

**Call to Order – Dolores Paulson, Ph.D., LCSW, Board Chairperson**

- Welcome and Introductions
- Mission of the Board 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 4

**Approval of Minutes**

- Board Meeting –March 12, 2021\* Page 88

**Agency Director Report - David E. Brown, DC**

**Chairperson Report – Dr. Paulson**

**Legislation and Regulatory Report – Elaine Yeatts, DHP, Sr. Policy Analyst**

- Chart of Regulatory Actions Page 92
- Board Action on Proposed Regulations for Endorsement\* Page 93
- Board Action on Proposed Regulations for Reduction of CE Requirement for Supervisors\* Page 99

**Committee Reports**

- Regulatory Committee – Mr. Salay
  - Recommendations from July 22, 2021 Regulatory Committee\* - Ms. Yeatts
- Board of Health Professions – Mr. Salay Page 106

**Staff Reports**

- Executive Director’s Report – Jaime Hoyle, JD., Executive Director, Boards of Counseling, Psychology, and Social Work Page 111
- Discipline Report – Jennifer Lang, Deputy Executive Director, Boards of Counseling, Psychology, and Social Work Page 124
- Board Office Report – Latasha Austin, Licensing and Operations Manager, Board of Social Work Page 126

**Next Meeting Dates:**

- Regulatory: September 9, 2021
- Full Board: September 10, 2021

**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).

DRAFT



Virginia Department of  
**Health Professions**  
Board of Social Work

## **MISSION STATEMENT**

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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.

Jurisdiction	License Name	License Required During Supervision	Title of License Required Under Supervision
Alabama	Licensed Master Social Worker		
Alabama	Licensed Bachelor Social Worker		
Alaska	Licensed Clinical Social Worker		
Alaska	Licensed Master Social Worker		
Alaska	Licensed Baccalaureate Social Worker		
Alberta	Registered Social Worker-Clinical		
Alberta	Provisional Registered Social Worker		
Arizona	Licensed Clinical Social Worker		
Arizona	Licensed Master Social Worker		
Arizona	Licensed Baccalaureate Social Worker		

Arkansas	Licensed Master Social Worker
Arkansas	Licensed Social Worker
British Columbia	Registered Clinical Social Worker
British Columbia	Registered Social Worker
California	Associate Clinical Social Worker
Colorado	Licensed Clinical Social Worker
Colorado	Licensed Social Worker
Connecticut	Licensed Clinical Social Worker
Connecticut	Master's Level Social Worker
Delaware	Licensed Clinical Social Worker
Delaware	Licensed Masters Social Worker

Delaware	Licensed Bachelors Social Worker
District of Columbia	Licensed Independent Social Worker
District of Columbia	Licensed Graduate Social Worker
District of Columbia	Licensed Social Work Associate
Florida	Certified Master Social Worker
Georgia	Licensed Master Social Worker
Guam	Licensed Clinical Social Worker
Guam	Licensed Master Social Worker
Guam	Licensed Bachelor Social Worker
Hawaii	Licensed Social Worker
Hawaii	Licensed Bachelor Social Worker

Idaho	Licensed Master Social Worker
Idaho	Licensed Social Worker
Illinois	Licensed Clinical Social Worker 1
Illinois	Licensed Clinical Social Worker 2
Illinois	Licensed Social Worker 1
Illinois	Licensed Social Worker 2
Indiana	Licensed Social Worker
Indiana	Licensed Bachelor Social Worker
Iowa	Licensed Master Social Worker
Iowa	Licensed Bachelor Social Worker
Kansas	Licensed Master Social Worker

Kansas	Licensed Bachelor Social Worker
Kentucky	Certified Social Worker
Kentucky	Licensed Social Worker 1
Kentucky	Licensed Social Worker 2
Louisiana	Licensed Master Social Worker
Louisiana	Certified Social Worker
Louisiana	Registered Social Worker
Maine	Licensed Masters Social Worker, Clinical Conditional
Maine	Licensed Master Social Worker
Maine	Licensed Social Worker 1
Manitoba	Registered Social Worker

Maryland	Licensed Certified Social Worker
Maryland	Licensed Master Social Worker
Maryland	Licensed Bachelor Social Worker
Massachusetts	Licensed Certified Social Worker
Massachusetts	Licensed Social Worker 1
Massachusetts	Licensed Social Worker 2
Massachusetts	Licensed Social Worker 3
Massachusetts	Licensed Social Worker 4
Massachusetts	Licensed Social Worker 5
Massachusetts	Licensed Social Worker 6
Massachusetts	Licensed Social Work Associate 1

Massachusetts	Licensed Social Work Associate 2
Massachusetts	Licensed Social Work Associate 3
Michigan	Limited License Master's Social Worker
Michigan	Limited Bachelor Social Worker
Michigan	Limited Social Service Technician
Minnesota	Licensed Independent Social Worker
Minnesota	Licensed Graduate Social Worker
Minnesota	Licensed Social Worker
Mississippi	Licensed Master Social Worker
Mississippi	Licensed Social Worker
Missouri	Licensed Master Social Worker

Missouri	Licensed Bachelors Social Worker
Montana	Licensed Clinical Social Worker Candidate
Montana	Licensed Master Social Worker Candidate (non-clinical)
Montana	Licensed Baccalaureate Social Worker Candidate
Nebraska	Provisional Mental Health Practitioner
Nebraska	Certified Master Social Worker
Nebraska	Provisional Certified Master Social Worker
Nebraska	Certified Social Worker
Nevada	Independent Social Worker
Nevada	Social Worker
New Brunswick	Registered Social Worker

New Hampshire	Licensed Independent Clinical Social Worker
New Jersey	Licensed Social Worker
New Jersey	Certified Social Worker 1
New Jersey	Certified Social Worker 2
New Mexico	Licensed Independent Social Worker
New Mexico	Licensed Master Social Worker
New Mexico	Licensed Baccalaureate Social Worker
New York	Licensed Master Social Worker
Newfoundland & Labrador	Registered Social Worker
North Carolina	Licensed Clinical Social Worker Associate
North Carolina	Certified Social Work Manager

North Carolina	Certified Master Social Worker
North Carolina	Certified Social Worker
North Dakota	Licensed Clinical Social Worker
North Dakota	Licensed Master Social Worker
North Dakota	Licensed Baccalaureate Social Worker
Northern Mariana Islands	Licensed Clinical Social Worker
Northern Mariana Islands	Licensed Master Social Worker
Northern Mariana Islands	Licensed Baccalaureate Social Worker
Nova Scotia	Registered Social Worker 1
Nova Scotia	Registered Social Worker 2
Nova Scotia	Registered Social Worker Candidate

Ohio	Licensed Social Worker
Ohio	Social Work Assistant
Oklahoma	Licensed Master Social Worker
Oklahoma	Licensed Social Work Associate
Ontario	Registered Social Worker
Oregon	Certified Social Work Associate
Oregon	Licensed Master's Social Worker
Oregon	Registered Baccalaureate Social Worker
Pennsylvania	Licensed Social Worker
Pennsylvania	Licensed Bachelor Social Worker
Prince Edward Island	Registered Social Worker

Quebec	Social Worker
Rhode Island	Licensed Clinical Social Worker
Saskatchewan	Registered Social Worker
South Carolina	Licensed Master Social Worker
South Carolina	Licensed Baccalaureate Social Worker
South Dakota	Certified Social Worker
South Dakota	Licensed Social Worker
South Dakota	Social Work Associate
Tennessee	Licensed Master Social Worker
Tennessee	Licensed Baccalaureate Social Worker
Texas	Licensed Master Social Worker

Texas	Licensed Baccalaureate Social Worker
Utah	Licensed Clinical Social Worker
Utah	Certified Social Worker
Utah	Social Service Worker 1
Utah	Social Service Worker 2
Vermont	Licensed Independent Clinical Social Worker
Vermont	Licensed Master Social Worker
Virgin Islands	Certified Independent Social Worker
Virgin Islands	Certified Social Worker
Virgin Islands	Social Worker 1
Virgin Islands	Social Worker 2

Virgin Islands	Social Work Associate
Virginia	Licensed Master's Social Worker
Virginia	Associate Social Worker
Washington	Licensed Social Worker Associate Independent Clinical
Washington	Licensed Social Worker Associate Advanced
West Virginia	Licensed Certified Social Worker
West Virginia	Licensed Graduate Social Worker
West Virginia	Licensed Social Worker
Wisconsin	Advanced Practice Social Worker
Wisconsin	Certified Social Worker
Wisconsin	Social Work Training Certificate

Wyoming	Provisional Clinical Social Worker		
Wyoming	Certified Social Worker		
Florida	Registered Clinical Social Worker Intern	No	
Hawaii	Licensed Clinical Social Worker	No	
Maine	Licensed Social Worker 2, Conditional	No	
Oklahoma	Licensed Social Worker	No	
West Virginia	Provisional Licensed Social Worker	No	
Alabama	Licensed Independent Clinical Social Worker	Yes	Licensed Masters Social Worker
Alberta	Registered Social Worker	Yes	Provisional RSW
Arkansas	Licensed Certified Social Worker	Yes	Licensed Master Social Worker
California	Licensed Clinical Social Worker	Yes	Associate Clinical Social Worker

District of Columbia	Licensed Independent Clinical Social Worker	Yes	Licensed Graduate Social Worker
Florida	Licensed Clinical Social Worker	Yes	Registered Clinical Social Work Intern
Georgia	Licensed Clinical Social Worker	Yes	Licensed Masters Social Worker
Idaho	Licensed Clinical Social Worker	Yes	Licensed Master Social Worker
Indiana	Licensed Clinical Social Worker	Yes	Licensed Social Worker
Iowa	Licensed Independent Social Worker	Yes	Licensed Master Social Worker
Kansas	Licensed Specialist Clinical Social Worker	Yes	Licensed Masters Social Worker
Kentucky	Licensed Clinical Social Worker	Yes	Certified Social Worker
Louisiana	Licensed Clinical Social Worker	Yes	Licensed Masters Social Worker
Maine	Licensed Clinical Social Worker 1	Yes	Licensed Master Social Worker-Clinical
Maine	Licensed Clinical Social Worker 2	Yes	Licensed Master Social Worker-Clinical

Maryland	Licensed Certified Social Worker-Clinical	Yes	Licensed Master Social Worker
Massachusetts	Licensed Independent Clinical Social Worker	Yes	Licensed Certified Social Worker
Michigan	Licensed Master Social Worker-Clinical	Yes	Limited License Master's Social Worker
Michigan	Licensed Master Social Worker - Macro	Yes	Limited License Master's Social Worker
Michigan	Licensed Bachelor Social Worker	Yes	Limited Bachelor Social Worker
Michigan	Social Service Technician 1	Yes	Limited Social Service Technician
Michigan	Social Service Technician 2	Yes	Limited Social Service Technician
Michigan	Social Service Technician 3	Yes	Limited Social Service Technician
Minnesota	Licensed Independent Clinical Social Worker	Yes	Licensed Graduate Social Worker
Mississippi	Licensed Certified Social Worker	Yes	Licensed Master Social Worker
Missouri	Licensed Clinical Social Worker	Yes	Licensed Master Social Worker

Missouri	Licensed Advanced Macro Social Worker	Yes	Licensed Master Social Worker
Montana	Licensed Clinical Social Worker	Yes	Social Worker Licensure Candidate
Montana	Licensed Master's Social Worker	Yes	Social Worker Licensure Candidate
Montana	Licensed Baccalaureate Social Worker	Yes	Licensed Baccalaureate Social Worker
Nebraska	Licensed Independent Mental Health Practitioner	Yes	Licensed Mental Health Practitioner
Nebraska	Licensed Mental Health Practitioner	Yes	Provisional Licensed Mental Health
Nevada	Clinical Social Worker	Yes	Social Worker
New Jersey	Licensed Clinical Social Worker	Yes	Licensed Social Worker
New Mexico	Licensed Clinical Social Worker	Yes	Licensed Master Social Worker
New York	Licensed Clinical Social Worker	Yes	Licensed Master Social Worker
North Carolina	Licensed Clinical Social Worker	Yes	LCSW-Associate

Ohio	Licensed Independent Social Worker	Yes	Licensed Social Worker
Oklahoma	Licensed Clinical Social Worker	Yes	Licensed Social Worker-Associate or
Oklahoma	Licensed Social Worker-Administration	Yes	Licensed Social Worker-Administration
Oregon	Licensed Clinical Social Worker	Yes	Certified Social Work Associate
Pennsylvania	Licensed Clinical Social Worker	Yes	Licensed Social Worker
Rhode Island	Licensed Independent Clinical Social Worker	Yes	Licensed Clinical Social Worker
South Carolina	Licensed Independent Social Worker-CP	Yes	Licensed Masters Social Worker
South Carolina	Licensed Independent Social Worker-AP	Yes	Licensed Masters Social Worker
South Dakota	Certified Social Worker Private Independent Practice	Yes	Certified Social Worker
Tennessee	Licensed Clinical Social Worker	Yes	Licensed Masters Social Worker
Tennessee	Licensed Advanced Practice Social Worker	Yes	Licensed Masters Social Worker

Texas	Licensed Clinical Social Worker	Yes	Licensed Masters Social Worker
Texas	Licensed Master Social Worker-Advanced Practice	Yes	Licensed Masters Social Worker
Virginia	Licensed Clinical Social Worker	Yes	Registered Social Worker
Virginia	Licensed Baccalaureate Social Worker	Yes	
Washington	Licensed Independent Clinical Social Worker	Yes	Licensed Social Worker Associate
Washington	Licensed Advanced Social Worker	Yes	Licensed Social Worker Associate
West Virginia	Licensed Independent Clinical Social Worker	Yes	Licensed Graduate Social Worker
Wisconsin	Licensed Clinical Social Worker	Yes	Advanced Practice Social Worker or
Wisconsin	Certified Independent Social Worker	Yes	Advanced Practice Social Worker
Wyoming	Licensed Clinical Social Worker	Yes	Provisional Licensed Clinical Social Worker

*Commonwealth of Virginia*



**REGULATIONS**  
**GOVERNING THE PRACTICE OF SOCIAL**  
**WORK**

**VIRGINIA BOARD OF SOCIAL WORK**

**Title of Regulations: 18 VAC 140-20-10 et seq.**

**Statutory Authority: §§ 54.1-2400 and Chapter 37 of Title 54.1  
of the *Code of Virginia***

**Revised Date: March 18, 2021**

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## Part I. General Provisions.

### 18VAC140-20-10. Definitions.

A. The following words and terms when used in this chapter shall have the meanings ascribed to them in § 54.1-3700 of the Code of Virginia:

Baccalaureate social worker

Board

Casework

Casework management and supportive services

Clinical social worker

Master's social worker

Practice of social work

Social worker

B. The following words and terms when used in this chapter shall have the following meanings unless the context clearly indicates otherwise:

"Accredited school of social work" means a school of social work accredited by the Council on Social Work Education.

"Active practice" means post-licensure practice at the level of licensure for which an applicant is seeking licensure in Virginia and shall include at least 360 hours of practice in a 12-month period.

"Ancillary services" means activities such as case management, recordkeeping, referral, and coordination of services.

"Clinical course of study" means graduate course work that includes specialized advanced courses in human behavior and the social environment, social justice and policy, psychopathology, and diversity issues; research; clinical practice with individuals, families, and groups; and a clinical practicum that focuses on diagnostic, prevention, and treatment services.

"Clinical social work services" include the application of social work principles and methods in performing assessments and diagnoses based on a recognized manual of mental and emotional disorders or recognized system of problem definition, preventive and early intervention services, and treatment services, including psychosocial interventions, psychotherapy, and counseling for mental disorders, substance abuse, marriage and family dysfunction, and problems caused by social and psychological stress or health impairment.

"Conversion therapy" means any practice or treatment as defined in § 54.1-2409.5 A of the Code of Virginia.

"Exempt practice" is that which meets the conditions of exemption from the requirements of licensure as defined in § 54.1-3701 of the Code of Virginia.

"Face-to-face " means the physical presence of the individuals involved in the supervisory relationship during either individual or group supervision or in the delivery of clinical social work services by a supervisee and may include the use of technology that provides real-time, interactive contact among the individuals involved.

"LBSW" means a licensed baccalaureate social worker.

"LMSW" means a licensed master's social worker.

"Nonexempt practice" means that which does not meet the conditions of exemption from the requirements of licensure as defined in § 54.1-3701 of the Code of Virginia.

"Supervisee" means an individual who has submitted a supervisory contract and has received board approval to provide clinical services in social work under supervision.

"Supervision" means a professional relationship between a supervisor and supervisee in which the supervisor directs, monitors and evaluates the supervisee's social work practice while promoting development of the supervisee's knowledge, skills and abilities to provide social work services in an ethical and competent manner.

"Supervisory contract" means an agreement that outlines the expectations and responsibilities of the supervisor and supervisee in accordance with regulations of the board.

#### **18VAC140-20-20. [Repealed]**

#### **18VAC140-20-30. Fees.**

A. The board has established fees for the following:

1. Registration of supervision	\$50
2. Addition to or change in registration of supervision	\$25
3. Application processing	
a. Licensed clinical social worker	\$165
b. LBSW	\$100
c. LMSW	\$115
4. Annual license renewal	
a. Registered social worker	\$25
b. Associate social worker	\$25
c. LBSW	\$55
d. LMSW	\$65
e. Licensed clinical social worker	\$90

5. Penalty for late renewal	
a. Registered social worker	\$10
b. Associate social worker	\$10
c. LBSW	\$20
d. LMSW	\$20
e. Licensed clinical social worker	\$30
6. Verification of license to another jurisdiction	\$25
7. Additional or replacement licenses	\$15
8. Additional or replacement wall certificates	\$25
9. Handling fee for returned check or dishonored credit or debit card	\$50
10. Reinstatement following disciplinary action	\$500

B. Fees shall be paid by check or money order made payable to the Treasurer of Virginia and forwarded to the board. All fees are nonrefundable.

C. Examination fees shall be paid directly to the examination service according to its requirements.

**18VAC140-20-35. Sex offender treatment provider certification.**

Anyone licensed by the board who is seeking certification as a sex offender treatment provider shall obtain certification under the Board of Psychology and adhere to the board's Regulations Governing the Certification of Sex Offender Treatment Providers, 18VAC125-30-10 et seq.

**18VAC140-20-37. Licensure; general.**

LBSWs and LMSWs may practice in exempt practice settings under appropriate supervision. In accordance with § 54.1-3700 of the Code of Virginia, an LBSW shall engage in the practice of social work under the supervision of a master's social worker. Only licensed clinical social workers may practice at the autonomous level.

**Part II. Requirements for Licensure.**

**18VAC140-20-40. Requirements for licensure by examination as a clinical social worker.**

Every applicant for examination for licensure as a licensed clinical social worker shall:

1. Meet the education requirements prescribed in 18VAC140-20-49 and experience requirements prescribed in 18VAC140-20-50.
2. Submit a completed application to the board office within two years of completion of supervised experience to include:

a. Documentation, on the appropriate forms, of the successful completion of the supervised experience requirements of 18VAC140-20-50 along with documentation of the supervisor's out-of-state license where applicable. Applicants whose former supervisor is deceased, or whose whereabouts is unknown, shall submit to the board a notarized affidavit from the present chief executive officer of the agency, corporation or partnership in which the applicant was supervised. The affidavit shall specify dates of employment, job responsibilities, supervisor's name and last known address, and the total number of hours spent by the applicant with the supervisor in face-to-face supervision;

b. The application fee prescribed in 18VAC140-20-30;

c. Official transcript or documentation submitted from the appropriate institutions of higher education that verifies successful completion of educational requirements set forth in 18VAC140-20-49;

d. Documentation of any other health or mental health licensure or certification, if applicable; and

e. A current report from the U.S. Department of Health and Human Services National Practitioner Data Bank (NPDB).

3. Provide evidence of passage of the examination prescribed in 18VAC140-20-70.

**18VAC140-20-45. Requirements for licensure by endorsement.**

A. Every applicant for licensure by endorsement shall submit in one package:

1. A completed application and the application fee prescribed in 18VAC140-20-30.

2. Documentation of active social work licensure in good standing obtained by standards required for licensure in another jurisdiction as verified by the out-of-state licensing agency. Licensure in the other jurisdiction shall be of a comparable type as the licensure that the applicant is seeking in Virginia.

