annual financial review;

11. 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;

12. Assess and collect fees;

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

14. Lease, purchase, retain, own, hold, improve, or use any property, real, personal, or mixed, or any undivided interest therein;

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

16. Establish a budget and make expenditures;

17. Borrow money;

18. 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;

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

20. Establish and elect an Executive Committee, including a chair and a vice chair;

21. Determine whether a State's adopted language is materially different from the model compact language such that the State would not qualify for participation in the Compact; and

22. Perform such other functions as may be necessary or appropriate to achieve the purposes of this Compact.

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. The powers, duties, and responsibilities of the Executive Committee shall include:

a. Oversee the day-to-day activities of the administration of the compact including enforcement and compliance with the provisions of the compact, its Rules and bylaws, and other such duties as deemed necessary;

b. Recommend to the Commission changes to the Rules or bylaws, changes to this Compact legislation, fees charged to Compact Member States, fees charged to Licensees, and other fees;

c. Ensure Compact administration services are appropriately provided, including by contract;

d. Prepare and recommend the budget;

e. Maintain financial records on behalf of the Commission;

f. Monitor Compact compliance of Member States and provide compliance reports to the Commission;

g. Establish additional committees as necessary;

h. Exercise the powers and duties of the Commission during the interim between Commission meetings, except for adopting or amending Rules, adopting or amending bylaws, and exercising any other powers and duties expressly reserved to the Commission by Rule or bylaw; and

i. Other duties as provided in the Rules or bylaws of the Commission.

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

a. The chair and vice chair of the Commission shall be voting members of the Executive Committee; and

b. The Commission shall elect five voting members from the current membership of the Commission.

c. Up to four (4) ex-officio, nonvoting members from four (4) recognized national Social Work organizations.

d. 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 the Commission's bylaws.

4. The Executive Committee shall meet at least annually.

a. Executive Committee meetings shall be open to the public, except that the Executive Committee may meet in a closed, nonpublic meeting as provided in subsection F 2 below.

b. The Executive Committee shall give seven (7) days' notice of its meetings, posted on its website and as determined to provide notice to persons with an interest in the business of the Commission.

c. The Executive Committee may hold a special meeting in accordance with subsection F.1.b. below.

E. The Commission shall adopt and provide to the Member States an annual report.

F. Meetings of the Commission:

1. All meetings shall be open to the public, except that the Commission may meet in a closed, non-public meeting as provided in subsection F 2 below.

a. Public notice for all meetings of the full Commission of meetings shall be given in the same manner as required under the Rulemaking provisions in Section 12, except that the Commission may hold a special meeting as provided in subsection F 1 b below.

b. The Commission may hold a special meeting when it must meet to conduct emergency business by giving 48 hours' notice to all commissioners, on the Commission's website, and other means as provided in the Commission's Rules. The Commission's legal counsel shall certify that the Commission's need to meet qualifies as an emergency.

2. The Commission or the Executive Committee or other committees of the Commission may convene in a closed, non-public meeting for the Commission or Executive Committee or other committees of the Commission to receive legal advice or to 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;

c. Current or threatened discipline of a Licensee by the Commission or by a Member State's Licensing Authority;

d. Current, threatened, or reasonably anticipated litigation;

e. Negotiation of contracts for the purchase, lease, or sale of goods, services, or real estate;

f. Accusing any person of a crime or formally censuring any person;

g. Trade secrets or commercial or financial information that is privileged or confidential;

h. Information of a personal nature where disclosure would constitute a clearly unwarranted invasion of personal privacy;

i. Investigative records compiled for law enforcement purposes;

j. 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;

k. Matters specifically exempted from disclosure by federal or Member State law; or

l. Other matters as promulgated by the Commission by Rule.

3. If a meeting, or portion of a meeting, is closed, the presiding officer shall state that the meeting will be closed and reference each relevant exempting provision, and such reference shall be recorded in the minutes.