3. Verification of a passing score on a board-approved national exam at the level for which the applicant is seeking licensure in Virginia.

4. Documentation of any other health or mental health licensure or certification, if applicable.

5. A current report from the U.S. Department of Health and Human Services National Practitioner Data Bank (NPDB).

6. Verification of:

a. Active practice at the level for which the applicant is seeking licensure in another United States jurisdiction for 24 out of the past 60 months;

b. Active practice in an exempt setting at the level for which the applicant is seeking licensure for 24 out of the past 60 months; or

c. Evidence of supervised experience requirements substantially equivalent to those outlined in 18VAC140-20-50 A 2 and A 3.

7. Certification that the applicant is not the respondent in any pending or unresolved board action in another jurisdiction or in a malpractice claim.

B. If an applicant for licensure by endorsement has not passed a board-approved national examination at the level for which the applicant is seeking licensure in Virginia, the board may approve the applicant to sit for such examination.

**18VAC140-20-49. Educational requirements for a licensed clinical social worker.**

A. The applicant for licensure as a clinical social worker shall document successful completion of one of the following: (i) a master's degree in social work with a clinical course of study from a program accredited by the Council on Social Work Education, (ii) a master's degree in social work with a nonclinical concentration from a program accredited by the Council on Social Work Education together with successful completion of the educational requirements for a clinical course of study through a graduate program accredited by the Council on Social Work Education, or (iii) a program of education and training in social work at an educational institution outside the United States recognized by the Council on Social Work Education.

B. The requirement for a clinical practicum in a clinical course of study shall be a minimum of 600 hours, which shall be integrated with clinical course of study coursework and supervised by a person who is a licensed clinical social worker or who holds a master's or doctor's degree in social work and has a minimum of three years of experience in clinical social work services after earning the graduate degree. An applicant who has otherwise met the requirements for a clinical course of study but who did not have a minimum of 600 hours in a supervised field placement/practicum in clinical social work services may meet the requirement by obtaining an equivalent number of hours of supervised practice in clinical social work services in addition to the experience required in 18VAC140-20-50.

**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:

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 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 face-to-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 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 he 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 assure 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;
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 phone 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 board approved supervision until licensed in Virginia as a licensed clinical social worker.

**18VAC140-20-51. Requirements for licensure by examination as an LBSW or LMSW.**

A. In order to be approved to sit for the board-approved examination as an LBSW or an LMSW, an applicant shall:

1. Meet the education requirements prescribed in 18VAC140-20-60.
2. Submit a completed application to the board office to include:
  - a. The application fee prescribed in 18VAC140-20-30; and
  - b. Official transcripts submitted from the appropriate institutions of higher education.

B. In order to be licensed by examination as an LBSW or an LMSW, an applicant shall:

1. Meet the requirements prescribed in 18VAC140-20-60; and
2. Submit, in addition to the application requirements of subsection A of this section, the following:
  - a. Verification of a passing score on the board-approved national examination;
  - b. Documentation of any other health or mental health licensure or certification, if applicable; and
  - c. A current report from the U.S. Department of Health and Human Services National Practitioner Data Bank (NPDB).

**18VAC140-20-60. Education requirements for an LBSW or LMSW.**

The applicant for licensure as an LBSW shall hold a bachelor's degree from an accredited school of social work. The applicant for licensure as an LMSW shall hold a master's degree from an accredited school of social work. Graduates of foreign institutions must establish the equivalency of their education to this requirement through the Foreign Equivalency Determination Service of the Council on Social Work Education.

### **Part III Examinations**

#### **18VAC140-20-70. Examination requirement.**

A. An applicant for licensure by the board as an LBSW, an LMSW, or clinical social worker shall pass a written examination prescribed by the board.

1. The examination prescribed for licensure as a clinical social worker shall be the licensing examination of the Association of Social Work Boards at the clinical level.
2. The examination prescribed for licensure as an LBSW shall be the licensing examination of the Association of Social Work Boards at the bachelor's level.
3. The examination prescribed for licensure as an LMSW shall be the licensing examination of the Association of Social Work Boards at the master's level.

B. An applicant approved by the board to sit for an examination shall take that examination within two years of the date of the initial board approval. If the applicant has not passed the examination by the end of the two-year period here prescribed, the applicant shall reapply according to the requirements of the regulations in effect at that time in order to be approved for another two years in which to pass the examination.

C. If an applicant for clinical social work licensure has not passed the examination within the second two-year approval period, the applicant shall be required to register for supervision and complete one additional year as a supervisee before approval for another two-year period in which to re-take the examination may be granted.

#### **18VAC140-20-80 to 18VAC140-20-90. [Repealed]**

### **Part IV. Licensure Renewal; Reinstatement.**

#### **18VAC140-20-100. Licensure renewal.**

A. Beginning with the 2017 renewal, licensees shall renew their licenses on or before June 30 of each year and pay the renewal fee prescribed by the board.

B. Licensees who wish to maintain an active license shall pay the appropriate fee and document on the renewal form compliance with the continued competency requirements prescribed in 18VAC140-20-105. Newly licensed individuals are not required to document continuing education on the first renewal date following initial licensure.

C. A licensee who wishes to place his license in inactive status may do so upon payment of a fee equal to one-half of the annual license renewal fee as indicated on the renewal form. No person shall practice social work or clinical social work in Virginia unless he holds a current active license. A licensee who has placed himself in inactive status may become active by fulfilling the reactivation requirements set forth in 18VAC140-20-110.

D. Each licensee shall furnish the board his current address of record. All notices required by law or by this chapter to be mailed by the board to any such licensee shall be validly given when mailed to the latest address of record given by the licensee. Any change in the address of record or the public address, if different from the address of record, shall be furnished to the board within 30 days of such change.

**18VAC140-20-105. Continued competency requirements for renewal of an active license.**

A. Licensed clinical social workers shall be required to have completed a minimum of 30 contact hours of continuing education and LBSWs and LMSWs shall be required to have completed a minimum of 15 contact hours of continuing education prior to licensure renewal in even years. Courses or activities shall be directly related to the practice of social work or another behavioral health field. A minimum of six of those hours for licensed clinical social workers and a minimum of three of those hours for licensed social workers must pertain to ethics or the standards of practice for the behavioral health professions or to laws governing the practice of social work in Virginia. Up to two continuing education hours required for renewal may be satisfied through delivery of social work services, without compensation, to low-income individuals receiving health services through a local health department or a free clinic organized in whole or primarily for the delivery of those services, as verified by the department or clinic. Three hours of volunteer service is required for one hour of continuing education credit.

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

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

B. Hours may be obtained from a combination of board-approved activities in the following two categories:

1. Category I. Formally Organized Learning Activities. A minimum of 20 hours for licensed clinical social workers or 10 hours for licensed social workers shall be documented in this category, which shall include one or more of the following:

a. Regionally accredited university or college academic courses in a behavioral health discipline. A maximum of 15 hours will be accepted for each academic course.

b. Continuing education programs offered by universities or colleges accredited by the Council on Social Work Education.

c. Workshops, seminars, conferences, or courses in the behavioral health field offered by federal, state or local social service agencies, public school systems or licensed health facilities and licensed hospitals.

d. Workshops, seminars, conferences or courses in the behavioral health field offered by an individual or organization that has been certified or approved by one of the following:

(1) The Child Welfare League of America and its state and local affiliates.

- (2) The National Association of Social Workers and its state and local affiliates.
- (3) The Association of Black Social Workers and its state and local affiliates.
- (4) The Family Service Association of America and its state and local affiliates.
- (5) The Clinical Social Work Association and its state and local affiliates.
- (6) The Association of Social Work Boards.
- (7) Any state social work board.

2. Category II. Individual Professional Activities. A maximum of 10 of the required 30 hours for licensed clinical social workers or a maximum of five of the required 15 hours for licensed social workers may be earned in this category, which shall include one or more of the following:

- a. Participation in an Association of Social Work Boards item writing workshop. (Activity will count for a maximum of two hours.)
- b. Publication of a professional social work-related book or initial preparation or presentation of a social work-related course. (Activity will count for a maximum of 10 hours.)
- c. Publication of a professional social work-related article or chapter of a book, or initial preparation or presentation of a social work-related in-service training, seminar or workshop. (Activity will count for a maximum of five hours.)
- d. Provision of a continuing education program sponsored or approved by an organization listed under Category I. (Activity will count for a maximum of two hours and will only be accepted one time for any specific program.)
- e. Field instruction of graduate students in a Council on Social Work Education-accredited school. (Activity will count for a maximum of two hours.)
- f. Serving as an officer or committee member of one of the national professional social work associations listed under subdivision B 1 d of this section or as a member of a state social work licensing board. (Activity will count for a maximum of two hours.)
- g. Attendance at formal staffings at federal, state or local social service agencies, public school systems or licensed health facilities and licensed hospitals. (Activity will count for a maximum of five hours.)
- h. Individual or group study including listening to audio tapes, viewing video tapes, or reading professional books or articles. (Activity will count for a maximum of five hours.)

**18VAC140-20-106. Documenting compliance with continuing education requirements.**

- A. All licensees in active status are required to maintain original documentation for a period of three years following renewal.
- B. The board may conduct an audit of licensees to verify compliance with the requirement for a renewal period.
- C. Upon request, a licensee shall provide documentation as follows:
  1. Documentation of Category I activities by submission of:
    - a. Official transcripts showing credit hours earned; or

b. Certificates of participation.

2. Attestation of completion of Category II activities.

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

**18VAC140-20-110. Late renewal; reinstatement; reactivation.**

A. An LBSW, LMSW, or clinical social worker whose license has expired may renew that license within one year after its expiration date by:

1. Providing evidence of having met all applicable continuing education requirements.
2. Paying the penalty for late renewal and the renewal fee as prescribed in 18VAC140-20-30.

B. An LBSW, LMSW, or clinical social worker who fails to renew the license after one year and who wishes to resume practice shall apply for reinstatement and pay the reinstatement fee, which shall consist of the application processing fee and the penalty fee for late renewal, as set forth in 18VAC140-20-30. An applicant for reinstatement shall also provide:

1. Documentation of having completed all applicable continued competency hours equal to the number of years the license has lapsed, not to exceed four years;
2. Documentation of any other health or mental health licensure or certification held in another United States jurisdiction, if applicable; and
3. A current report from the U.S. Department of Health and Human Services National Practitioner Data Bank.

C. In addition to requirements set forth in subsection B of this section, an applicant for reinstatement whose license has been lapsed for 10 or more years shall also provide evidence of competency to practice by documenting:

1. Active practice in another United States jurisdiction for at least 24 out of the past 60 months immediately preceding application;
2. Active practice in an exempt setting for at least 24 out of the past 60 months immediately preceding application; or
3. Practice as a supervisee under supervision for at least 360 hours in the 12 months immediately preceding reinstatement of licensure in Virginia. The supervised practice shall include a minimum of 60 hours of face-to-face direct client contact and nine hours of face-to-face supervision.

D. An LBSW, LMSW, or clinical social worker wishing to reactivate an inactive license shall submit the difference between the renewal fee for active licensure and the fee for inactive licensure renewal and document completion of continued competency hours equal to the number of years the license has been inactive, not to exceed four years. An applicant for reactivation who has been inactive for 10 or more years shall also provide evidence of competency to practice by documenting:

1. Active practice in another United States jurisdiction for at least 24 out of the past 60 months immediately preceding application;
2. Active practice in an exempt setting for at least 24 out of the past 60 months immediately preceding application; or
3. Practice as a supervisee under supervision for at least 360 hours in the 12 months immediately preceding reactivation of licensure in Virginia. The supervised practice shall include a minimum of 60 hours of face-to-face direct client contact and nine hours of face-to-face supervision.

**18VAC140-20-120. [Repealed]**

**18VAC140-20-130. Renewal of registration for associate social workers and registered social workers.**

The registration of every associate social worker and registered social worker with the former Virginia Board of Registration of Social Workers under former §54-775.4 of the Code of Virginia shall expire on June 30 of each year.

1. Each registrant shall return the completed application before the expiration date, accompanied by the payment of the renewal fee prescribed by the board.
2. Failure to receive the renewal notice shall not relieve the registrant from the renewal requirement.

**18VAC140-20-140. [Repealed]**

**Part V. Standards of Practice.**

**18VAC140-20-150. Professional conduct.**

A. The protection of the public health, safety, and welfare and the best interest of the public shall be the primary guide in determining the appropriate professional conduct of all persons whose activities are regulated by the board. Regardless of the delivery method, whether in person, by telephone or electronically, these standards shall apply to the practice of social work.

B. Persons licensed as LBSWs, LMSWs, and clinical social workers shall:

1. Be able to justify all services rendered to or on behalf of clients as necessary for diagnostic or therapeutic purposes.
2. Provide for continuation of care when services must be interrupted or terminated.
3. Practice only within the competency areas for which they are qualified by education and experience.

4. Report to the board known or suspected violations of the laws and regulations governing the practice of social work.

5. Neither accept nor give commissions, rebates, or other forms of remuneration for referral of clients for professional services.

6. Ensure that clients are aware of fees and billing arrangements before rendering services.

7. Inform clients of potential risks and benefits of services and the limitations on confidentiality and ensure that clients have provided informed written consent to treatment.

8. Keep confidential their therapeutic relationships with clients and disclose client records to others only with written consent of the client, with the following exceptions: (i) when the client is a danger to self or others; or (ii) as required by law.

9. When advertising their services to the public, ensure that such advertising is neither fraudulent nor misleading.

10. As treatment requires and with the written consent of the client, collaborate with other health or mental health providers concurrently providing services to the client.

11. Refrain from undertaking any activity in which one's personal problems are likely to lead to inadequate or harmful services.

12. Recognize conflicts of interest and inform all parties of the nature and directions of loyalties and responsibilities involved.

13. Not engage in conversion therapy with any person younger than 18 years of age.

C. In regard to client records, persons licensed by the board shall comply with provisions of § 32.1-127.1:03 of the Code of Virginia on health records privacy and shall:

1. Maintain written or electronic clinical records for each client to include identifying information and assessment that substantiates diagnosis and treatment plans. Each record shall include a diagnosis and treatment plan, progress notes for each case activity, information received from all collaborative contacts and the treatment implications of that information, and the termination process and summary.

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

3. Disclose or release records to others only with clients' expressed written consent or that of their legally authorized representative or as mandated by law.

4. Ensure confidentiality in the usage of client records and clinical materials by obtaining informed consent from clients or their legally authorized representative before (i) videotaping, (ii) audio

recording, (iii) permitting third-party observation, or (iv) using identifiable client records and clinical materials in teaching, writing or public presentations.

5. Maintain client records for a minimum of six years or as otherwise required by law from the date of termination of the therapeutic relationship with the following exceptions:

a. At minimum, records of a minor child shall be maintained for six years after attaining the age of majority or 10 years following termination, whichever comes later.

b. Records that are required by contractual obligation or federal law to be maintained for a longer period of time.

c. Records that have been transferred to another mental health professional or have been given to the client or his legally authorized representative.

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

1. Not engage in a dual relationship with a client or a supervisee that could impair professional judgment or increase the risk of exploitation or harm to the client or supervisee. (Examples of such a relationship include familial, social, financial, business, bartering, or a close personal relationship with a client or supervisee.) Social workers shall take appropriate professional precautions when a dual relationship cannot be avoided, such as informed consent, consultation, supervision, and documentation to ensure that judgment is not impaired and no exploitation occurs.

2. Not have any type of romantic relationship or sexual intimacies with a client or those included in collateral therapeutic services, and not provide services to those persons with whom they have had a romantic or sexual relationship. Social workers shall not engage in romantic relationship or sexual intimacies with a former client within a minimum of five years after terminating the professional relationship. Social workers who engage in such a relationship after five years following termination shall have the responsibility to examine and document thoroughly that such a relationship did not have an exploitive nature, based on factors such as duration of therapy, amount of time since therapy, termination circumstances, client's personal history and mental status, adverse impact on the client. A client's consent to, initiation of or participation in sexual behavior or involvement with a social worker does not change the nature of the conduct nor lift the regulatory prohibition.

3. Not engage in any romantic or sexual relationship or establish a therapeutic relationship with a current supervisee or student. Social workers shall avoid any nonsexual dual relationship with a supervisee or student in which there is a risk of exploitation or potential harm to the supervisee or student, or the potential for interference with the supervisor's professional judgment.

4. Recognize conflicts of interest and inform all parties of the nature and directions of loyalties and responsibilities involved.

5. Not engage in a personal relationship with a former client in which there is a risk of exploitation or potential harm or if the former client continues to relate to the social worker in his professional capacity.

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

**18VAC140-20-160. Grounds for disciplinary action or denial of issuance of a license or registration.**

The board may refuse to admit an applicant to an examination; refuse to issue a license or registration to an applicant; or reprimand, impose a monetary penalty, place on probation, impose such terms as it may designate, suspend for a stated period of time or indefinitely, or revoke a license or registration for one or more of the following grounds:

1. Conviction of a felony or of a misdemeanor involving moral turpitude;
2. Procurement of license by fraud or misrepresentation;
3. Conducting one's practice in such a manner so as to make the practice a danger to the health and welfare of one's clients or to the public. In the event a question arises concerning the continued competence of a licensee, the board will consider evidence of continuing education.
4. Being unable to practice social work with reasonable skill and safety to clients by reason of illness, excessive use of alcohol, drugs, narcotics, chemicals or any other type of material or as a result of any mental or physical condition;
5. Conducting one's practice in a manner contrary to the standards of ethics of social work or in violation of 18VAC140-20-150, standards of practice;
6. Performing functions outside the board-licensed area of competency;
7. Failure to comply with the continued competency requirements set forth in 18VAC140-20-105; and
8. Violating or aiding and abetting another to violate any statute applicable to the practice of social work or any provision of this chapter; and
9. Failure to provide supervision in accordance with the provisions of 18VAC140-20-50 or 18VAC140-20-60.

**18VAC140-20-170. Reinstatement following disciplinary action.**

Any person whose license has been suspended, revoked, or denied renewal by the board under the provisions of 18VAC140-20-160 shall, in order to be eligible for reinstatement, (i) submit a new application to the board for a license, (ii) pay the appropriate reinstatement fee, and (iii) submit any other credentials as prescribed by the board. After a hearing, the board may, at its discretion, grant the reinstatement.

**18VAC140-20-171. Criteria for delegation of informal fact-finding proceedings to an agency subordinate.**

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

B. Criteria for delegation. Cases that may not be delegated to an agency subordinate include violations of standards of practice as set forth in 18 VAC 140-20-150, except as may otherwise be determined by the probable cause committee in consultation with the board chair.

C. Criteria for an agency subordinate.

1. An agency subordinate authorized by the board to conduct an informal fact-finding proceeding may include board members and professional staff or other persons deemed knowledgeable by virtue of their training and experience in administrative proceedings involving the regulation and discipline of health professionals.

2. The executive director shall maintain a list of appropriately qualified persons to whom an informal fact-finding proceeding may be delegated.

3. The board may delegate 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 heard.

Jurisdiction	License Name	License Required During Supervision if Different?	Title of License Required Under Supervision
Alabama	Licensed Independent Clinical Social Worker	Yes	Licensed Masters Social Worker
Arkansas	Licensed Certified Social Worker	Yes	Licensed Master Social Worker
California	Licensed Clinical Social Worker	Yes	Associate Clinical Social Worker
DC	Licensed Independent Clinical Social Worker	Yes	Licensed Graduate Social Worker
Florida	Licensed Clinical Social Worker	Yes	Registered Clinical Social Work Intern
Georgia	Licensed Clinical Social Worker	Yes	Licensed Masters Social Worker
Idaho	Licensed Clinical Social Worker	Yes	Licensed Master Social Worker
Indiana	Licensed Clinical Social Worker	Yes	Licensed Social Worker
Iowa	Licensed Independent Social Worker	Yes	Licensed Master Social Worker
Kansas	Licensed Specialist Clinical Social Worker	Yes	Licensed Masters Social Worker
Kentucky	Licensed Clinical Social Worker	Yes	Certified Social Worker
Louisiana	Licensed Clinical Social Worker	Yes	Licensed Masters Social Worker
Maine	Licensed Clinical Social Worker 1	Yes	Licensed Master Social Worker-Clinical Conditional
Maine	Licensed Clinical Social Worker 2	Yes	Licensed Master Social Worker-Clinical Conditional
Maryland	Licensed Certified Social Worker-Clinical	Yes	Licensed Master Social Worker
Massachusetts	Licensed Independent Clinical Social Worker	Yes	Licensed Certified Social Worker
Michigan	Licensed Master Social Worker-Clinical	Yes	Limited License Master's Social Worker
Minnesota	Licensed Independent Clinical Social Worker	Yes	Licensed Graduate Social Worker
Mississippi	Licensed Certified Social Worker	Yes	Licensed Master Social Worker
Missouri	Licensed Advanced Macro Social Worker	Yes	Licensed Master Social Worker
Missouri	Licensed Clinical Social Worker	Yes	Licensed Master Social Worker
Montana	Licensed Baccalaureate Social Worker	Yes	Licensed Baccalaureate Social Worker Candidate
Montana	Licensed Clinical Social Worker	Yes	Social Worker Licensure Candidate
Montana	Licensed Master's Social Worker	Yes	Social Worker Licensure Candidate
Nebraska	Licensed Independent Mental Health Practitioner	Yes	Licensed Mental Health Practitioner
Nebraska	Licensed Mental Health Practitioner	Yes	Provisional Licensed Mental Health Practitioner or Certified Master Social Worker
Nevada	Clinical Social Worker	Yes	Social Worker

New Jersey	Licensed Clinical Social Worker	Yes	Licensed Social Worker
New Mexico	Licensed Clinical Social Worker	Yes	Licensed Master Social Worker
New York	Licensed Clinical Social Worker	Yes	Licensed Master Social Worker
North Carolina	Licensed Clinical Social Worker	Yes	LCSW-Associate
Ohio	Licensed Independent Social Worker	Yes	Licensed Social Worker
Oklahoma	Licensed Clinical Social Worker	Yes	Licensed Social Worker-Associate or Licensed Master Social Worker
Oklahoma	Licensed Social Worker-Administration	Yes	Licensed Social Worker-Administration or Licensed Master Social Worker
Oregon	Licensed Clinical Social Worker	Yes	Certified Social Work Associate
Pennsylvania	Licensed Clinical Social Worker	Yes	Licensed Social Worker
Rhode Island	Licensed Independent Clinical Social Worker	Yes	Licensed Clinical Social Worker
South Carolina	Licensed Independent Social Worker-AP	Yes	Licensed Masters Social Worker
South Carolina	Licensed Independent Social Worker-CP	Yes	Licensed Masters Social Worker
South Dakota	Certified Social Worker Private Independent Practice	Yes	Certified Social Worker
Tennessee	Licensed Advanced Practice Social Worker	Yes	Licensed Masters Social Worker
Tennessee	Licensed Clinical Social Worker	Yes	Licensed Masters Social Worker
Texas	Licensed Clinical Social Worker	Yes	Licensed Masters Social Worker
Texas	Licensed Master Social Worker-Advanced Practice	Yes	Licensed Masters Social Worker
Virginia	Licensed Baccalaureate Social Worker	Yes	
Virginia	Licensed Clinical Social Worker	Yes	Registered Social Worker
Washington	Licensed Advanced Social Worker	Yes	Licensed Social Worker Associate Advanced
Washington	Licensed Independent Clinical Social Worker	Yes	Licensed Social Worker Associate Independent Clinical
West Virginia	Licensed Independent Clinical Social Worker	Yes	Licensed Graduate Social Worker
Wisconsin	Certified Independent Social Worker	Yes	Advanced Practice Social Worker
Wisconsin	Licensed Clinical Social Worker	Yes	Advanced Practice Social Worker or Independent Social Worker
Wyoming	Licensed Clinical Social Worker	Yes	Provisional Licensed Clinical Social Worker

Code of Virginia

Title 54.1. Professions and Occupations

Subtitle III. Professions and Occupations Regulated by Boards within the Department of Health Professions

Chapter 24. General Provisions

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

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

1. To establish the qualifications for registration, certification, licensure, permit, or the issuance of a multistate licensure privilege in accordance with the applicable law which are necessary to ensure competence and integrity to engage in the regulated professions.
2. To examine or cause to be examined applicants for certification, licensure, or registration. Unless otherwise required by law, examinations shall be administered in writing or shall be a demonstration of manual skills.
3. To register, certify, license, or issue a multistate licensure privilege to qualified applicants as practitioners of the particular profession or professions regulated by such board.
4. To establish schedules for renewals of registration, certification, licensure, permit, and the issuance of a multistate licensure privilege.
5. To levy and collect fees for application processing, examination, registration, certification, permitting, or licensure or the issuance of a multistate licensure privilege and renewal that are sufficient to cover all expenses for the administration and operation of the Department of Health Professions, the Board of Health Professions, and the health regulatory boards.
6. To promulgate regulations in accordance with the Administrative Process Act (§ 2.2-4000 et seq.) that are reasonable and necessary to administer effectively the regulatory system, which shall include provisions for the satisfaction of board-required continuing education for individuals registered, certified, licensed, or issued a multistate licensure privilege by a health regulatory board through delivery of health care services, without compensation, to low-income individuals receiving health services through a local health department or a free clinic organized in whole or primarily for the delivery of those health services. Such regulations shall not conflict with the purposes and intent of this chapter or of Chapter 1 (§ 54.1-100 et seq.) and Chapter 25 (§ 54.1-2500 et seq.).
7. To revoke, suspend, restrict, or refuse to issue or renew a registration, certificate, license, permit, or multistate licensure privilege which such board has authority to issue for causes enumerated in applicable law and regulations.
8. To appoint designees from their membership or immediate staff to coordinate with the Director and the Health Practitioners' Monitoring Program Committee and to implement, as is necessary, the provisions of Chapter 25.1 (§ 54.1-2515 et seq.). Each health regulatory board shall appoint one such designee.
9. To take appropriate disciplinary action for violations of applicable law and regulations, and to accept, in their discretion, the surrender of a license, certificate, registration, permit, or

multistate licensure privilege in lieu of disciplinary action.

10. To appoint a special conference committee, composed of not less than two members of a health regulatory board or, when required for special conference committees of the Board of Medicine, not less than two members of the Board and one member of the relevant advisory board, or, when required for special conference committees of the Board of Nursing, not less than one member of the Board and one member of the relevant advisory board, to act in accordance with § 2.2-4019 upon receipt of information that a practitioner or permit holder of the appropriate board may be subject to disciplinary action or to consider an application for a license, certification, registration, permit or multistate licensure privilege in nursing. The special conference committee may (i) exonerate; (ii) reinstate; (iii) place the practitioner or permit holder on probation with such terms as it may deem appropriate; (iv) reprimand; (v) modify a previous order; (vi) impose a monetary penalty pursuant to § 54.1-2401, (vii) deny or grant an application for licensure, certification, registration, permit, or multistate licensure privilege; and (viii) issue a restricted license, certification, registration, permit or multistate licensure privilege subject to terms and conditions. The order of the special conference committee shall become final 30 days after service of the order unless a written request to the board for a hearing is received within such time. If service of the decision to a party is accomplished by mail, three days shall be added to the 30-day period. Upon receiving a timely written request for a hearing, the board or a panel of the board shall then proceed with a hearing as provided in § 2.2-4020, and the action of the committee shall be vacated. This subdivision shall not be construed to limit the authority of a board to delegate to an appropriately qualified agency subordinate, as defined in § 2.2-4001, the authority to conduct informal fact-finding proceedings in accordance with § 2.2-4019, upon receipt of information that a practitioner may be subject to a disciplinary action. The recommendation of such subordinate may be considered by a panel consisting of at least five board members, or, if a quorum of the board is less than five members, consisting of a quorum of the members, convened for the purpose of issuing a case decision. Criteria for the appointment of an agency subordinate shall be set forth in regulations adopted by the board.

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

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

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

14. To request and accept from a certified, registered, or licensed practitioner; a facility holding a license, certification, registration, or permit; or a person holding a multistate licensure privilege

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

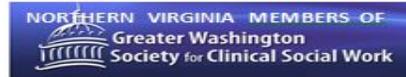
15. When a board has probable cause to believe a practitioner is unable to practice with reasonable skill and safety to patients because of excessive use of alcohol or drugs or physical or mental illness, the board, after preliminary investigation by an informal fact-finding proceeding, may direct that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

1988, c. 765; 1992, cc. 659, 890; 1997, cc. 439, 564; 1998, c. 469; 2002, cc. 455, 698; 2003, cc. 753, 762; 2004, cc. 49, 64; 2009, cc. 472, 534; 2010, c. 414; 2014, c. 426; 2016, c. 82; 2017, c. 423.

The chapters of the acts of assembly referenced in the historical citation at the end of this section(s) may not constitute a comprehensive list of such chapters and may exclude chapters whose provisions have expired.



AND



*Virginia Society for Clinical Social Work  
10106-C Palace Way  
Henrico, Virginia 23238*

*The Greater Washington Society for Clinical Social Work  
PO Box 711  
Garrisonville, VA 22463*

***VSCSW STUDY OF VIRGINIA LSW'S  
OCTOBER 5, 2017  
BY: Joseph G. Lynch LCSW***



**OCTOBER 5, 2017**  
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**BACKGROUND FOR LSW STUDY:**

At the May 11, 2017 Board meeting of The Virginia Board of Social Work (VBSW) a motion was passed to accept as written the proposed legislation recommended by the Regulatory committee. The proposed legislation would add 4 sentences to *Chapter 37 of Title 54.1 of the Code of Virginia; Social Work*. The 4 sentences to be added are below. (See Appendix "A" for the complete text of proposed legislation)

**§ 54.1-3700. Definitions.**

***As used in this chapter, unless the context requires a different meaning:***

*Baccalaureate social worker means a person, engaged in the practice of social work, who practices under the supervision of a master's social worker within an entity not otherwise exempted by provisions of § 54.1-3701 and who is engaged in a basic generalist practice to include casework management and supportive services and consultation and education.*

*Master's social worker means a person, engaged in the practice of social work, who is employed by an entity not otherwise exempted by provisions of § 54.1-3701 and who is engaged in a non-clinical, generalist scope of practice of social work to include staff supervision and management.*

**§ 54.1-3705. Specific powers and duties of the Board.**

*In addition to the powers granted in § 54.1-2400, the Board shall have the following specific powers and duties:*

*5. To license baccalaureate social workers, master's social workers, and clinical social workers to practice consistent with the definitions specified in § 54.1-3700 and regulations promulgated by the Board.*

*6. To register persons for the supervised practice of social work as required for licensure as a clinical social worker.*

**WHAT DO WE KNOW ABOUT PERSONS WHO CURRENTLY HOLD THE LSW?**

The group of social workers that would be most impacted by the proposed legislation are those social workers who currently have the LSW license and those social workers who would apply for the LSW license. Some of the ways that this group would be impacted are:

- The new legislation would enable the VBSW to create a LBSW and LMSW license.
- The new legislation would enable the VBSW to require the LBSW applicant to take the ASWB Bachelor's level exam.

- The new legislation would enable the VBSW to require the LMSW applicant to take the ASWB Master’s level exam.
- The new legislation would define "Masters Social Worker" as a social worker who is engaged in the practice of "**non-clinical**" social work.
- The new legislation would specify that the LMSW is “...engaged in a ***non-clinical, generalist scope of practice of social work to include staff supervision and management...***”

The Department of Health Professions (DHP) gathers some information on all licensees and produces Quarterly Reports of this data that are available on the DHP website. From the most recent Quarterly Report (March 31, 2017) we know that there are 816 persons who are currently licensed by the Virginia Board of Social Work (VBSW) as a Licensed Social Worker (LSW) (See Appendix B)

When a group of professionals are likely to be impacted by new legislation they usually will make public comments or have their lobbyist make known to the regulatory board their opinions on the proposed legislation. No LSW has come forward to make any public comment on the VBSW proposed legislation.

The VSCSW Legislative committee took note of this and realized that we actually knew very little about this group of social workers. Committee Chair Joe Lynch contacted Jaime Hoyle, Executive Director of the VBSW and made a Virginia Freedom of Information Act (FOIA) request for any existing documents that could answer the questions in the table below. Ms. Hoyle’s answers to the VA FOIA request are also listed in the table.

	Questions sent to Jaime Hoyle under Virginia FOIA	Answers to questions:
1	How many of the 846 LSW's are Bachelor's social workers?	<p>The Board does not track the number of LSWs that hold a bachelor’s versus master’s degree. We also do not have any information about those that are employed in non-clinical/clinical practice, exempt/non-exempt settings or how many are required to be licensed by their employer. We do not track this information either.</p>
2	How many of the 846 LSW's are Master’s social workers?	
3	How many of the LSW's are employed in "non-clinical" social work practice?	
4	How many are engaged in “clinical” social work practice?	
5	How many of the LSW’s are employed in exempt settings?	
6	How many of the LSW’s are employed in non-exempt settings?	
7	How many of the LSW's are required by their employer to have the LSW?	
8	Is a copy of the questionnaire required for LCSW license renewal available to me under VA FOIA?	
9	If yes, can you send me a copy of the questionnaire?	The questionnaire was emailed to me.
10	Were the LSW’s required to fill out a similar questionnaire when renewing the LSW license online?	No.
11	If yes, can you send me a copy of that questionnaire as well?	NA

### **PROPOSAL FOR STUDY:**

Given the lack of information on LSW’s the VSCSW Legislative Committee proposed to the VSCSW Board of Directors at the July 15, 2017 Board meeting that they authorize the Legislative committee to conduct a study to collect data from currently licensed LSW’s in order to assist the committee, the VSCSW, the GWSCSW and our lobbyist to be prepared for the 2018 Virginia General

Assembly in regard to the VBSW proposed legislation. The VSCSW LSW Study was approved at the July 15, 2017 Board meeting. The timeline for the study required that the following facts be considered:

- The 2018 Virginia General Assembly starts on January 10, 2018.
- The VBSW had two board meetings scheduled prior to the start of the General Assembly (August 11, 2017 and October 27, 2017) but the August 11, 2017 Board meeting was cancelled so there will only be one opportunity (October 27, 2017) to present the VSCSW LSW Study results to the full VBSW prior to the beginning of the General Assembly.

With these time constraints in mind the legislative committee developed the below timeline:

	<b>STEPS</b>	<b>TIMELINE</b>
<b>1</b>	VSCSW Board of Directors approves LSW study.	July 15, 2017
<b>2</b>	Purchase the VIP-NET list of LSW's (* From March 31, 2017 to June 13, 2017 an additional 30 LSW's were added to the VIP-Net list for a total of 846)	June 13, 2017- list purchased
<b>3</b>	Convert the VIP-NET list of 846 LSW's into a mail-merged Word document of mailing labels.	June 17, 2017
<b>4</b>	Develop an assessment instrument.	July 15, 2017
<b>5</b>	Use bulk mailing to send 846 LSW/s a cover letter, a questionnaire and the proposed legislation.	August 1, 2017
<b>6</b>	Establish a process for analysis of the data from the returned questionnaires.	Aug-September 2017
<b>7</b>	Conduct analysis of data on returned questionnaires.	September 2017
<b>8</b>	Present report on data to VSCSW Board of Directors	September 9, 2017
<b>7</b>	Present report of LSW study results to VBSW	October 27, 2017

(\*See Appendix B for DHP Quarterly Report on number of LSW's, and LCSW's)

#### **OUTLINE OF STUDY:**

- Included in the mailing to each LSW were:
  1. A one page questionnaire with 10 questions. The questionnaire contained 8 multiple choice type questions and two open ended response type questions.
  2. A listing of the 4 sentences to be added to the social work law by the VBSW proposed legislation (The cover letter included information with the URL to the full text of the legislation on the VBSW website)
  3. A cover letter describing the study and offering the option to complete the questionnaire online.  
(See Appendix C for copies of these three documents)
- The mailing was sent out on July 28, 2017.
- There was no "return due date" in the letter.
- Responses were collected from August 1, 2017 to September 1, 2017.
- The online version of the questionnaire was hosted by Survey Monkey which tabulated the data for those questionnaires.

- The data from the mailed returned questionnaires was added to the Survey Monkey data.
- The JMU BSW Social Work Department assisted with Content Analysis of the open ended question responses.

## **RESULTS OF LSW STUDY:**

### **SAMPLE SIZE:**

VIP NET provided 846 LSW addresses. (\*Apparently 30 more LSW's were licensed between the date of the Quarterly report – March 31, 2017 – and the date the VIP NET addresses were purchased in June 13, 2017) An anomaly occurred with the mailing that is described below.

### **ANOMALY:**

Persons licensed by the Virginia Board of Social Work are required by the VBSW regulations **18VAC140-20-100 (D)** to provide a current address to the Board:

*D. Each licensee shall furnish the board his current address of record. All notices required by law or by this chapter to be mailed by the board to any such licensee shall be validly given when mailed to the latest address of record given by the licensee. Any change in the address of record or the public address, if different from the address of record, shall be furnished to the board within 30 days of such change.*

The VIP NET address list is based upon the information the licensee provides to the DHP. The questionnaires were mailed out to the 846 LSW addresses provided by VIP NET on June 13, 2017. The mailing included a design for the USPS to return any envelope that they were unable to deliver. Of the 846 questionnaires that were mailed out 126 (15%) were returned because they were undeliverable. They were undeliverable for the following reasons:

1. No forwarding address
2. Time to forward expired
3. No such address

(\* A listing of the 126 returned addresses were provided to the VBSW but not included in this document)

So the possible sample size was reduced by 126 to 720. Of those 720 the number of returned questionnaires was 107 (15%).

## **WHERE DO LSW'S RESIDE?**

Based on the original 846 addresses provided by VIP NET:

- The majority of LSW's (670 [79%]) have a Virginia address.

<b>BASED ON THE 107 RETURNED QUESTIONNAIRES:</b>
--

- The remaining 176 LSW's reside in 33 of the other 49 states, in Washington DC and there were two with military addresses – one APO-Pacific and one APO-Europe (See Appendix D).