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 therefor, 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 only by a majority vote of the Commission or order of a court of competent jurisdiction.

G. 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 as provided in subsection C 13.

3. The Commission may levy on and collect an annual assessment from each Member State and impose fees on Licensees of Member States to whom it grants a Multistate License 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 for Member States shall be allocated based upon a formula that the Commission shall promulgate by Rule.

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 financial review and accounting procedures established under its bylaws. However, all receipts and disbursements of funds handled by the Commission shall be subject to an annual financial review by a certified or licensed public accountant, and the report of the financial review shall be included in and become part of the annual report of the Commission.

H. Qualified Immunity, Defense, and Indemnification:

1. The members, officers, executive director, employees, and representatives of the Commission shall be immune from suit and liability, both personally and 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 or liability for any damage, loss, injury, or liability caused by the intentional or willful or wanton misconduct of that person. The procurement of insurance of any type by the Commission shall not in any way compromise or limit the immunity granted hereunder.

2. The Commission shall defend any member, officer, executive director, employee, and 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 as determined by the Commission 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 their own counsel at their own expense; 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, and 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.

4. Nothing herein shall be construed as a limitation on the liability of any Licensee for professional malpractice or misconduct, which shall be governed solely by any other applicable State laws.

5. Nothing in this Compact shall be interpreted to waive or otherwise abrogate a Member State's state action immunity or state action affirmative defense with respect to antitrust claims under the Sherman Act, Clayton Act, or any other State or federal

antitrust or anticompetitive law or regulation.

6. Nothing in this Compact shall be construed to be a waiver of sovereign immunity by the Member States or by the Commission.

Section 11. Data System.

A. The Commission shall provide for the development, maintenance, operation, and utilization of a coordinated Data System.

B. The Commission shall assign each applicant for a Multistate License a unique identifier, as determined by the Rules of the Commission.

C. 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 and information related thereto;

4. Non-confidential information related to Alternative Program participation, the beginning and ending dates of such participation, and other information related to such participation not made confidential under Member State law;

5. Any denial of application for licensure, and the reason(s) for such denial;

6. The presence of Current Significant Investigative Information; and

7. Other information that may facilitate the administration of this Compact or the protection of the public, as determined by the Rules of the Commission.

D. The records and information provided to a Member State pursuant to this Compact or through the Data System, when certified by the Commission or an agent thereof, shall constitute the authenticated business records of the Commission, and shall be entitled to any associated hearsay exception in any relevant judicial, quasi-judicial or administrative proceedings in a Member State.

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

It is the responsibility of the Member States to report any Adverse Action against a Licensee and to monitor the database to determine whether Adverse Action has been taken against a Licensee. Adverse Action information pertaining to a Licensee in any Member State will be available to any other Member State.

F. 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. Any information submitted to the Data System that is subsequently expunged pursuant to federal law or the laws of the Member State contributing the information shall be removed from the Data System.

Section 12. Rulemaking.

A. The Commission shall promulgate reasonable Rules in order to effectively and efficiently implement and administer the purposes and provisions of the Compact. A Rule shall be invalid and have no force or effect only if a court of competent jurisdiction holds that the Rule is invalid because the Commission exercised its rulemaking authority in a manner that is beyond the scope and purposes of the Compact, or the powers granted hereunder, or based upon another applicable standard of review.

B. The Rules of the Commission shall have the force of law in each Member State, provided however that where the Rules of the Commission conflict with the laws of the Member State that establish the Member State's laws, regulations, and applicable standards that govern the practice of Social Work as held by a court of competent jurisdiction, the Rules of the Commission shall be ineffective in that State to the extent of the conflict.

C. The Commission shall exercise its Rulemaking powers pursuant to the criteria set forth in this Section and the Rules adopted thereunder. Rules shall become binding on the day following adoption or the date specified in the rule or amendment, whichever is later.

D. If a majority of the legislatures of the Member States rejects a Rule or portion of 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.