<b>GENDER OF LSW's (See Appendix H)</b>	<b>NUMBER</b>	<b>PERCENTAGE</b>
---	---------------	-------------------

- Fifty Five (55 [7%]) LSW's reside in the states that are contiguous to Virginia (Maryland, West Virginia, Tennessee, and Kentucky)
- Fifteen (15 [2%]) reside in Washington DC.
- Combined there are 84 LSW's that reside in contiguous jurisdictions.
- The other 92 (11%) LSW's are widely distributed across the country.
- There were some unexpected distributions of LSW's. For example there are as many LSW's in New York as there are in North Carolina.
- Of the 670 LSW's that live in Virginia 487 (73%) reside in the major urban areas of Richmond, Northern Virginia, Tidewater and Roanoke
  - ❖ See Appendix "E" for rank order listing of LSW's by jurisdiction
  - ❖ See Appendix "F" Map of distribution of LSW's
  - ❖ See Appendix "G" Map of Distribution of LSW's within Virginia

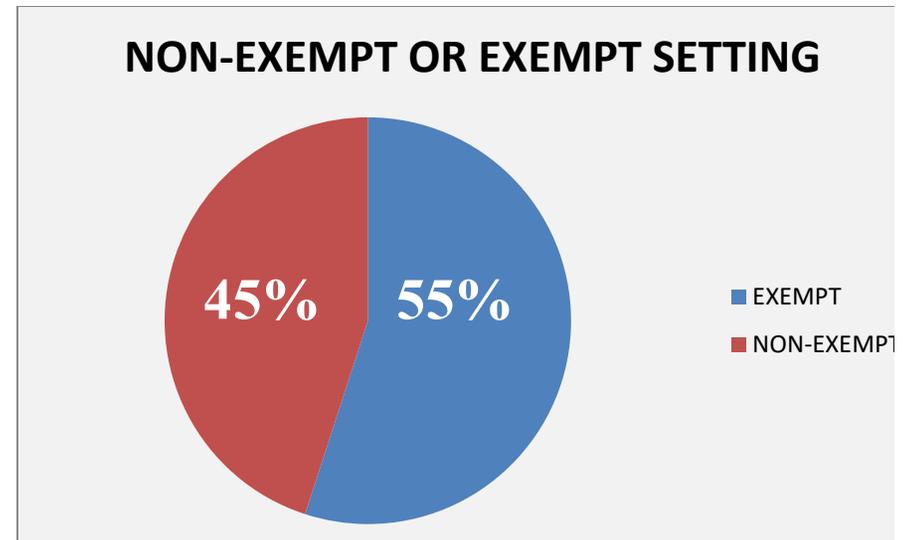
<b>FEMALES</b>	<b>98</b>	<b>92%</b>
<b>MALES</b>	<b>9</b>	<b>8%</b>

<b>DEGREE OF LICENSEE (See Appendix I)</b>	<b>NUMBER</b>	<b>PERCENTAGE</b>
<b>MSW</b>	<b>102</b>	<b>95%</b>
<b>BSW</b>	<b>5</b>	<b>5%</b>

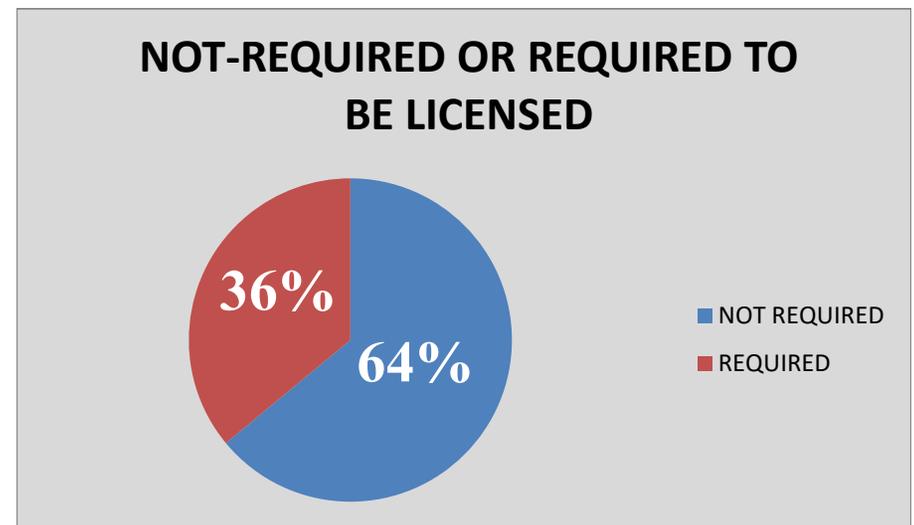
<b>NUMBER OF YEARS THE PERSON BEEN LICENSED AS AN LSW (See Appendix K)</b>	<b>NUMBER OF LSW's</b>	<b>PERCENTAGE</b>
<b>1</b>	<b>11</b>	<b>10%</b>
<b>2</b>	<b>19</b>	<b>18%</b>
<b>3</b>	<b>13</b>	<b>12%</b>
<b>4</b>	<b>10</b>	<b>9%</b>
<b>5</b>	<b>9</b>	<b>8%</b>
<b>6</b>	<b>45</b>	<b>42%</b>

<b>TYPE OF SOCIAL WORK PRACTICE (See Appendix J)</b>	<b>Number of LSW's</b>	<b>Percentage</b>
<b>Clinical</b>	<b>42</b>	<b>39%</b>
<b>Non-Clinical</b>	<b>11</b>	<b>10%</b>
<b>Mix of Clinical and Non-Clinical</b>	<b>54</b>	<b>51%</b>

<b>NON-EXEMPT OR EXEMPT PRACTICE SETTING (See Appendix)</b>	<b>NUMBER</b>	<b>PERCENTAGE</b>
<b>NON-EXEMPT</b>	<b>48</b>	<b>45%</b>
<b>EXEMPT</b>	<b>59</b>	<b>55%</b>

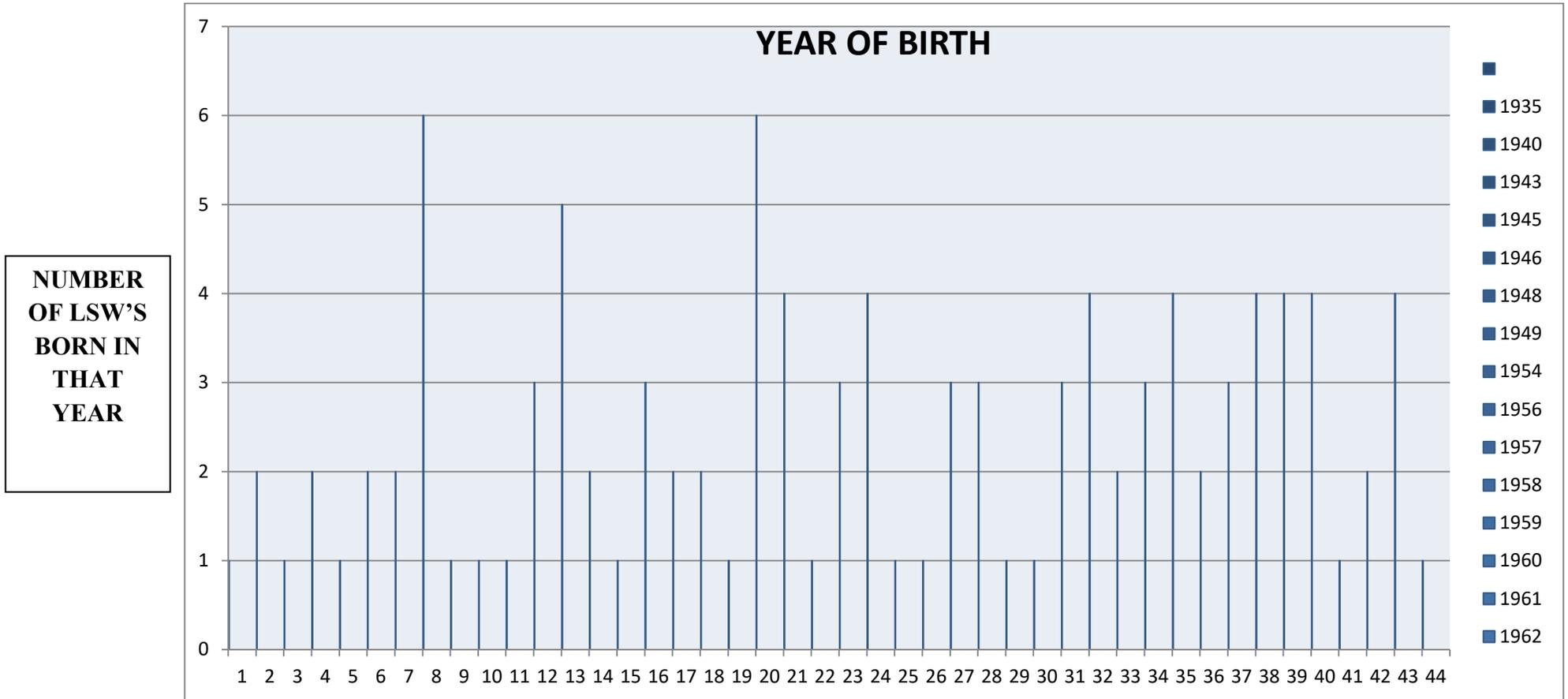


<b>ARE YOU REQUIRED TO HAVE THE LSW IN ORDER TO BE EMPLOYED IN YOUR CURRENT POSITION?</b>	<b>NUMBER</b>	<b>PERCENTAGE</b>
<b>REQUIRED</b>	<b>39</b>	<b>36%</b>
<b>NOT-REQUIRED</b>	<b>68</b>	<b>64%</b>



### AGE OF LSWs

The LSW's ranged in age from 82 to 25 years old.



**PRIOR TO THIS QUESTIONNAIRE WERE YOU AWARE OF THE VIRGINIA BOARD OF SOCIAL WORK PROPOSED LEGISLATION?**

**Question #9 and #10 (listed below) asked for an open-ended response. The answers are in Appendix “K” and Appendix “L”.**

**Questions #9**

If you have any opinions, feedback or comments to make about the Virginia Board of Social Work’s proposed legislation please enter them below.

**Question #10**

Most LSW’s have a Virginia address. Some LSW’s live in states that border Virginia and some live in non-border states. Please let us know if you are in Virginia, in a border state or in a non-border state and what you see as the advantages and disadvantages of having the LSW?

**To report the results of the answers to these two questions two tools were used to display content analysis information:**

**1. WordSift**

*WordSift* helps anyone easily sift through texts -- just cut and paste any text into *WordSift* and you can engage in a verbal quick-capture! The program helps to quickly identify important words that appear in the text. This function is widely available in various Tag Cloud programs on the web, but we have added the ability to mark and sort different lists of words important to educators. We have also integrated it with a few other functions, such as visualization of word thesaurus relationships (incorporating the amazing Visual Thesaurus® that we highly recommend in its own right) and a limited image-search feature. With just a click on any word in the Tag Cloud, the program displays instances of sentences in which that word is used in the text. <https://wordsift.org/about.html>

**2. Infographics**

An infographic is a popular form of content marketing that can help you simplify a complicated subject or turn an otherwise boring subject into a captivating experience. Ideally, an infographic should be visually engaging and contain a subject matter and data that is appealing to your target audience ...something that is truly ‘link worthy’ or ‘share worthy’.

## **ADVANTAGES AND DISADVANTAGES OF LSW**

There were many comments from the LSW's that reflected their pride in being identified as a professional social worker. The LSW's valued that their license distinguished them from others and communicated they held themselves to a higher professional standard. Some of their comments were:

*"...The advantages of having an LSW is the professionalization of the field...it informs others that I practice at a high standard of social work and am accountable to a larger social work entity...people know you are a licensed social worker..."*

(See Appendix K)



## **ANALYSIS OF RESULTS OF LSW STUDY**

### **WHAT WE LEARNED ABOUT VIRGINIA LSW's AS A GROUP?**

To the extent that the sample is representative of all LSW's in Virginia we have learned much about the characteristics of this population of social workers. The majority are female; MSW's who have had their LSW for over 6 years and range in age from 25 to 82 years old. They work about equally in "Exempt" and "Non-Exempt" settings. Only 10% practice exclusively in "non-clinical" social work practice. While 39% practice exclusively in "clinical social work" and another 51% practice "a mix of clinical and non-clinical social work." While the majority resides in Virginia or a contiguous state, Virginia LSW's are also located in 33 other states. The LSW's cite a pride in their credential. Feeling it distinguishes them from others in the work setting and underscores their professional identity as social workers and being committed to maintaining a higher standard of practice.

### **HOW DO LSW' FEEL ABOUT THE VBSW PROPOSED LEGISLATION:**

The majority of the LSW's were not aware of the proposed legislation. However upon learning of the text of the proposed legislation they made no comments in opposition to the legislation. Their comments were focused on being in favor of making a distinction between the Masters and Bachelors level practitioners. They wanted to not take another test, be grandfathered into the new LMSW and not made to be excessive fees to do so.

### **CONCLUSIONS FOR THE LEGISLATIVE PROCESS:**

The VSCSW Legislative Committee concludes that the population of Virginia LSW's will very likely be supportive of the VBSW proposed legislation as it moves through the General Assembly. Should we become aware of any negative testimony or comments purporting to represent the views of LSW's we now have data to present to legislators that documents overwhelming support from LSW's for this legislation. The VSCSW and the Northern Virginia members of the GWSCSW are now much better prepared for the upcoming General Assembly session.

## APPENDIX A

(Acquired from VBSW website on 9/3/17 <http://www.dhp.virginia.gov/social> )

### Board of Social Work

### 2018 Session of the General Assembly

### Draft Legislation

A BILL to amend the *Code of Virginia* by amending sections §§ 54.1-3700 and 54.1-3705, by adding authority for the Board of Social Work to license baccalaureate social workers and master's social workers, and to register persons obtaining supervised experience for licensure as a clinical social worker.

#### **Be it enacted by the General Assembly of Virginia:**

#### **1. That §§ 54.1-3700 and 54.1-3705 of the *Code of Virginia* be amended and reenacted as follows:**

#### **§ 54.1-3700. Definitions.**

As used in this chapter, unless the context requires a different meaning:

"Administration" means the process of attaining the objectives of an organization through a system of coordinated and cooperative efforts to make social service programs effective instruments for the amelioration of social conditions and for the solution of social problems.

Baccalaureate social worker means a person, engaged in the practice of social work, who practices under the supervision of a master's social worker within an entity not otherwise exempted by provisions of § 54.1-3701 and who is engaged in a basic generalist practice to include casework management and supportive services and consultation and education.

“Board” means the Board of Social Work.

“Casework” means both direct treatment, with an individual or several individuals, and intervention in the situation on the client’s behalf with the objectives of meeting the client’s needs, helping the client deal with the problem with which he is confronted, strengthening the client’s capacity to function productively, lessening his distress, and enhancing his opportunities and capacities for fulfillment.

“Casework management and supportive services” means assessment of presenting problems and perceived needs, referral services, policy interpretation, data gathering, planning, advocacy, and coordination of services.

“Clinical social worker” means a social worker who, by education and experience, is professionally qualified at the autonomous practice level to provide direct diagnostic, preventive and treatment services where functioning is threatened or affected by social and psychological stress or health impairment.

“Consultation and education” means program consultation in social work to agencies, organizations, or community groups; academic programs and other training such as staff development activities, seminars, and workshops using social work principles and theories of social work education.

“Group work” means helping people, in the realization of their potential for social functioning, through group experiences in which the members are involved with common concerns and in which there is agreement about the group’s purpose, function, and structure.

Master’s social worker means a person, engaged in the practice of social work, who is employed by an entity not otherwise exempted by provisions of § 54.1-3701 and who is engaged in a non-clinical, generalist scope of practice of social work to include staff supervision and management.

"Planning and community organization" means helping organizations and communities analyze social problems and human needs; planning to assist organizations and communities in organizing for general community development; and improving social conditions through the application of social planning, resource development, advocacy, and social policy formulation.

"Practice of social work" means rendering or offering to render to individuals, families, groups, organizations, governmental units, or the general public service which is guided by special knowledge of social resources, social systems, human capabilities, and the part conscious and unconscious motivation play in determining behavior. Any person regularly employed by a licensed hospital or nursing home who offers or renders such services in connection with his employment in accordance with patient care policies or plans for social services adopted pursuant to applicable regulations when such services do not include group, marital or family therapy, psychosocial

treatment or other measures to modify human behavior involving child abuse, newborn intensive care, emotional disorders or similar issues, shall not be deemed to be engaged in the "practice of social work." Subject to the foregoing, the disciplined application of social work values, principles and methods includes, but is not restricted to, casework management and supportive services, casework, group work, planning and community organization, administration, consultation and education, and research.

"Research" means the application of systematic procedures for the purpose of developing, modifying, and expanding knowledge of social work practice which can be communicated and verified.

"Social worker" means a person trained to provide service and action to effect changes in human behavior, emotional responses, and the social conditions by the application of the values, principles, methods, and procedures of the profession of social work.

#### **§ 54.1-3705. Specific powers and duties of the Board.**

In addition to the powers granted in § 54.1-2400, the Board shall have the following specific powers and duties:

1. To cooperate with and maintain a close liaison with other professional boards and the community to ensure that regulatory systems stay abreast of community and professional needs.
2. To conduct inspections to ensure that licensees conduct their practices in a competent manner and in conformance with the relevant regulations.
3. To designate specialties within the profession.
4. Expired.
5. To license baccalaureate social workers, master's social workers, and clinical social workers to practice consistent with the definitions specified in § 54.1-3700 and regulations promulgated by the Board.
6. To register persons for the supervised practice of social work as required for licensure as a clinical social worker.

## APPENDIX B



### COUNT OF CURRENT LICENSES \*

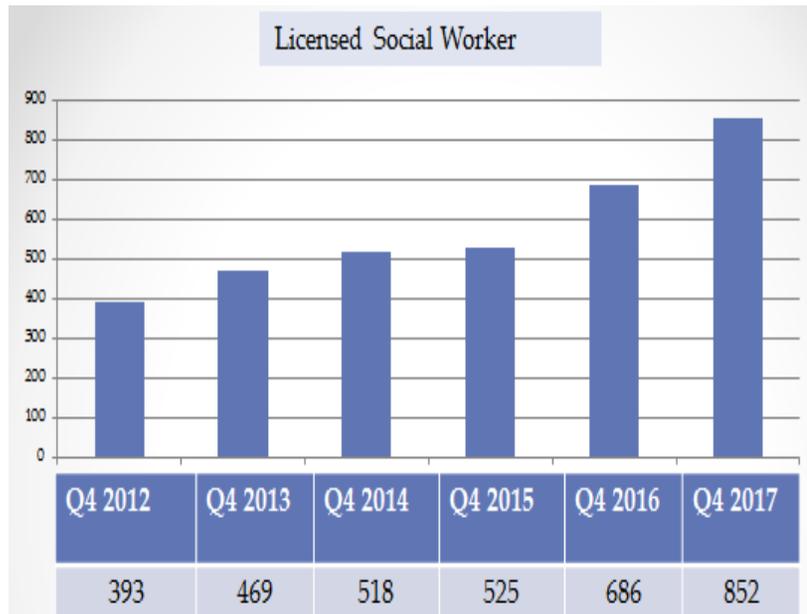
FISCAL YEAR 2017, QUARTER ENDING MARCH 31st, 2017

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

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

Board	Occupation	Q4 2014	Q1 2015	Q2 2015	Q3 2015	Q4 2015	Q1 2016	Q2 2016	Q3 2016	Q4 2016	Q1 2017	Q2 2017	CURRENT Q3 2017
<b>Social Work</b>	Associate Social Worker	1	1	1	1	0	1	1	1	1	1	1	1
	Licensed Clinical Social Worker	5,814	5,903	5,986	6,104	5,781	5,948	6,060	6,170	6,358	6,458	6,558	6,684
	Licensed Social Worker	518	560	586	619	525	583	617	645	686	739	778	816
	Registered Social Worker	17	17	17	17	0	12	12	12	12	12	12	12
	Registration of Supervision										1,690	1,795	1,827
<b>Total</b>		<b>6,350</b>	<b>6,481</b>	<b>6,590</b>	<b>6,741</b>	<b>6,306</b>	<b>6,544</b>	<b>6,690</b>	<b>6,828</b>	<b>7,057</b>	<b>8,900</b>	<b>9,144</b>	<b>9,340</b>

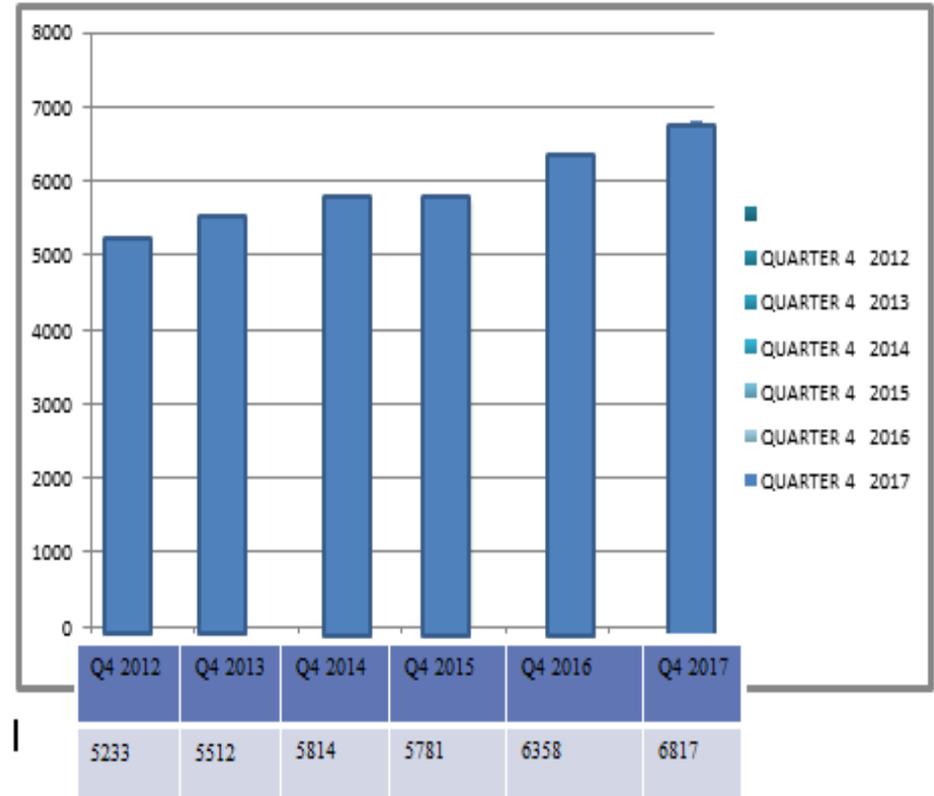
## APPENDIX B (continued)