E. Rules shall be adopted at a regular or special meeting of the Commission.

F. Prior to adoption of a proposed Rule, the Commission shall hold a public hearing and allow persons to provide oral and written comments, data, facts, opinions, and arguments.

G. Prior to adoption of a proposed Rule by the Commission, and at least thirty (30) days in advance of the meeting at which the Commission will hold a public hearing on the proposed Rule, the Commission shall provide a Notice of Proposed Rulemaking:

1. On the website of the Commission or other publicly accessible platform;

2. To persons who have requested notice of the Commission's notices of proposed rulemaking; and

3. In such other way(s) as the Commission may by Rule specify.

H. The Notice of Proposed Rulemaking shall include:

1. The time, date, and location of the public hearing at which the Commission will hear public comments on the proposed Rule and, if different, the time, date, and location of the meeting where the Commission will consider and vote on the proposed Rule;

2. If the hearing is held via telecommunication, video conference, or other electronic means, the Commission shall include the mechanism for access to the hearing in the Notice of Proposed Rulemaking;

3. The text of the proposed Rule and the reason therefor;

4. A request for comments on the proposed Rule from any interested person; and

5. The manner in which interested persons may submit written comments.

I. All hearings will be recorded. A copy of the recording and all written comments and documents received by the Commission in response to the proposed Rule shall be available to the public.

J. Nothing in this Section 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 Section.

K. The Commission shall, by majority vote of all members, take final action on the proposed Rule based on the Rulemaking record and the full text of the Rule.

1. The Commission may adopt changes to the proposed Rule provided the changes do not enlarge the original purpose of the proposed Rule.

2. The Commission shall provide an explanation of the reasons for substantive changes made to the proposed Rule as well as reasons for substantive changes not made that were recommended by commenters.

3. The Commission shall determine a reasonable effective date for the Rule. Except for an emergency as provided in Section 12 L, the effective date of the Rule shall be no sooner than 30 days after issuing the notice that it adopted or amended the Rule.

L. Upon determination that an emergency exists, the Commission may consider and adopt an emergency Rule with 48 hours' notice, with opportunity to comment, provided that the usual Rulemaking procedures provided in the Compact and in this Section 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 a Rule that is established by federal law or rule; or

4. Protect public health and safety.

M. The Commission or an authorized committee of the Commission may direct revisions to a previously adopted Rule 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 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.

N. No Member State's rulemaking requirements shall apply under this compact.

Section 13. Oversight, Dispute Resolution, and Enforcement.

A. Oversight:

1. The executive and judicial branches of State government in each Member State shall enforce this Compact and take all actions necessary and appropriate to implement the Compact.

2. Except as otherwise provided in this Compact, 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. Nothing herein shall affect or limit the selection or propriety of venue in any action against a Licensee for professional malpractice, misconduct, or any such similar matter.

3. The Commission shall be entitled to receive service of process in any proceeding regarding the enforcement or interpretation of the Compact and shall have standing to intervene in such a proceeding for all purposes. Failure to provide the Commission service of process 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 provide written notice to the defaulting State. The notice of default shall describe the default, the proposed means of curing the default, and any other action that the Commission may take, and shall offer training and specific technical assistance regarding the default.

2. The Commission shall provide a copy of the notice of default to the other Member States.

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 delegates of the Member States, and all rights, privileges, and benefits conferred on that State 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, the defaulting State's State Licensing Authority and each of the Member States' State Licensing Authority.

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. Upon the termination of a State's membership from this Compact, that State shall immediately provide notice to all Licensees within that State of such termination. The terminated State shall continue to recognize all licenses granted pursuant to this Compact for a minimum of six (6) months after the date of said notice of termination.

G. 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.

H. 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 party shall be awarded all costs of such litigation, including reasonable attorney fees.

I. 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.

J. Enforcement:

1. By majority vote as provided by Rule, the Commission may initiate legal action against a Member State in default in the United States District Court for the District of Columbia or the federal district where the Commission has its principal offices to enforce compliance with the provisions of the Compact and its promulgated Rules. The relief sought may include both injunctive relief and damages. In the event judicial enforcement is necessary, the prevailing party shall be awarded all costs of such litigation, including reasonable attorney fees. The remedies herein shall not be the exclusive remedies of the Commission. The Commission may pursue any other remedies available under federal or the defaulting Member State's law.

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

3. No person other than a Member State shall enforce this compact against the Commission.

Section 14. Effective Date, Withdrawal, and Amendment.

A. The Compact shall come into effect on the date on which the Compact statute is enacted into law in the seventh Member State.

1. On or after the effective date of the Compact, the Commission shall convene and review the enactment of each of the first seven Member States ("Charter Member States") to determine if the statute enacted by each such Charter Member State is materially different than the model Compact statute.

a. A Charter Member State whose enactment is found to be materially different from the model Compact statute shall be entitled to the default process set forth in Section 13.

b. If any Member State is later found to be in default, or is terminated or withdraws from the Compact, the Commission shall remain in existence and the Compact shall remain in effect even if the number of Member States should be less than seven.

2. Member States enacting the Compact subsequent to the seven initial Charter Member States shall be subject to the process set forth in Section 10 C 21 to determine if their enactments are materially different from the model Compact statute and whether they qualify for participation in the Compact.

3. All actions taken for the benefit of the Commission or in furtherance of the purposes of the administration of the Compact prior to the effective date of the Compact or the Commission coming into existence shall be considered to be actions of the Commission unless specifically repudiated by the Commission.

4. Any State that joins the Compact subsequent to the Commission's initial adoption of the Rules and bylaws shall be subject to the Rules and bylaws 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.

B. 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 180 days after enactment of the repealing statute.

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

3. Upon the enactment of a statute withdrawing from this compact, a State shall immediately provide notice of such withdrawal to all Licensees within that State. Notwithstanding any subsequent statutory enactment to the contrary, such withdrawing State shall continue to recognize all licenses granted pursuant to this compact for a minimum of 180 days after the date of such notice of withdrawal.

C. Nothing contained in this Compact shall be construed to invalidate or prevent any 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.

D. 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.

Section 15. Construction and Severability.

A. This Compact and the Commission's rulemaking authority shall be liberally construed so as to effectuate the purposes, and the implementation and administration of the Compact. Provisions of the Compact expressly authorizing or requiring the promulgation of Rules shall not be construed to limit the Commission's rulemaking authority solely for those purposes.

B. The provisions of this Compact shall be severable and if any phrase, clause, sentence, or provision of this Compact is held by a court of competent jurisdiction to be contrary to the constitution of any Member State, a State seeking participation in the Compact, or of the United States, or the applicability thereof to any government, agency, person, or circumstance is held to be unconstitutional by a court of competent jurisdiction, the validity of the remainder of this Compact and the applicability thereof to any other government, agency, person, or circumstance shall not be affected thereby.

C. Notwithstanding subsection B of this Section, the Commission may deny a State's participation in the Compact or, in accordance with the requirements of Section 13.B, terminate a Member State's participation in the Compact, if it determines that a constitutional requirement of a Member State is a material departure from the Compact. Otherwise, if this Compact shall be held to be 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.

Section 16. Consistent Effect and Conflict with Other State Laws. A. A Licensee providing services in a Remote State under a Multistate Authorization to Practice shall adhere to the laws and regulations, including laws, regulations, and applicable standards, of the Remote State where the client is located at the time care is rendered.

B. Nothing herein shall prevent or inhibit the enforcement of any other law of a Member State that is not inconsistent with the Compact.

C. Any laws, statutes, regulations, or other legal requirements in a Member State in conflict with the Compact are superseded to the extent of the conflict.

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

2. That applicants for a Multistate License shall pay for the cost of fingerprinting required by the Social Work Licensure Compact, as entered into by this act.