**117% INCREASE FROM 2012 TO 2017**

2012-2013	2013-2014	2014-2015	2015-2016	2016-2017
19%	10%	1%	31%	24%

### Licensed Clinical Social Worker



**30% INCREASE FROM 2012 TO 2017**

# APPENDIX C



*Virginia Society for Clinical Social Work  
10106-C Palace Way  
Henrico, Virginia 23238*

**July 17, 2017**

Dear Virginia LSW:

We are writing to you to ask for your participation in a brief questionnaire about Virginia Licensed Social Workers. The Virginia Board of Social Work (VBSW) has been in discussion for a few years about Mid-Level licensure and public comments have been made at several meetings on this topic. At the VBSW Board meeting on May 11, 2017 the Board voted to approve a Legislative Proposal for Mid-Level Licensure. There are a few more steps in the process and then this proposed legislation is likely to become a bill in the 2018 General Assembly. The group that is expected to be impacted most by this legislation will be persons who now hold the LSW and persons who would seek to become what is now the LSW license. The VBSW is considering dividing the LSW license into two licenses:

1. LBSW - Licensed Bachelor's Social Worker
2. LMSW- Licensed Master's Social Worker

The VBSW has discussed requiring that the Bachelor's Social Worker take the ASWB Bachelor's level exam and the Master's Social Worker take the ASWB Master's level exam. Usually when a group of professionals are likely to be impacted by proposed legislation the regulatory board receives public comments from that group. There has been no comment to date from persons holding the LSW license. The Department of Health Professions most recent quarterly report finds that there are 846 LSW's. Of those 846 we found, that for the address of record with the Department, 670 listed a Virginia address, 84 listed an address in areas contiguous to Virginia and 92 listed an address in other states. A request to the VBSW under the Virginia Freedom of Information Act for some more detailed information about LSW's found that the Board collects very little information about LSW's. We would like to learn some general information about Virginia LSW's and some specific information about your opinions regarding the proposed legislation. We have enclosed:

- A copy of the four new sentences that appear in the proposed legislation. The VBSW website has the proposed legislation at <http://www.dhp.virginia.gov/social/> (On the home page under Announcements - click on "draft legislative proposal").
- A brief questionnaire that we would like you to fill out and return to us. If you would like to fill out the questionnaire online you can go to the below URL and fill it out online:

[http://www.vscsw.org/lsw\\_questionnaire/](http://www.vscsw.org/lsw_questionnaire/)

Thank you for your assistance in helping us know more about LSW's in Virginia. If you have any questions please feel free to email or call Joseph G. Lynch LCSW, VSCSW Legislative Vice President (contact information listed below)

Joseph G. Lynch LCSW

1) Year of Birth:							
2) Sex:		<b>MALE</b>	<input type="checkbox"/>	<b>FEMALE</b>	<input type="checkbox"/>		
3) Which degree had you obtained when you received your LSW?		<b>BSW</b>	<input type="checkbox"/>	<b>MSW</b>	<input type="checkbox"/>		
4) How many years have you had your LSW?		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6+</b>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5) Would you describe your work as primarily clinical or non-clinical or a mix of both Clinical and Non-Clinical Clinical = provide direct services to clients Non-Clinical = provide staff supervision and management		<b>CLINICAL</b>					<input type="checkbox"/>
		<b>NON-CLINICAL</b>					<input type="checkbox"/>
		<b>MIX OF BOTH CLINICAL AND NON-CLINICAL</b>					<input type="checkbox"/>
In Virginia persons employed in certain work settings are exempt from the requirements of licensure. For example:							
1. Persons who render services but do not charge any fee.				2. Social work students in a field experience.			
3. Rabbis, priests, ministers or clergymen in the performance of their duties.				4. Persons employed by private business as personnel managers.			
5. Persons employed as salaried employees of the federal government, the Commonwealth, a locality, any agency funded by any such governmental entity, or a private, nonprofit organization.							
For a full explanation of Exemption see: <a href="http://law.lis.virginia.gov/vacode/title54.1/chapter37/section54.1-3701/">http://law.lis.virginia.gov/vacode/title54.1/chapter37/section54.1-3701/</a>							
6) Using the above understanding of exempt settings, would you describe your position as being in an Exempt setting or a Non-Exempt setting?		<b>EXEMPT</b>	<input type="checkbox"/>	<b>NON-EXEMPT</b>	<input type="checkbox"/>		
7) Are you required to have the LSW in order to be employed in your current position?		<b>YES</b>	<input type="checkbox"/>	<b>NO</b>	<input type="checkbox"/>		
8) Prior to this questionnaire were you aware of the Virginia Board of Social Work proposed legislation?		<b>YES</b>	<input type="checkbox"/>	<b>NO</b>	<input type="checkbox"/>		
9) If you have any opinions, feedback or comments to make about the Virginia Board of Social Work's proposed legislation please enter them below.							
10) Most LSW's have a Virginia address. Some LSW's live in states that border Virginia and some live in non-border states. Please let us know if you are in Virginia, in a border state or in a non-border state and what you see as the advantages and disadvantages of having the LSW?							

**VIRGINIA BOARD OF SOCIAL WORK**

**PROPOSED LEGISLATION FOR**

**2018 VIRGINIA GENERAL ASSEMBLY**

**ONLY THE NEW LANGUAGE TO BE ADDED**

**TO THE SOCIAL WORK LAW IS BELOW AND IS UNDERLINED**

**Be it enacted by the General Assembly of Virginia:**

**1. That §§ 54.1-3700 and 54.1-3705 of the *Code of Virginia* be amended and reenacted as follows:**

**§ 54.1-3700. Definitions.**

As used in this chapter, unless the context requires a different meaning:

Baccalaureate social worker means a person, engaged in the practice of social work, who practices under the supervision of a master's social worker within an entity not otherwise exempted by provisions of § 54.1-3701 and who is engaged in a basic generalist practice to include casework management and supportive services and consultation and education.

Master's social worker means a person, engaged in the practice of social work, who is employed by an entity not otherwise exempted by provisions of § 54.1-3701 and who is engaged in a non-clinical, generalist scope of practice of social work to include staff supervision and management.

**§ 54.1-3705. Specific powers and duties of the Board.**

In addition to the powers granted in § 54.1-2400, the Board shall have the following specific powers and duties:

5. To license baccalaureate social workers, master's social workers, and clinical social workers to practice consistent with the definitions specified in § 54.1-3700 and regulations promulgated by the Board.

6. To register persons for the supervised practice of social work as required for licensure as a clinical social worker.

# APPENDIX D

## GEOGRAPHICAL DISTRUBUTION OF LSW's

STATE ABBREVIATION	STATE	NUMBER OF VIRGINIA LSW'S IN THAT STATE	STATE ABBREVIATION	STATE	NUMBER OF VIRGINIA LSW'S IN THAT STATE
AK	Alaska	1	NC	North Carolina	15
AL	Alabama	3	NH	New Hampshire	1
AZ	Arizona	1	NJ	New Jersey	6
CA	California	7	NM	New Mexico	1
CO	Colorado	2	NV	Nevada	2
DC	Washington DC	15	NY	New York	15
DE	Delaware	3	OH	Ohio	4
FL	Florida	4	OK	Oklahoma	2
GA	Georgia	5	PA	Pennsylvania	7
IA	Iowa	2	SC	South Carolina	6
KS	Kansas	1	TN	Tennessee	3
KY	Kentucky	4	TX	Texas	5
LA	Louisiana	3	VA	Virginia	670
MA	Massachusetts	1	WA	Washington	2
MD	Maryland	36	WI	Wisconsin	1
MN	Minnesota	1	WV	West Virginia	11
MO	Missouri	1		American Post Office- Europe, Middle East, Africa and Canada	1
MS	Mississippi	3	AE		
			AP	American Post Office- Pacific	1
				<b>TOTAL LSW's</b>	<b>846</b>

# APPENDIX E

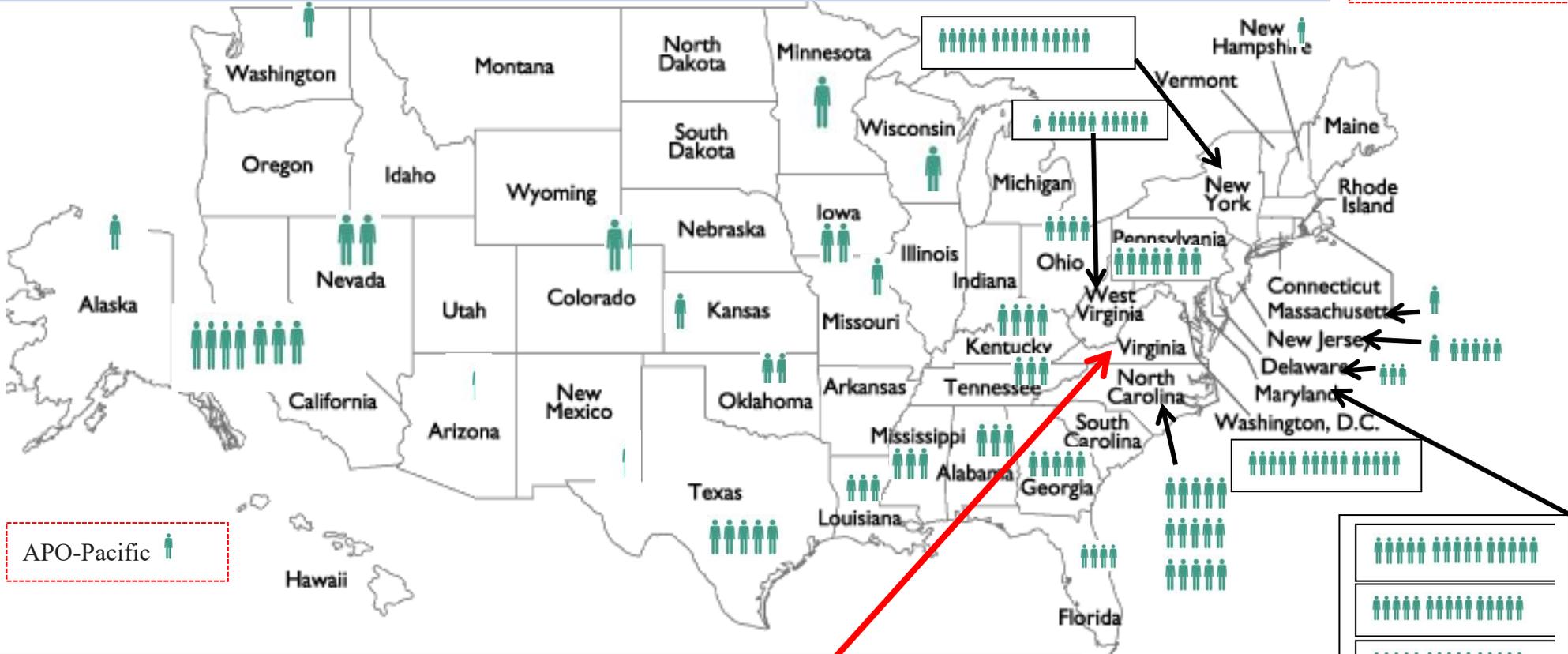
69

## GEOGRAPHICAL DISTRIBUTION OF LSW'S RANK ORDERED JUNE 2017

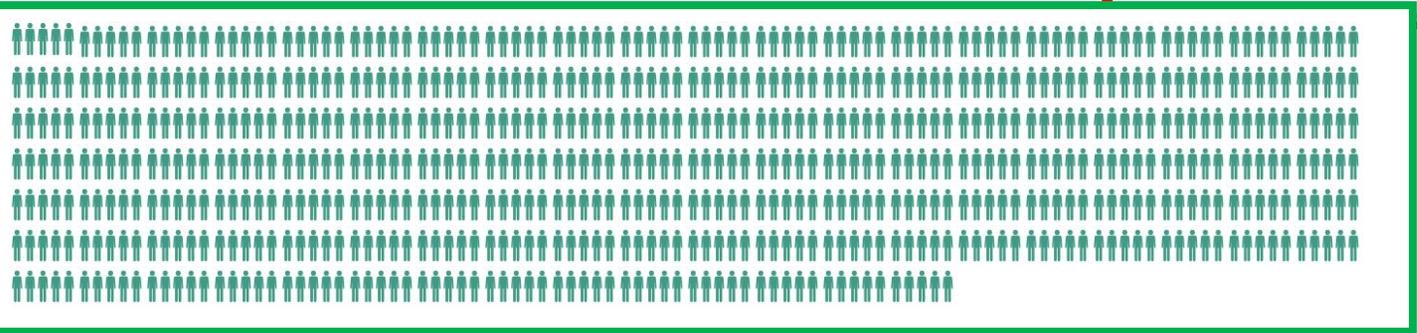
STATE	LSW's	%	STATE	LSW's	%
Virginia	670	79.2	Kansas	1	0.12
Maryland	36	4.3	Massachusetts	1	0.12
New York	15	1.77	Minnesota	1	0.12
North Carolina	15	1.77	Missouri	1	0.12
Washington DC	15	1.77	New Hampshire	1	0.12
West Virginia	11	1.3	New Mexico	1	0.12
California	7	0.83	Wisconsin	1	0.12
Pennsylvania	7	0.83	APO-EUROPE	1	0.12
Texas	5	0.83	APO- PACIFIC	1	0.12
New Jersey	6	0.7	Arkansas	0	0
South Carolina	6	0.7	Connecticut	0	0
Georgia	5	0.59	Hawaii	0	0
Florida	4	0.47	Idaho	0	0
Kentucky	4	0.47	Illinois	0	0
Ohio	4	0.47	Indiana	0	0
Alabama	3	0.35	Maine	0	0
Delaware	3	0.35	Michigan	0	0
Louisiana	3	0.35	Montana	0	0
Mississippi	3	0.35	Nebraska	0	0
Tennessee	3	0.35	North Dakota	0	0
Colorado	2	0.24	Oklahoma	2	0
Iowa	2	0.24	Oregon	0	0
Nevada	2	0.24	Rhode Island	0	0
Washington	2	0.24	South Dakota	0	0
Alaska	1	0.12	Utah	0	0
Arizona	1	0.12	Vermont	0	0
			Wyoming	0	0
			<b>TOTAL</b>	<b>846</b>	

MAP OF USA WITH DISTRIBUTION OF VIRGINIA LSW'S

APO-Europe 



APO-Pacific 



VIRGINIA LSW'S  
670= 79%

89%

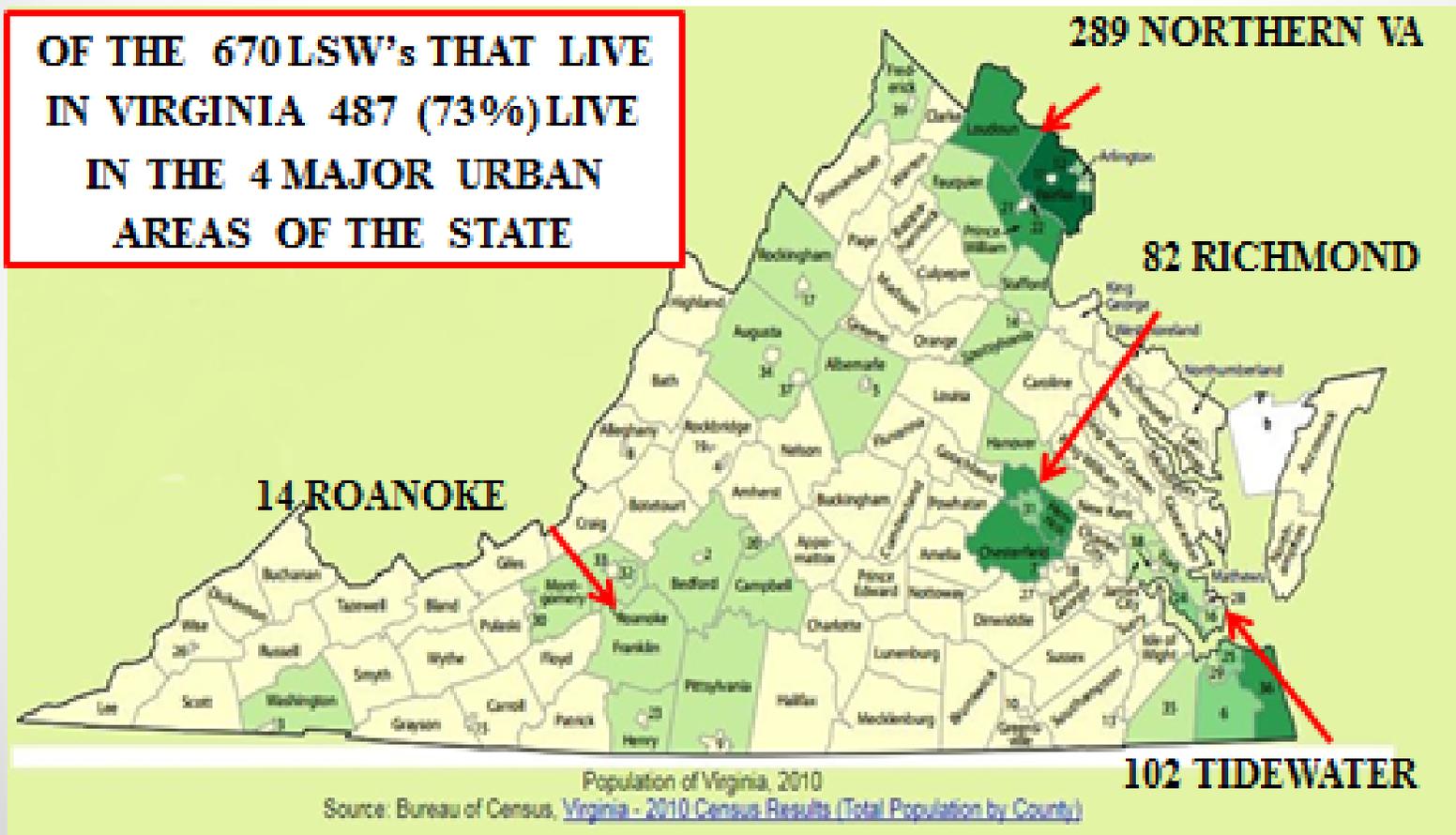
CONTIGUOUS TO VA = 10%

CONTIGUOUS STATES AND DC		
STATE	# LSW'S	%
Kentucky	4	0.47
Maryland	36	4.26
North Carolina	15	1.77
Tennessee	3	0.35
West Virginia	11	1.30
Washington DC	15	1.77
<b>TOTAL</b>	<b>84</b>	<b>10%</b>

## APPENDIX G

# DISTRIBUTION OF THE 670 LSW's THAT LIST A VIRGINIA ADDRESS

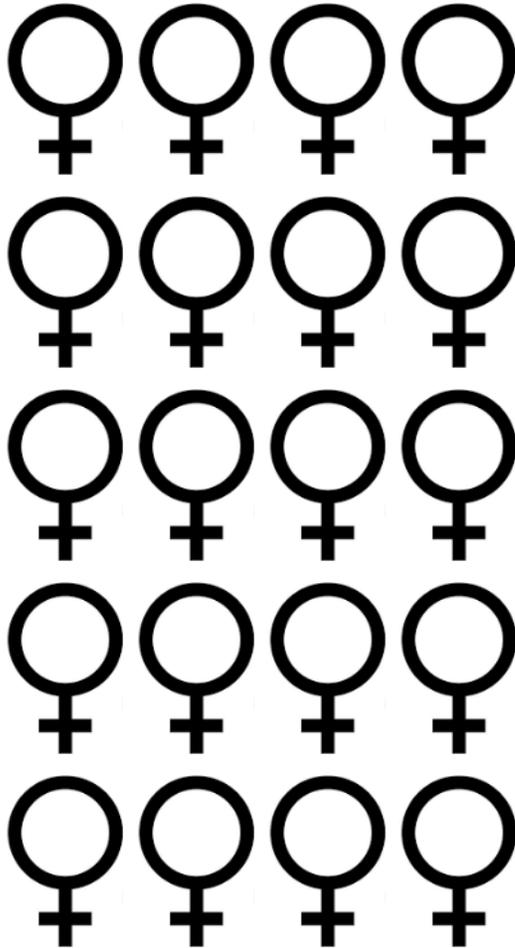
OF THE 670 LSW's THAT LIVE IN VIRGINIA 487 (73%) LIVE IN THE 4 MAJOR URBAN AREAS OF THE STATE