SV SOCIAL WORK

Social Work Compact Welcome Letter

Welcome! We are excited that your state has joined the Social Work Licensure Compact.

The Social Work Licensure Compact facilitates the interstate practice for social workers while maintaining protection of public health and safety.

Once the Compact is fully operational, licensed social workers will be able to apply for a multistate license to practice in-person and through telehealth in other member states.

The Social Work Compact Commission will hold its inaugural meeting on September 17th, 2024. At its inaugural meeting, the Commission will establish bylaws and committees. It will also take the first steps toward implementing the shared interstate licensure data system that will allow for instant verification of license standing.

As part of the Social Work Compact, your state's Social Work Regulatory Authority must appoint a representative to serve as your state's Commissioner on the Social Work Compact Commission. As stated in Section 10(B) of the Social Work Compact legislation, these representatives shall be empowered to act on behalf of the Compact state and shall be limited to:

- 1. A current member of the State Licensing Authority at the time of appointment, who is a Regulated Social Worker or public member of the State Licensing Authority; or
- 2. An administrator of the State Licensing Authority or their designee.

In appointing your Commissioner, please consider the following:

- 1. Availability of your representative It is expected that the Commission's first year will require significant involvement, likely including face-to-face meetings, conference calls, committee assignments and email correspondence as the governing documents and implementation components for the Compact are created.
- 2. **Ongoing participation -** After the initial year, the full Commission must meet at least once a year. As the work of the Commission is ongoing, providing continuity of representation will make this a more cohesive and functional group.



- 3. Knowledge of state statutes/regulations and Compact legislation It will be essential to have a working knowledge of your state statutes and regulations and of the Compact in particular to assist the Commission in the development of governing documents and to guide the decision-making process regarding specific components of the Compact.
- 4. **Conflict of Interest -** A state should consider if any real or potential disqualifying conflict of interest exists when selecting a commissioner. Please refer to the code of conduct form for more details. For any questions regarding whether a conflict exists, please the Compact's Interim Legal Counsel, Samantha Nance, at samantha.nance@emwnlaw.com.

Until the Compact has hired a permanent management organization, The Council of State Governments will be working with the member states.

Thank you again and we look forward to working with you.

Sincerely,

Dan Logsdon

Dan Logsdon Director, National Center for Interstate Compacts The Council of State Governments



Social Work Compact Implementation Timeline

On April 12th, 2024, the Social Work Licensure compact officially became enacted in seven states: Kansas, Missouri, South Dakota, Washington, Utah, Kentucky, Virginia, and Kansas. This marks a significant milestone in the development process as the compact specifies that the compact will come into effect upon enactment of the seventh member state. The social work compact allows eligible social workers to practice in all states that join the compact.

While the social work compact legislation specifies that the compact needs seven member states to become active, social workers cannot yet practice in other member states. The implementation process for the compact will take approximately 18-24 months before social workers can begin applying for multistate licenses. A timeline of this process can be found below:

State Commissioner Nominations – Summer 2024

Each new member state must appoint a commissioner to serve on the compact commission. The commissioner is selected by the state's social work board and can be the current administrator of the social work board or their designee, a board member who is a social worker, or a public member of the board. Once all commissioners have been elected, the Social Work Compact Commission will convene for its first inaugural meeting.

Inaugural Commission Meeting – Fall 2024

At the inaugural meeting, the Commission will elect an executive committee, appoint officers, establish a subcommittee structure and approve the initial bylaws and rulemaking processes that will govern the compact. All compact commission meetings will be open to the public. The first inaugural meeting will be held virtually on September 17th, 2024.

Establishing the Compact Data System- Ongoing Throughout 2025

After the inaugural meeting, the compact commission will continue to work on operationalizing the compact, including acquiring a data system. The data system is a foundational piece of compact operations where member states communicate licensure information with each other and with the compact commission. CSG expects development of the data system to take approximately 10-12 months.