**APPENDIX H**

**GENDER OF LSW's**

**90% FEMALE**



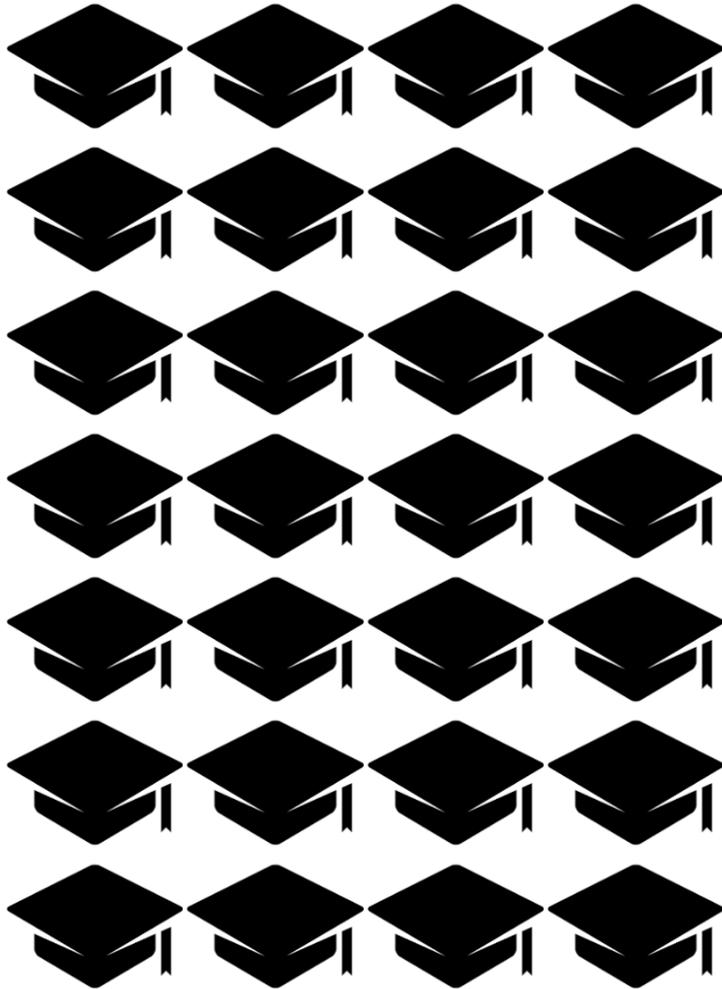
**10% MALE**



# APPENDIX I

## DISTRIBUTION OF MSW'S AND BSW'S.

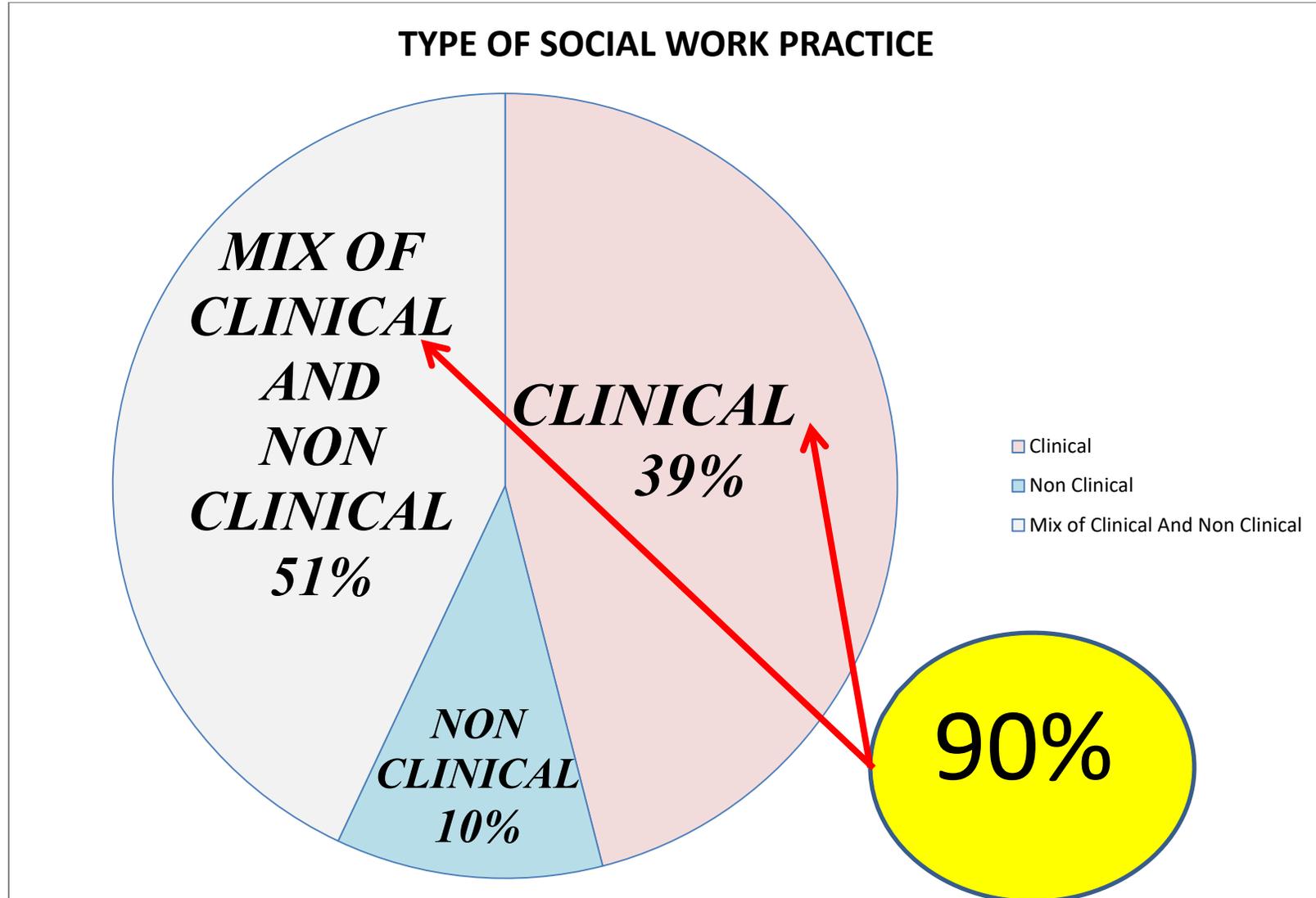
**97% MSW**



**3% BSW**



## APPENDIX J



## APPENDIX K

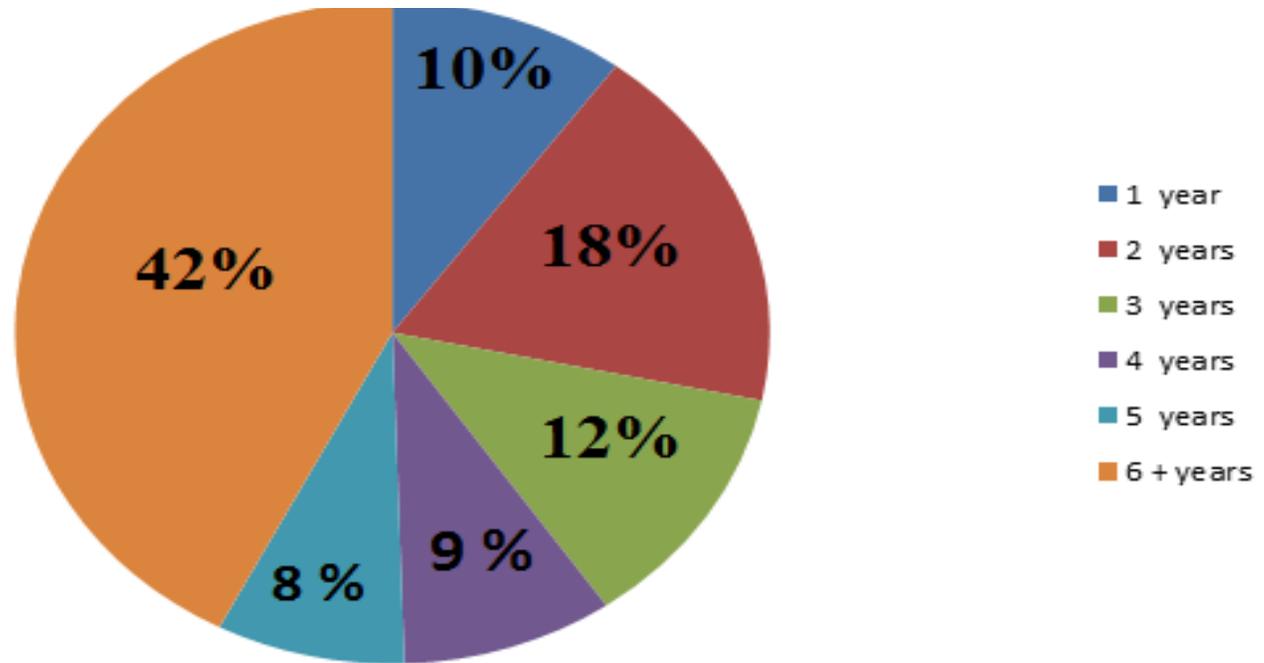
### ADVANTAGES OF LSW

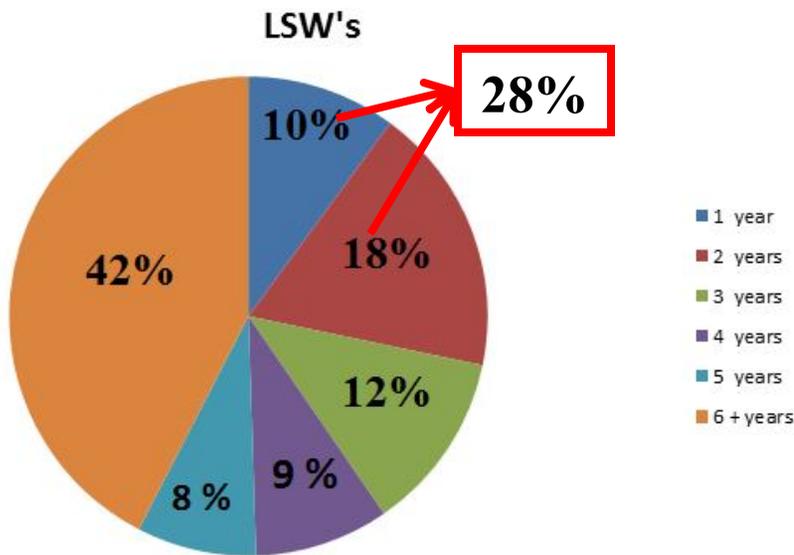
Several LSW's noted one advantage is that it demonstrates commitment to professional social work practice and distinguishes the LSW from others.



# APPENDIX L

## NUMBER OF YEARS LICENSED AS AN LSW



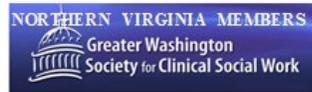


The DHP Quarterly Report ending 06/30/17 notes that there are 852 LSW's. From 2015 to 2017 there were 327 new LSW's. That group of LSW's constitutes 38% of the 852 LSW's. In the returned questionnaires there were only 28% from that group of LSW's but 42% from LSW's who had been licensed for over 6 years. So some caution should be used in the results of the study as the 2 year or less licensed LSW's are somewhat underrepresented.

***For questions or further information  
about this study please contact:  
Virginia Society for Clinical Social Work  
Joseph G. Lynch LCSW  
Legislative Vice President  
34 Emery Street  
Harrisonburg, Virginia 22801  
[lynchj@newmanavenue.com](mailto:lynchj@newmanavenue.com)  
(540) 421-4345***



AND



*Virginia Society for Clinical Social Work*  
*5537 Solaris Drive*  
*Chesterfield Virginia 23832*

**July 22 and 23, 2021**

**PUBLIC COMMENT TO THE VBSW  
 (DOCUMENTS)**

The VSCSW and the Northern Virginia members of the GWSCSW express thanks to the VBSW for the opportunity to make public comment regarding three concerns:

- 1 LMSW definition in the Code- The need to change the definition of “Masters Social Worker” in the Code of Virginia
- 2 LMSW as requirement for LCSW supervisees- The need to bring Virginia into alignment with the majority of US jurisdictions that require social workers under supervision toward the ASWB clinical exam to be licensed while under such supervision.
- 3 Interconnectedness Between Unlicensed Social Workers, LBSW & LMSW, the QMHP and The Licensed Resident In Counseling

**1. LMSW DEFINITION IN THE CODE- THE NEED TO CHANGE THE DEFINITION OF “MASTERS SOCIAL WORKER” IN THE CODE OF VIRGINIA**

**Virginia Transition From LSW To LBSW AND LMSW**

At the May 11, 2017 Board meeting of The Virginia Board of Social Work (VBSW) passed a motion to accept proposed legislation recommended by the Regulatory committee. The proposed legislation would add 4 sentences to *Chapter 37 of Title 54.1 of the Code of Virginia; Social Work*. The 4 sentences are:

***§ 54.1-3700. Definitions.***

***As used in this chapter, unless the context requires a different meaning:***

*Baccalaureate social worker means a person, engaged in the practice of social work, who practices under the supervision of a master’s social worker within an entity not otherwise exempted by provisions of § 54.1-3701 and who is engaged in a basic generalist practice to include casework management and supportive services and consultation and education.*

*Master’s social worker means a person, engaged in the practice of social work, who is employed by an entity not otherwise exempted by provisions of § 54.1-3701 and who is engaged in a non-clinical, generalist scope of practice of social work to include staff supervision and management.*

**§ 54.1-3705. Specific powers and duties of the Board.**

*In addition to the powers granted in § 54.1-2400, the Board shall have the following specific powers and duties:*

5. *To license baccalaureate social workers, master’s social workers, and clinical social workers to practice consistent with the definitions specified in § 54.1-3700 and regulations promulgated by the Board.*

6. To register persons for the supervised practice of social work as required for licensure as a clinical social worker.

**VSCSW Conducts LSW Study:**

In 2017 The VSCSW conducted a study sending surveys to the 846 LSW’s licensed in Virginia at that time to ascertain characteristics of this population and their opinions on the proposed legislation to convert the LSW into the LMSW and LBSW. Of the 846 LSW’s mailed the questionnaire 126 were undeliverable and 107 were completed and returned.

**RESULTS OF STUDY:**

- The overwhelming majority (97%) of person’s who returned the survey held an MSW.
  - Most held their LSW for over 6 years.
  - They work about equally in “Exempt” and” Non-Exempt” settings.
  - Only 10% practice exclusively in “non-clinical” social work practice.
  - 39% practiced exclusively in “clinical social work.”
  - 51% practice “a mix of clinical and non-clinical social work.”
  - 90% practice clinical social work either exclusively or with a mix of non-clinical practice
- (See Appendix “A”, VSCSW Study of LSW’s, October 2017, Joseph G. Lynch LCSW)

**COMMENT:**

Because Virginia allows the Behavioral Science Professionals to engage in unlicensed practice in “Exempt Settings” under § 54.1-3701. *Exemption from requirements of licensure* it creates the situation where an MSW graduate from a CSWE accredited program with a clinical concentration has the choice upon graduation to pursue the practice of clinical social work in the exempt setting or in the private independent practice setting. The definition of “Master’s Social Worker” in the new Code section may have been an attempt to protect the LCSW license. The VBSW may have intended that there not be a “back door” to clinical social work practice without acquiring the LCSW.

The VSCSW encourages the VBSW to seek to amend § 54.1-3700. *Definitions, Master’s Social Worker* to read “clinical” instead of “non clinical” in order to be consistent with the reality caused by the Virginia Exemption Statute that allows clinical social work practice without acquiring the LCSW license. The data from the VSCSW study of LSW’s also supports amending the definition to be consistent with the reality of clinical social work practice by LMSW’s.

It should be noted that the LMSW is not a “back door” to practice without a the LCSW. The definition of “Clinical social worker” in *Chapter 37 of § 54.1-3700. Definitions* “... means a social worker who, by education and experience, is professionally qualified **at the autonomous practice level** ...”. Furthermore the VBSW regulations state explicitly that the “...**LMSW may practice in exempt practice settings**...” and that “...**Only licensed clinical social workers may practice at the autonomous level**...” (See below).

**18VAC140-20-37. Licensure; general.**

LBSWs and LMSWs may practice in exempt practice settings under appropriate supervision. In accordance with § 54.1-3700 of the Code of Virginia, an LBSW shall engage in the practice of social work under the supervision of a master's social worker. Only licensed clinical social workers may practice at the autonomous level.

**2. LMSW AS REQUIREMENT FOR LCSW SUPERVISEES - THE NEED TO BRING VIRGINIA INTO ALIGNMENT WITH THE MAJORITY OF US JURISDICTIONS THAT REQUIRE SOCIAL WORKERS UNDER SUPERVISION TOWARD THE ASWB CLINICAL EXAM TO BE LICENSED WHILE UNDER SUCH SUPERVISION.**

**ASWB Information:**

The Association of Social Work Boards website data base allows the user to generate reports with specific variables selected. The VSCSW selected several reports and then put together data that provided a report that included information on 50 US states and Washington DC that have a license that requires the clinical exam and answers the question do they require licensure while under supervision toward that license. In Appendix “B” the following reports are included:

1. ASWB report -all jurisdictions- supervision- *License Required During Supervision if Different?*
2. ASWB report- US states and DC that require license during supervision.
3. ASWB Compare License Information Report- Exam requirements- US states and DC
4. Combined report of all US states and DC, exam required is Clinical, and License Required During Supervision.

The combined report shows that of the 50 US states plus DC that require the clinical exam to acquire the license 39 **(76%) do require that the supervisee be licensed during** supervision and 12 (24%) do not require that the supervisee be licensed during supervision.

**COMMENTS:**

When 76% of US jurisdictions require those under supervision toward the clinical level of licensure to have a license and Virginia is one of the 12 jurisdictions that does not have this requirement then we decrease the portability of licensure.

This is particularly significant as the 6 jurisdictions contiguous to Virginia; Kentucky, Maryland, North Carolina, Tennessee, Washington DC, and West Virginia **ALL require** the supervised MSW seeking licensure toward the ASWB Clinical Exam license to be licensed while under that supervision.

**Council Of State Governments:**

The Council of State Governments recently announced the below invitation to a meeting to discuss social work licensure and mobility:

*In collaboration with the Department of Defense, The Council of State Governments (CSG) is working with ASWB and other organizations representing social work to develop an interstate compact for licensure portability. Recognizing both the importance and complexity of social work licensure, CSG has gathered a team of leaders and experts from our nation's top professional organizations to discuss the background and importance of this project.*

This meeting highlights the need for Virginia to be aware and involved in the process of enhancing social work licensure portability across state lines. The COVID-19 pandemic has also increased our need to focus on licensure portability. Virginia has a workforce need for LCSW's. The Virginia DHP *Healthcare Workforce Data Center Report LCSW 2020* notes that 26% of the current LCSW workforce plans to retire within the next 10 years.

Each branch of military service has at least one base located in Virginia. There are a total of 27 military bases located in Virginia. Spouses of those serving in the military often seek employment in Virginia. In the May 20, 2021 presentation a LCSW military spouse currently in Hawaii but planning to move to Virginia noted that in the last 7 years she needed to acquire a license in 6 different US states in order to gain employment. This places an undue burden on military spouses who are LCSW's and want to work in Virginia. Enhancing the portability of social work licensure in Virginia would enhance the ability to meet the needs of Virginia's social work workforce and allow military spouses better access to employment opportunities in Virginia.