Once the data system is fully developed, states will be onboarded to the new system. It is expected that states will have varying timelines to onboard and will be largely dependent on the state's current licensure infrastructure.



Additional Compact Commission Meetings – Ongoing throughout 2025

The compact commission will hold subsequent commission meetings throughout 2025 for additional rulemaking to establish a fee structure, application process, further define compact participation requirements. The commission will also hire staff, select a secretariat organization, and take additional steps for the compact to move towards being fully operational.

Multistate License Applications Open – Target Date of Fall 2025

Once the data system is operational in states and the commission has finalized all necessary rulemaking, applications will be made available for social workers to apply for a multistate license. Once eligibility is confirmed by the home state, all fees are paid, and a social worker is granted a multistate license, they will be able to practice in all other member states of the compact without any further steps necessary.

VIRGINIA BOARD OF SOCIAL WORK BYLAWS

ARTICLE I: AUTHORIZATION

A. Statutory Authority

The Virginia Board of Social Work ("Board") is established and operates pursuant to Va. Code §§ 54.1-2400 *et seq.* and 54.1-3700 *et seq.* Regulations promulgated by the Virginia Board of Social Work may be found in 18VAC140-20-10 *et seq.*, Regulations Governing the Practice of Social Work.

B. Duties

The Virginia Board of Social Work is charged with promulgating and enforcing regulations governing the licensure and practice of social work and clinical social work in the Commonwealth of Virginia. This includes, but is not limited to: setting fees; creating requirements for and issuing licenses, certificates, or registrations; setting standards of practice; and implementing a system of disciplinary action.

C. Mission

To ensure the delivery of safe and competent patient care by licensing health professionals, enforcing standards of practice, and providing information to healthcare practitioners and the public.

ARTICLE II: THE BOARD

A. Membership

- 1. The Board shall consist of nine (9) members, appointed by the Governor pursuant to Va. Code § <u>54.1-3703</u>.
- 2. The terms of the members of the Board shall be four (4) years.
- 3. Members of the Board of Social Work holding a voting office in any related professional association or one that takes a policy position on the regulations of the Board shall abstain from voting on issues where there may be a conflict of interest present.

B. Officers

- 1. The Chairperson or designee shall preserve order and conduct all proceedings according to parliamentary rules, the Virginia Freedom of Information Act, Va. Code § 2.2-3700 *et seq.*, and the Virginia Administrative Process Act, Va. Code § 2.2-4000 *et seq.* Roberts Rules of Order will guide parliamentary procedure for the meetings. Except where specifically provided otherwise by the law or as otherwise ordered by the Board, the Chairperson shall appoint all committees, and shall sign as Chairperson to the certificates authorized to be signed by the Chairperson.
- 2. The Vice-Chairperson shall act as Chairperson in the absence of the Chairperson and assume the duties of Chairperson in the event of an unexpired term.

3. In the absences of the Chairperson and Vice-Chairperson, the Chairperson shall appoint another board member to preside at the meeting or formal administrative hearing.

C. Duties of Members

- 1. Each member shall participate in all matters before the Board.
- 2. Members shall attend all regular and special meetings of the Board unless prevented by illness or similar unavoidable cause. In the event of two (2) consecutive unexcused absences at any meeting of the Board or its committees, the Chairperson shall make a recommendation to the Director of the Department of Health Professions for referral to the Secretary of Health and Human Resources and Secretary of the Commonwealth.
- 3. The Governor may remove any Board member for cause, and the Governor shall be sole judge of the sufficiency of the cause for removal pursuant to Va. Code § <u>2.2-108</u>.