**COMMENTS:**

The VSCSW and the GWSCSW express support for the supervisee in social work pursuing the LCSW license be licensed as an LMSW while under supervision. This change:

- Brings Virginia into alignment with 76% of US jurisdictions that offer a license which requires the ASWB clinical exam.
- Enhances the employment opportunities for spouses of military personnel stationed at one of the 27 military bases located in Virginia.
- Enhances the portability of social work licensure for persons moving into Virginia to meet the social work Workforce needs.

- This requirement is not unduly burdensome to social workers and actually makes them more able to compete in the marketplace of employment that now includes QMHP's and Licensed Resident in Counseling who are now required to acquire a license while under supervision.

### **3. INTERCONNECTEDNESS BETWEEN UNLICENSED SOCIAL WORKERS, LBSW & LMSW, QMHP AND THE LICENSED RESIDENT IN COUNSELING**

The interconnectedness of these practitioners is a legitimate concern of the VBSW in terms of addressing the components that are of a regulatory or legal nature. As the QMHP transitioned from the DBSDS to the DHP-Board of Counseling actions were taken that disenfranchised social workers from being able to earn an income and appear to have violated the US and Virginia Constitution by violating the property rights of those social workers. Also it appears that sections of § 54.1-100. *Regulations of professions and occupations* may have been violated.

The previous DBHDS definition of QMHP specifically named “social worker”:

#### **12VAC35-105-20. Definitions.**

The following words and terms when used in this chapter shall have the following meanings unless the context clearly indicates otherwise:

"Qualified Mental Health Professional-Adult (QMHP-A)" means a person in the human services field who is trained and experienced in providing psychiatric or mental health services to individuals who have a mental illness; including (i) a doctor of medicine or osteopathy licensed in Virginia; (ii) a doctor of medicine or osteopathy, specializing in psychiatry and licensed in Virginia; (iii) an individual with a master's degree in psychology from an accredited college or university with at least one year of clinical experience; (iv) a social worker: an individual with at least a bachelor's degree in human services or related field (social work, psychology, psychiatric rehabilitation, sociology, counseling, vocational rehabilitation, human services counseling or other degree deemed equivalent to those described) from an accredited college and with at least one year of clinical experience providing direct services to individuals with a diagnosis of mental illness; (v) a person with at least a bachelor's degree from an accredited college in an unrelated field that includes at least 15 semester credits (or equivalent) in a human services field and who has at least three years of clinical experience; (vi) a Certified Psychiatric Rehabilitation Provider (CPRP) registered with the United States Psychiatric Rehabilitation Association (USPRA); (vii) a registered nurse licensed in Virginia with at least one year of clinical experience; or (viii) any other licensed mental health professional.

In the process of transferring the primary responsibility for registration of the QMHP to the Board of Counseling the definition of QMHP eliminated the specific naming of “social worker” (See definitions below).

"Qualified mental health professional" or "QMHP" includes qualified mental health professionals-adult and qualified mental health professionals-child.

"Qualified mental health professional-adult" or "QMHP-A" means a qualified mental health professional who provides collaborative mental health services for adults. A qualified mental health professional-adult shall provide such services as an employee or independent contractor of the Department of Behavioral Health and Developmental Services or the Department of Corrections, or as a provider licensed by the Department of Behavioral Health and Developmental Services.

"Qualified mental health professional-child" or "QMHP-C" means a person who by education and experience is professionally qualified and registered by the board to provide collaborative mental health services for children and adolescents up to 22 years of age. A qualified mental health professional-child shall provide such services as an employee or independent contractor of the Department of Behavioral Health and Developmental Services or the Department of Corrections, or as a provider licensed by the Department of Behavioral Health and Developmental Services.

*Regulations Governing the Registration of Qualified Mental Health Professionals, Virginia Board of Counseling, Title of Regulations: 18 VAC 115-80-10 et seq., Statutory Authority: §§ 54.1-2400 and Chapter 35 of Title 54.1 of the Code of Virginia, Revised Date: October 29, 2020*

Social Workers who hold the LBSW or the LMSW license have met the criteria for the highest level of professional regulation “*Licensure*” and should not be required to acquire the lower level of regulation of “*Registration*” to deliver services which are within their scope of practice under their license. The Board of Counseling actions to eliminate specific naming of social worker, licensed or not licensed in conjunction with the DMAS requirement that specifically requires the title “QMHP” for billing purposes have infringed on the property rights guaranteed by the US and Virginia Constitutions and appear to have violated § 54.1-100. *Regulations of professions and occupations* (See below)

Code of Virginia

Title 54.1. Professions and Occupations Chapter 1. General

Provisions

§ 54.1-100. Regulations of professions and occupations

The right of every person to engage in any lawful profession, trade, or occupation of his choice is clearly protected by both the Constitution of the United States and the Constitution of the Commonwealth of Virginia. The Commonwealth cannot abridge such rights except as a reasonable exercise of its police powers when (i) it is clearly found that such abridgment is necessary for the protection or preservation of the health, safety, and welfare of the public and (ii) any such abridgment is no greater than necessary to protect or preserve the public health, safety, and welfare. No regulation shall be imposed upon any profession or occupation except for the exclusive purpose of protecting the public interest when:

1. The unregulated practice of the profession or occupation can harm or endanger the health, safety or welfare of the public, and the potential for harm is recognizable and not remote or dependent upon tenuous argument;
2. The practice of the profession or occupation has inherent qualities peculiar to it that distinguish it from ordinary work and labor;
3. The practice of the profession or occupation requires specialized skill or training and the public needs, and will benefit by, assurances of initial and continuing professional and occupational ability; and
4. The public is not effectively protected by other means.

No regulation of a profession or occupation shall conflict with the Constitution of the United States, the Constitution of Virginia, the laws of the United States, or the laws of the Commonwealth of Virginia. Periodically and at least annually, all agencies regulating a profession or occupation shall review such regulations to ensure that no conflict exists. 1979, c. 408, § 54-1.17; 1988, c. 765; 2016, c. 467.

The chapters of the acts of assembly referenced in the historical citation at the end of this section may not constitute a comprehensive list of such chapters and may exclude chapters whose provisions have expired.

The DBHDS, DHP and DMAS are all under the Secretary of Human Resources. The three Departments have collectively contributed to regulatory activity that has had a negative economic impact on social workers and appears to have abridged “...*The right of every person to engage in any lawful profession, trade, or occupation of his choice...*” and that right “... *is clearly protected by both the Constitution of the United States and the Constitution of the Commonwealth of Virginia.*”

The title “social worker” is a protected title under § 54.1-3709. *Unlawful designation as social worker* (See below). This would allow DMAS, DHP and DBHDS to specifically add the name “social worker” as a provider that can be paid for delivering the services. The LBSW and LMSW have

already been vetted by the Board of Social Work and there is no need for the Board of Counseling to also review the qualifications of Licensed persons in order to be “registered” as a QMHP.

*§ 54.1-3709. Unlawful designation as social worker.*

*A. It shall be unlawful for any person not licensed under this chapter to use the title "Social Worker" in writing or in advertising in connection with his practice unless he simultaneously uses clarifying initials that signify receiving a baccalaureate or master's degree in social work from an accredited social work school or program approved by the Council on Social Work Education or a doctorate in social work.*

The VBSW has a responsibility to advocate for the rights of social workers in this context and to seek for the Director of the Department of Health Professions to seek the assistance of the Secretary of Human Resources to find a resolution to this apparent infringement on the rights of social workers.

I appreciate the opportunity to present comments to the VBSW.

Joseph G. Lynch LCSW  
Legislative Vice President VSCSW

#### **APPENDIX A**

VSCSW LSW Study 2017 PowerPoint slides <https://vscsw.org/wp-content/uploads/2018/06/VSCSW-LSW-STUDY-October-7-2017.pdf>

#### **APPENDIX B**

DHP Healthcare Workforce Data Center Report LCSW 2020  
<http://www.dhp.virginia.gov/PublicResources/HealthcareWorkforceDataCenter/ProfessionReports/>

#### **APPENDIX C**

Military Bases <https://militarybases.com/virginia/>

Jurisdiction	License Title Abbreviation	License Name	License Required During Supervision if Different?	Exam Required
Alabama	LICSW	Licensed Independent Clinical Social Worker	Yes	Clinical
Alaska <b>1</b>	LCSW			Clinical
Arizona <b>2</b>	LCSW			Clinical
Arkansas	LCSW	Licensed Certified Social Worker	Yes	Clinical
California	LCSW	Licensed Clinical Social Worker	Yes	Clinical
Colorado <b>3</b>	LCSW			Clinical
Connecticut <b>4</b>	LCSW			Clinical
Delaware <b>5</b>	LCSW			Clinical
DC	LICSW	Licensed Independent Clinical Social Worker	Yes	Clinical
Florida	LCSW	Licensed Clinical Social Worker	Yes	Clinical
Georgia	LCSW	Licensed Clinical Social Worker	Yes	Clinical
Hawaii <b>6</b>	LCSW			Clinical
Idaho	LCSW	Licensed Clinical Social Worker	Yes	Clinical
Illinois <b>7</b>	LCSW1			Clinical
Indiana	LCSW	Licensed Clinical Social Worker	Yes	Clinical
Iowa	LISW	Licensed Independent Social Worker	Yes	Clinical
Kansas	LSCSW	Licensed Specialist Clinical Social Worker	Yes	Clinical
Kentucky	LCSW	Licensed Clinical Social Worker	Yes	Clinical
Louisiana	LCSW	Licensed Clinical Social Worker	Yes	Clinical
Maine	LCSW1 (LC)	Licensed Clinical Social Worker 1	Yes	Clinical
Maryland	LCSW-C	Licensed Certified Social Worker-Clinical	Yes	Clinical
Massachusetts	LICSW	Licensed Independent Clinical Social Worker	Yes	Clinical
Michigan	LMSW-C	Licensed Master Social Worker-Clinical	Yes	Clinical
Minnesota	LICSW	Licensed Independent Clinical Social Worker	Yes	Clinical
Mississippi	LCSW	Licensed Certified Social Worker	Yes	Clinical
Missouri	LCSW	Licensed Clinical Social Worker	Yes	Clinical
Montana	LCSW	Licensed Clinical Social Worker	Yes	Clinical
Nebraska	LMHP	Licensed Independent Mental Health Practitioner	Yes	Clinical
Nevada	CSW	Clinical Social Worker	Yes	Clinical



Due to the COVID-19 declared state of emergency and consistent with Amendment 28 to HB29 (Budget Bill for 2018-2020) and the applicable provisions of § 2.2-3708.2 in the provisions of Freedom of Information Act, the Board convened a virtual meeting to consider such regulatory and business matters as presented on the agenda necessary for the board to discharge its lawful purposes, duties and responsibilities.

- PRESIDING OFFICER:** Dolores Paulson, PhD, LCSW, Chair
- BOARD MEMBERS PRESENT:** Canek Aguirre, Citizen Member  
Angelia Allen, Citizen Member  
Jamie Clancey, MSW, LCSW  
Maria Eugenia del Villar, MSW, LCSW  
Michael Hayter, MSW, LCSW, CSAC  
Gloria Manns, MSW, LCSW  
Teresa Reynolds, MSW, LCSW  
John Salay, MSW, LCSW
- BOARD STAFF PRESENT:** Latasha Austin, Licensing & Operations Manager  
Christy Evans, Discipline Case Specialist  
Jaime Hoyle, J.D., Executive Director  
Jennifer Lang, Deputy Executive Director- Discipline  
Charlotte Lenart, Deputy Executive Director- Licensing  
Sharniece Vaughan, Licensing Specialist
- DHP STAFF PRESENT:** Barbara Allison-Bryan, M.D. Agency Chief Deputy Director  
David Brown, D.C., Director, Department of Health Professions  
Elaine Yeatts, Senior Policy Analyst, Department of Health Professions
- BOARD COUNSEL PRESENT:** James Rutkowski, Assistant Attorney General
- VIRTUAL PUBLIC ATTENDEES:** Joseph G. Lynch, LCSW, Virginia Society for Clinical Social Work
- CALL TO ORDER:** Dr. Paulson called the virtual board meeting to order at 10:02 a.m.
- ROLL CALL/ESTABLISHMENT OF A QUORUM:** Dr. Paulson requested a roll call. Ms. Austin announced that nine members of the Board were present at roll call; therefore, a quorum was established. Ms. Austin also conducted a roll call of Board and agency staff.
- MISSION STATEMENT:** Ms. Austin read the mission statement of the Department of Health Professions, which was also the mission statement of the Board.
- ADOPTION OF AGENDA:** Ms. Allen made a motion, which Ms. Clancey properly seconded, to adopt the agenda as presented. Ms. Austin conducted a roll call vote. With nine members present at the time of roll call, the motion passed with nine unanimous votes in favor of the motion.

**PUBLIC COMMENT:**

The Association of Social Work Boards (ASWB) provided public comment related to a Petition for Rulemaking. The Board would later address the comment under recommendations from the Regulatory Committee on the agenda. No other public comment was provided.

**APPROVAL OF MINUTES:**

Ms. Manns made a motion, which Ms. Allen properly seconded, to approve the meeting minutes from the Virtual Board Meeting held on December 4, 2020.

Ms. Austin conducted a roll call vote. With nine members present at the time of roll call, the motion passed with nine unanimous votes in favor of the motion.

**AGENCY REPORT:**

Dr. Brown informed the Board about the current scam alert where licensees have been receiving threatening scam calls and bogus written communications that are designed to appear to be from the Board. Some of the calls appear to be coming from a Department of Health Profession phone number but are not. Information about the scam alert has been placed on the Board's website.

Dr. Brown also updated the Board on the legislative session that the General Assembly held virtually this year.

Dr. Allison-Bryan provided an update on vaccines and indicated that three vaccines have now been approved. Currently about 19% of Virginias have received the first dose.

Dr. Allison-Bryan also provided an update to the Board regarding Resolution 49 that pass in 2020 that asked the Department of Health Professions to look at the practice of social work in the Commonwealth. In addition, to looking especially at the profession and assessment of the need for additional social workers in the Commonwealth and analysis how compensation levels might influence the current and future practice of social work in the state. DHP has been tasked with presenting a final report by January 2022.

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**BOARD CHAIR REPORT:**

Dr. Paulson provided a year recap of the work the Board has accomplished. She welcomed new Board member Teresa Reynolds and congratulated to Mr. Canek and Ms. Manns for their reappointments on the Board. Dr. Paulson informed everyone that Mr. Salay would be rotating off the Board this year and for any Board member interested in filling his position as Chair of the Regulatory Committee to inform herself or Board staff.

**LEGISLATION & REGULATORY ACTIONS:**

Ms. Yeatts provided a report on the 2021 General Assembly and a status report on the current regulatory actions for the Board. The regulations on conversion therapy would become effective on March 16, 2021 and the changes to supervision requirements would become effective on March 18, 2021. Ms. Yeatts also informed the Board that public comment period for the amendments to the regulations related to endorsement, reinstatement and the standards of practice ends on March 31, 2021.

Ms. Yeatts discussed with the Board the recommendation made by the Advisory Board on Music Therapy at their first meeting held on February 19, 2021.

**Motion:** Mr. Salay made a motion, which Ms. Clancey properly seconded, to approve the adoption of the Bylaws for the Advisory Board on Music Therapy.

**BOARD COUNSEL REPORT:**

There was no report from Board Counsel.

**EXECUTIVE DIRECTOR'S REPORT:**

Ms. Hoyle reported on the finances of the Board. A copy of the report provided was included in the agenda packet. Ms. Hoyle added that the Board has been saving money with their being restrictions on traveling and holding meetings virtually.

Additionally, Ms. Hoyle reported that she met with new Board member Teresa Reynolds and conducted a virtual new orientation session. She also indicated that ASWB would be holding a new board member training virtually. Ms. Hoyle informed the Board that ASWB will hold its Administrative Forum virtually next and their Education Meeting April 30-May 1<sup>st</sup>. Any Board members interested in attending should let Ms. Hoyle know.

Ms. Hoyle also informed the Board that she would be following up on the status of Senate Bill 431.

**DISCIPLINE REPORT:**

Ms. Lang reported on the disciplinary statistics for the Board of Social Work from November 27, 2020 – February 25, 2021. A copy of the report given was included in the agenda packet.

**BOARD OFFICE REPORT:**

Ms. Austin reported on licensure and examination statistics for the Board for the year 2020 and statistics for January 1, 2021- February 28, 2021. A copy of the report given was included in the agenda packet.

**LICENSING UNIT REPORT:**

Ms. Lenart reported on the satisfaction survey results, renewal, supervisory registry, changes to supervision requirements and staffing updates. A copy of the full report given was included in the agenda packet.

**REGULATORY COMMITTEE REPORT:**

**Recommendation:** Mr. Salay informed the Board that the regulatory committee met yesterday and discussed a Petition for Rulemaking submitted to the Board by Florine Edmunds. The Petition requests the Board extend the requirement for passage of the licensing examination and allow an additional one to three years for remediation, training and equitable opportunities and to reduce the passing score by 10 points and provide study sheets for retaking examination. The recommendation from the Regulatory Committee was to decline to initiate rulemaking in response to the petition and to decline to initiate rulemaking in response to the petition to extend further the period during which the Board can approve someone to sit for the examination.

Ms. Austin conducted a roll call vote. With nine members present at the time of roll call, the recommendation from the Regulatory Committee passed with nine unanimous votes in favor of the recommendation.

**Recommendation:** The Regulatory Committee also discussed the recommendation made by the Advisory Board on Music Therapy to adopt a Notice of Intended Regulatory Action (NOIRA) for Chapter 30, Regulations Governing the Licensure of Music Therapist. The Regulatory Committee approved a motion to adopt the NOIRA.

Ms. Austin conducted a roll call vote. With nine members present at the time of roll call, the recommendation from the Regulatory Committee passed with nine

**Recommendation:** The Regulatory Committee reviewed and discussed the Virginia Board of Social Work Bylaws. The Regulatory Committee approved a motion to amend Article IV (5) under the General Delegation of Authority section of the bylaws as follows:

*The Board delegates to the Executive Director authority to grant an extension for good cause of up to one (1) ~~year~~ renewal cycle for the completion of continuing education requirements upon written request from the licensee prior to the renewal date.*

Ms. Austin conducted a roll call vote. With nine members present at the time of roll call, the recommendation from the Regulatory Committee passed with nine unanimous votes in favor of the recommendation.

**Recommendation:** The Regulatory Committee reviewed and discussed the training requirements for supervisors. The Regulatory Committee approved a motion to adopt a NOIRA to reduce the amount of professional training hours in supervision that a supervisor must complete every 5 years from 14 hours to 7 hours. 14 hours would still be required for initial approval.

Ms. Austin conducted a roll call vote. With nine members present at the time of roll call, the recommendation from the Regulatory Committee passed with nine unanimous votes in favor of the recommendation.

Mr. Salay also informed the Board that the Regulatory Committee discussed aligning the LMSW to the LCSW track. After much discussion, the Committee decided that it needed more research on the matter for clarity. It was proposed that research be done to see if there is another state (s) that has regulations similar to what alignments are being suggested and to bring back what changes would have to be made.

**BOARD OF HEALTH PROFESSIONS REPORT:**

Mr. Salay report from the Board of Health Professions. A copy of the report given was included in the agenda packet.

**NEXT MEETING DATES:**

Dr. Paulson announced that the Regulatory Committee would hold its next meeting on Thursday, July 22, 2021 and the Board would hold its next meeting on Friday, July 23, 2021.

**ADJOURNMENT:**

Dr. Paulson adjourned the March 12, 2021 virtual Board meeting at 11:32 a.m.