D. Election of Officers

- 1. The Nomination Committee shall present a slate of officers for Chairman and Vice-Chairman prior to the meeting at which the election of officers is held. The election of officers shall occur at the first scheduled Board meeting following July 1 of each year, and elected officers shall assume their duties at the end of the meeting.
- 2. Officers shall be elected at a meeting of the Board with a quorum present.
- 3. The Chairperson shall ask for additional nominations from the floor by office.
- 4. Voting shall be by voice vote, roll call, or show of hands. A simple majority shall prevail with the current Chairperson casting a vote only to break a tie.
- 5. Special elections shall be held in the same manner in the event of a vacancy of a position to fill the unexpired term.
- 6. The election shall occur in the following order: Chairperson, Vice-Chairperson.
- 7. All officers shall be elected for a term of one year, and may serve no more than two consecutive terms.

E. Meetings

- 1. The full Board shall meet quarterly, unless a meeting is not required to conduct Board business.
- 2. Order of business at meetings:
 - a. Public Comment;
 - b. Approval of Minutes of preceding regular Board meeting(s) and any called meeting since the last regular meeting of the Board;
 - c. Reports of officers and staff;
 - d. Reports of committees;
 - e. Election of officers (as needed);
 - f. Unfinished business; and
 - g. New business.
- 3. The order of business may be changed at any meeting by a majority vote.

ARTICLE III: COMMITTEES

A. Duties and Frequency of Meetings.

- 1. Members appointed to a committee shall faithfully perform the duties assigned to the committee.
- 2. All standing committees shall meet as necessary to conduct the business of the Board.

B. Standing Committees

Standing committees of the Board shall consist of the following:

Regulatory/Legislative Committee; Special Conference Committee; Credentials Committee; Nomination Committee; and Any other standing committees created by the Board.

1. <u>Regulatory/Legislative Committee</u>

- a. The Regulatory/Legislative Committee shall consist of at least two (2) Board members appointed by the Chairperson of the Board.
- b. The Chairperson of the Committee shall be appointed by the Chairperson of the Board.
- c. The Committee shall consider all questions bearing upon state legislation and regulation governing the professions regulated by the Board.
- d. The Committee shall recommend to the Board changes in law and regulations as it may deem advisable and, at the direction of the Board, shall take such steps as may further the desire of the Board in matters of legislation and regulation.
- e. The Chairperson of the Committee shall submit proposed changes in applicable laws and regulations in writing to the Board prior to any scheduled meeting.

2. <u>Special Conference Committee</u>

- a. The Special Conference Committee shall consist of two (2) Board members.
- b. The Special Conference Committee shall conduct informal conferences pursuant to §§ <u>2.2-4019</u>, <u>2.2-4021</u>, and <u>54.1-2400</u> of the *Code of Virginia* as necessary to adjudicate cases in a timely manner in accordance with the agency standards for case resolution.
- c. The Special Conference Committee shall hold informal conferences at the request of the applicant or licensee to determine if Board requirements have been met.
- d. The Chairperson of the Board shall designate another board member as an alternate on this committee in the event one of the standing committee members becomes ill or is unable to attend a scheduled conference date.
- e. Should the caseload increase to the level that additional special conference committees are needed, the Chairperson of the Board may appoint additional committees.

3. <u>Credentials Committee</u>

- a. The Credentials Committee shall consist of at least two (2) Board members appointed by the Chairman of the Board, with the Chairman of the Committee to be appointed by the Chairman of the Board.
- b. The members of the committee shall review non-routine licensure applications to determine the credentials of the applicant and the applicability of the statutes and regulations.
- c. The Committee member who conducted the initial review shall provide guidance to staff on action to be taken.
- d. The Credentials Committee shall not be required to meet collectively to conduct initial reviews.

4. Nomination Committee

- a. The Nomination Committee shall be composed of at least two members of the Board appointed by the Chairman of the Board, with the Chairman of the Committee to be appointed by the Chairman of the Board.
- b. The Nomination Committee shall consult with Bard members and staff to recommend nominee(s) for the Board positions of Chairman and Vice-Chairman.
- c. Sitting officers shall not serve on the Nomination Committee.

ARTICLE IV: GENERAL DELEGATION OF AUTHORITY

The Board delegates the following functions:

- The Board delegates to Board staff the authority to issue and renew licenses, certificates, or registrations and to approve supervision applications for which regulatory and statutory qualifications have been met. If there is basis upon which the Board could refuse to issue or renew the license or certification or to deny the supervision application, the Executive Director may only issue a license, certificate, or registration upon consultation with a member of the Credentials Committee, or in accordance with delegated authority provided in a guidance document of the Board.
- 2. The Board delegates to Board staff the authority to develop and approve any and all forms used in the daily operations of Board business, including, but limited to, licensure and registration applications, renewal forms, and documents used in the disciplinary process.
- 3. The Executive Director shall be the custodian of all Board records. He or she shall preserve a correct list of all applicants and licensees, shall manage the correspondence of the Board, and shall perform all such other duties as naturally pertain to this position.

- 4. The Board delegates to the Executive Director the authority to grant an accommodation of additional testing time or other requests for accommodation to candidates for Board-required examinations pursuant to the Americans with Disabilities Act, provided the candidate provides documentation that supports such an accommodation.
- 5. The Board delegates to the Executive Director authority to grant an extension for good cause of up to one (1) renewal cycle for the completion of continuing education requirements upon written request from the licensee prior to the renewal date.
- 6. The Board delegates to the Executive Director authority to grant an exemption for all or part of the continuing education requirements due to circumstances beyond the control of the licensee or certificate holder, such as temporary disability, mandatory military service, or officially declared disasters.
- 7. The Board delegates to the Executive Director the authority to reinstate a license or certificate when the reinstatement is due to the lapse of the license or certificate rather than a disciplinary action and there is no basis upon which the Board could refuse to reinstate.
- 8. The Board delegates to the Executive Director the authority to sign as entered any Order or Consent Order resulting from the disciplinary process or other administrative proceeding.
- 9. The Board delegates to the Executive Director, who may consult with a member of the Special Conference Committee, the authority to provide guidance to the agency's Enforcement Division in situations wherein a complaint is of questionable jurisdiction and an investigation may not be necessary.
- 10. The Board delegates authority to the Executive Director to close non-jurisdictional cases and fee dispute cases without review by a Board member.
- 11. The Board delegates to the Executive Director the authority to review alleged violations of law or regulations with a Board member to make a determination as to whether probable cause exists to proceed with possible disciplinary action.
- 12. The Board delegates to the Executive Director the authority to assign the determination of probable cause for disciplinary action to a board member or to the staff disciplinary review coordinator, who, in consultation with Board staff, may offer a confidential consent agreement, offer a pre-hearing consent order, cause the scheduling of an informal conference, request additional information, or close the case.
- 13. In accordance with established Board guidance documents, the Board delegates to the Executive Director the determination of probable cause, for the purpose of offering a confidential consent agreement, a prehearing consent order, or for scheduling an informal conference.

- 14. The Board delegates to the Executive Director the selection of the agency subordinate who is deemed appropriately qualified to conduct a proceeding based on the qualifications of the subordinate and the type of case being convened.
- 15. The Board delegates to the Executive Director the convening of a quorum of the Board by telephone conference call, for the purpose of considering the summary suspension of a license or for the purpose of considering settlement proposals.
- 16. The Board delegates to the Chairperson the authority to represent the Board in instances where Board consultation or review may be requested where a vote of the Board is not required and a meeting is not feasible.
- 17. The Board delegates authority to the Executive Director to issue an Advisory Letter to the person who is the subject of a complaint pursuant to Virginia Code § 54.1-2400.2(F) when a probable cause review indicates a disciplinary proceeding will not be instituted.
- 18. The Board delegates authority to the Executive Director to delegate tasks to the Deputy Executive Director, as necessary.

ARTICLE V: AMENDMENTS

Proposed amendments to these bylaws shall be presented in writing to all Board members, the Executive Director of the Board, and the Board's legal counsel prior to any scheduled Board meeting. Amendments to the bylaws shall be adopted by a favorable vote of at least two-thirds of the members present at that regular meeting.