\_\_\_\_\_  
Dolores Paulson, Ph.D., L.C.S.W., Chair

\_\_\_\_\_  
Jaime Hoyle, Executive Director

**Agenda Item: Regulatory Actions - Chart of Regulatory Actions  
As of July 12, 2021**

Chapter		Action / Stage Information
[18 VAC 140 - 20]	Regulations Governing the Practice of Social Work	<p><u>Changes to endorsement and reinstatement standards of practice</u> [Action 5631]</p> <p>NOIRA - Register Date: 3/1/21  Comment closed: 3/31/21  Board to adopt proposed regs: 7/23/21</p>
[18 VAC 140 - 20]	Regulations Governing the Practice of Social Work	<p><u>Reduction in CE hours for continuation of approval to be a supervisor</u> [Action 5702]</p> <p>NOIRA - Register Date: 6/7/21  Comment closed: 7/7/21  Board to adopt proposed regs: 7/23/21</p>
[18 VAC 140 - 30]	Regulations Governing the Practice of Music Therapy (under development)	<p><u>Initial regulations for licensure of music therapists</u> [Action 5704]</p> <p>NOIRA - At Governor's Office [Stage 9232]</p>

**Agenda Item: Board action on Proposed regulations for Endorsement, etc.**

**Included in your agenda package are:**

Copy of Townhall announcement of NOIRA (there were no comments)

Copy of DRAFT proposed regulations – as published with the NOIRA

**Staff note:**

There was a preliminary draft published with the Notice of Intended Regulatory Action – there was no comment on the draft.

**Board action:**

To adopt proposed regulations as presented in the agenda package, OR

To adopt proposed regulations as amended.

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**Agency** Department of Health Professions

**Board** Board of Social Work

**Chapter** Regulations Governing the Practice of Social Work [18 VAC 140 - 20]

**Action:** Changes to endorsement and reinstatement; standards of practice

## Notice of Intended Regulatory Action (NOIRA)

Action 5631 / Stage 9102

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

### Documents

 <a href="#">Preliminary Draft Text</a>	10/15/2020 11:31 am	<a href="#">Sync Text with RIS</a>
 <a href="#">Agency Background Document</a>	10/15/2020	<a href="#">Upload / Replace</a>
 <a href="#">Governor's Review Memo</a>	1/30/2021	
 <a href="#">Registrar Transmittal</a>	1/30/2021	

### Status

<b>Public Hearing</b>	Will be held at the <b>proposed</b> stage
<b>Exempt from APA</b>	No, this stage/action is subject to Article 2 of the <i>Administrative Process Act</i>
<b>DPB Review</b>	Submitted on 10/15/2020 Policy Analyst: <a href="#">Jeannine Rose</a> Review Completed: 10/28/2020
<b>Governor's Review</b>	Review Completed: 1/30/2021 Result: Approved
<b>Virginia Registrar</b>	Submitted on 1/30/2021 <a href="#">The Virginia Register of Regulations</a> Publication Date: 3/1/2021  <b>Volume: 37 Issue: 14</b>
<b>Comment Period</b>	Ended 3/31/2021 0 comments

### Contact Information

<b>Name / Title:</b>	Jaime Hoyle / <i>Executive Director</i>
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# Proposed Regulations

## Social Work

### **18VAC140-20-45. Requirements for licensure by endorsement.**

A. Every applicant for licensure by endorsement shall submit in one package:

1. A completed application and the application fee prescribed in 18VAC140-20-30.
2. Documentation of active social work licensure in good standing obtained by standards required for licensure in another jurisdiction as verified by the out-of-state licensing agency. Licensure in the other jurisdiction shall be of a comparable type as the licensure that the applicant is seeking in Virginia.
3. Verification of a passing score on a board-approved national exam at the level for which the applicant is seeking licensure in Virginia.
4. Documentation of any other health or mental health licensure or certification, if applicable.
5. A current report from the U.S. Department of Health and Human Services National Practitioner Data Bank (NPDB).
6. Verification of:
  - a. ~~Active practice at the level for which the applicant is seeking licensure in another United States jurisdiction for 24 out of the past 60 months;~~
  - b. ~~Active practice in an exempt setting at the level for which the applicant is seeking licensure for 24 out of the past 60 months;~~ or
  - c. ~~Evidence of supervised experience requirements substantially equivalent to those outlined in 18VAC140-20-50 A-2 and A-3.~~
7. Certification that the applicant is not the respondent in any pending or unresolved board action in another jurisdiction or in a malpractice claim.

B. If an applicant for licensure by endorsement has not passed a board-approved national examination at the level for which the applicant is seeking licensure in Virginia, the board may approve the applicant to sit for such examination.

### **18VAC140-20-110. Late renewal; reinstatement; reactivation.**

A. An LBSW, LMSW, or clinical social worker whose license has expired may renew that license within one year after its expiration date by:

1. Providing evidence of having met all applicable continuing education requirements.
2. Paying the penalty for late renewal and the renewal fee as prescribed in 18VAC140-20-30.

B. An LBSW, LMSW, or clinical social worker who fails to renew the license after one year and who wishes to resume practice shall apply for reinstatement and pay the reinstatement fee, which shall consist of the application processing fee and the penalty fee for late renewal, as set forth in 18VAC140-20-30. An applicant for reinstatement shall also provide:

1. Documentation of having completed all applicable continued competency hours equal to the number of years the license has lapsed, not to exceed four years;

2. Documentation of any other health or mental health licensure or certification held in another United States jurisdiction, if applicable; and

3. A current report from the U.S. Department of Health and Human Services National Practitioner Data Bank.

~~C. In addition to requirements set forth in subsection B of this section, an applicant for reinstatement whose license has been lapsed for 10 or more years shall also provide evidence of competency to practice by documenting:~~

~~1. Active practice in another United States jurisdiction for at least 24 out of the past 60 months immediately preceding application;~~

~~2. Active practice in an exempt setting for at least 24 out of the past 60 months immediately preceding application; or~~

~~3. Practice as a supervisee under supervision for at least 360 hours in the 12 months immediately preceding reinstatement of licensure in Virginia. The supervised practice shall include a minimum of 60 hours of face-to-face direct client contact and nine hours of face-to-face supervision.~~

D. An LBSW, LMSW, or clinical social worker wishing to reactivate an inactive license shall submit the difference between the renewal fee for active licensure and the fee for inactive licensure renewal and document completion of continued competency hours equal to the number of years the license has been inactive, not to exceed four years. ~~An applicant for reactivation who has been inactive for 10 or more years shall also provide evidence of competency to practice by documenting:~~

~~1. Active practice in another United States jurisdiction for at least 24 out of the past 60 months immediately preceding application;~~

~~2. Active practice in an exempt setting for at least 24 out of the past 60 months immediately preceding application; or~~

~~3. Practice as a supervisee under supervision for at least 360 hours in the 12 months immediately preceding reactivation of licensure in Virginia. The supervised practice shall include a minimum of 60 hours of face-to-face direct client contact and nine hours of face-to-face supervision.~~

## Part V

### Standards of Practice

#### **18VAC140-20-150. Professional conduct.**

A. The protection of the public health, safety, and welfare and the best interest of the public shall be the primary guide in determining the appropriate professional conduct of all persons whose activities are regulated by the board. Regardless of the delivery method, whether in person, by telephone or electronically, these standards shall apply to the practice of social work.

B. Persons licensed as LBSWs, LMSWs, and clinical social workers shall:

1. Be able to justify all services rendered to or on behalf of clients as necessary for diagnostic or therapeutic purposes.

2. Provide for continuation of care when services must be interrupted or terminated.

3. Practice only within the competency areas for which they are qualified by education and experience.

4. Report to the board known or suspected violations of the laws and regulations governing the practice of social work.

5. Neither accept nor give commissions, rebates, or other forms of remuneration for referral of clients for professional services.

6. Ensure that clients are aware of fees and billing arrangements before rendering services.

7. Inform clients of potential risks and benefits of services and the limitations on confidentiality and ensure that clients have provided informed written consent to treatment.

8. Keep confidential their therapeutic relationships with clients and disclose client records to others only with written consent of the client, with the following exceptions: (i) when the client is a danger to self or others; or (ii) as required by law.

9. When advertising their services to the public, ensure that such advertising is neither fraudulent nor misleading.

10. As treatment requires and with the written consent of the client, collaborate with other health or mental health providers concurrently providing services to the client.

11. Refrain from undertaking any activity in which one's personal problems are likely to lead to inadequate or harmful services.

12. Recognize conflicts of interest and inform all parties of the nature and directions of loyalties and responsibilities involved.

C. In regard to client records, persons licensed by the board shall comply with provisions of § 32.1-127.1:03 of the Code of Virginia on health records privacy and shall:

1. Maintain written or electronic clinical records for each client to include identifying information and assessment that substantiates diagnosis and treatment plans. Each record shall include a diagnosis and treatment plan, progress notes for each case activity, information received from all collaborative contacts and the treatment implications of that information, and the termination process and summary.

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

3. Disclose or release records to others only with clients' expressed written consent or that of their legally authorized representative or as mandated by law.

4. Ensure confidentiality in the usage of client records and clinical materials by obtaining informed consent from clients or their legally authorized representative before (i) videotaping, (ii) audio recording, (iii) permitting third-party observation, or (iv) using identifiable client records and clinical materials in teaching, writing, or public presentations.

5. Maintain client records for a minimum of six years or as otherwise required by law from the date of termination of the therapeutic relationship with the following exceptions:

a. At minimum, records of a minor child shall be maintained for six years after attaining the age of majority or 10 years following termination, whichever comes later.

b. Records that are required by contractual obligation or federal law to be maintained for a longer period of time.

c. Records that have been transferred to another mental health professional or have been given to the client or his legally authorized representative.

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

1. Not engage in a dual relationship with a client or a supervisee that could impair professional judgment or increase the risk of exploitation or harm to the client or supervisee. (Examples of such a relationship include familial, social, financial, business, bartering, or a close personal relationship with a client or supervisee.) Social workers shall take appropriate professional precautions when a dual relationship cannot be avoided, such as informed consent, consultation, supervision, and documentation to ensure that judgment is not impaired and no exploitation occurs.

2. Not have any type of romantic relationship or sexual intimacies with a client or those included in collateral therapeutic services, and not provide services to those persons with whom they have had a romantic or sexual relationship. Social workers shall not engage in romantic relationship or sexual intimacies with a former client within a minimum of five years after terminating the professional relationship. Social workers who engage in

such a relationship after five years following termination shall have the responsibility to examine and document thoroughly that such a relationship did not have an exploitive nature, based on factors such as duration of therapy, amount of time since therapy, termination circumstances, client's personal history and mental status, adverse impact on the client. A client's consent to, initiation of or participation in sexual behavior or involvement with a social worker does not change the nature of the conduct nor lift the regulatory prohibition.

3. Not engage in any romantic or sexual relationship or establish a therapeutic relationship with a current supervisee or student. Social workers shall avoid any nonsexual dual relationship with a supervisee or student in which there is a risk of exploitation or potential harm to the supervisee or student, or the potential for interference with the supervisor's professional judgment.

4. Recognize conflicts of interest and inform all parties of the nature and directions of loyalties and responsibilities involved.

5. Not engage in a personal relationship with a former client in which there is a risk of exploitation or potential harm or if the former client continues to relate to the social worker in his professional capacity.

6. Not engage in physical contact (such as cradling, caressing, kissing, and groping) with a client when there is a likelihood of psychological harm to the client. Social workers who engage in physical contact are responsible for setting clear and culturally sensitive boundaries.

7. Not sexually harass clients. Sexual harassment includes sexual advances; sexual solicitation; requests for sexual favors; and other verbal written, electronic, or physical contact of a sexual nature.

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

**Agenda Item: Board action on Proposed regulations for Reduction in CE requirement for supervisors**

**Included in your agenda package are:**

Copy of Townhall announcement of NOIRA

Copy of comment on the NOIRA

Copy of DRAFT proposed regulations

**Staff note:**

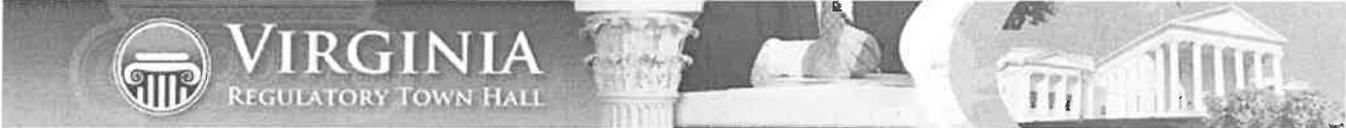
There was no preliminary draft published with the Notice of Intended Regulatory Action.

**Board action:**

To adopt proposed regulations as presented in the agenda package, OR

To adopt proposed regulations as amended.

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**Agency** Department of Health Professions

**Board** Board of Social Work

**Chapter** Regulations Governing the Practice of Social Work [18 VAC 140 - 20]

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

## Notice of Intended Regulatory Action (NOIRA)

Action 5702 / Stage 9229

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

Documents		
Preliminary Draft Text	None submitted	<a href="#">Sync Text with RIS</a>
 <a href="#">Agency Background Document</a>	3/16/2021	<a href="#">Upload / Replace</a>
 <a href="#">Governor's Review Memo</a>	5/6/2021	
 <a href="#">Registrar Transmittal</a>	5/9/2021	

Status	
<b>Public Hearing</b>	Will be held at the <b>proposed</b> stage
<b>Exempt from APA</b>	No, this stage/action is subject to Article 2 of the <i>Administrative Process Act</i>
<b>DPB Review</b>	Submitted on 3/16/2021 Policy Analyst: <a href="#">Jeannine Rose</a> Review Completed: 3/29/2021
<b>Governor's Review</b>	Review Completed: 5/6/2021 Result: Approved
<b>Virginia Registrar</b>	Submitted on 5/9/2021 <a href="#">The Virginia Register of Regulations</a> Publication Date: 6/7/2021  <b>Volume: 37 Issue: 21</b>
<b>Comment Period</b>	<b>Ended 7/7/2021</b> <b>1 comments</b>

Contact Information	
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**Agency** Department of Health Professions

**Board** Board of Social Work

**Chapter** Regulations Governing the Practice of Social Work [18 VAC 140 - 20]

<b>Action</b>	<u>Reduction in CE hours for continuation of approval to be a supervisor</u>
<b>Stage</b>	<u>NOIRA</u>
<b>Comment Period</b>	Ends 7/7/2021

[Back to List of Comments](#)

**Commenter:** sarah hickey

6/9/21 1:33 pm

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

I as an LCSW , who is very interested in becoming a supervisor in the future am supporting this action. I agree that the amendment to reduce the 14 hour requirement should be reduced to 7 horus every five years.

Thank you and please support this action.

CommentID: 99011

**Project 6873 - Proposed****Board Of Social Work****Reduction in CE hours for 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:

- 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

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 face-to-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

graduate course or 14 hours of continuing education in supervision, at least seven 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 he 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 assure 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;

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 phone 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 board approved supervision until licensed in Virginia as a licensed clinical social worker.



**Board of Health Professions**  
**VIRTUAL** - Full Board Meeting  
 May 13, 2021 at 10:00 a.m.

**DRAFT**

Due to the COVID-19 declared state of emergency and consistent with Amendment 28 to HB29 (Budget Bill for 2018-2020) and the applicable provisions of the Freedom of Information Act including Virginia Code § 2.2-3708.2, and with Executive Order 51 (2020) as issued and amended by the Governor due to the current state of emergency declared in the Commonwealth, the Board convened a virtual meeting to consider such regulatory and business matters as presented on the agenda and as necessary for the board to discharge its lawful purposes, duties, and responsibilities.

**CALL TO ORDER**

Mr. Wells called the virtual meeting to order at 10:00 a.m. Quorum was established with 16 members in attendance.

**EMERGENCY EGRESS**

Dr. Carter provided evacuation procedures for members in physical attendance.

**ROLL CALL-BOARD MEMBER VIRTUAL ATTENDEES**

Kevin Doyle, EdD, LPC, LSATP - Board of Counseling  
 Louis Jones, FSL - Board of Funeral Directors and Embalmers  
 Derrick Kendall, NHA - Board of Long-Term Care Administrators  
 Brenda Stokes, MD - Board of Medicine, 2nd Vice Chair  
 Louise Hershkowitz, CRNA, MSHA - Board of Nursing  
 Helene Clayton-Jeter, OD - Board of Optometry  
 Ryan Logan, RPh - Board of Pharmacy  
 Allen Jones, Jr., DPT, PT - Board of Physical Therapy  
 Herbert Stewart, PhD - Board of Psychology  
 John Salay, MSW, LCSW - Board of Social Work  
 Steve Karras, DVM - Board of Veterinary Medicine  
 Sheila Battle, MHS - Citizen Member  
 Sahil Chaudhary - Citizen Member, 1st Vice Chair  
 Martha Rackets, PhD - Citizen Member  
 Carmina Bautista, MSN, FNP-BC, BC-ADM - Citizen Member

**BOARD MEMBERS ABSENT:**

Alison King, PhD, CCC-SLP - Board of Audiology & Speech-Language Pathology  
 Sandra Catchings, DDS - Board of Dentistry

**VIRTUAL ATTENDANCE: DHP STAFF & GUESTS**

Barbara Allison-Bryan, MD, Agency Chief Deputy Director  
 David Brown, DC, Agency Director  
 Yetty Shobo, PhD, Deputy Executive Director for the Board  
 Rajana Siva, MBA, Research Analyst for the Board  
 William Harp, MD, Executive Director for the Board of Medicine  
 Henry Fisher, Virtual Meeting Technician  
 Lisa Hahn, Agency Chief Operating Office  
 Sandra Reen, Executive Director for the Board of Dentistry  
 Charis Mitchell, Assistant Attorney General, Board Counsel  
 Charles Giles, Agency Budget Manager  
 Leslie Knachel, Executive Director for the Boards of Audiology & Speech-Language Pathology, Optometry, Veterinary Medicine  
 Ralph Orr, Program Director, Virginia's Prescription Monitoring Program  
 Rebecca Schultz, Law Student  
 Corie Tillman-Wolf, JD, Executive Director for the Boards of Funeral Directors & Embalmers, Long-Term Care Administrator's, Physical Therapy

**PHYSICAL ATTENDANCE AT PERIMETER CENTER**

Elizabeth Carter, PhD, Executive Director for the Board  
 James Wells, RPh, Citizen Member, Board Chairman  
 Laura Jackson, MSHSA, Operations Manager for the Board

**VIRTUAL ATTENDANCE: PUBLIC**

Ben Traynham  
 Cassie Schroth  
 Richard Grossman  
 Unknown Caller-x37  
 Unknown Caller-um16173

**ORDERING OF AGENDA**

Mr. Wells opened the floor to any edits or corrections regarding the agenda as presented. Ms. Jackson stated that Dr. Allison-Bryan would be presenting the Legislative and Regulatory Report. Dr. Stokes moved to accept the change to the agenda. Ms. Bautista seconded the motion. The motion carried with a unanimous aye vote.

**PUBLIC COMMENT - Mr. Wells**

Let the record reflect that there were no requests to provide public comment.

## **APPROVAL OF MINUTES - JANUARY 21, 2021 FULL BOARD MEETING MINUTES**

Mr. Wells opened the floor to any edits or corrections regarding the draft meeting minutes for the Full Board meeting held on January 21, 2021. Ms. Jackson asked that the minutes be amended to include Attachment 6, a presentation given by Mr. Salay with the Board of Social Work. Dr. Stokes moved to accept the change to the meeting minutes. Dr. Jones, Jr. seconded the motion. The motion carried with a unanimous aye vote.

## **DIRECTOR'S REPORT & LEGISLATIVE REPORT**

Dr. Brown provided a review of the legislation this session with impact to the Board of Nursing (nurse practitioners, advanced practice nurse practitioners, midwives and a study on advance practice nursing) and the Board of Pharmacy will be impacted by several marijuana bills, including the legalization of marijuana July 1, 2021. The agency was also very involved in the emergency bill expanding the pool of qualified vaccinators. Dr. Brown also provided that the legislature is paying attention to the sunrise reviews that the board has completed, to include art therapy, music therapy and naturopaths, and determining licensure based on the Board's decision.

Dr. Allison-Bryan reported on COVID-19 vaccine statistics in Virginia. She advised that the rate of infection has slowed down and that the Pfizer vaccine has been approved for children age 12 and older.

## **REGULATORY REPORT**

Dr. Allison-Bryan provided an update on the current regulations affecting DHP. The FOIA Code section on electronic meetings was also discussed.

## **AGENCY BUDGET REVIEW**

Mr. Giles provided an overview of the agencies budget for FY22.

## **BOARD CHAIR REPORT - Mr. Wells**

Mr. Wells advised the Board that there are nine board members with terms expiring June 30, 2021. He thanked the outgoing board members for their many years of service to their respective regulatory board, the Board of Health Professions and the Commonwealth at large.

**Break** 11:25 a.m. - 11:30 a.m.

## **EXECUTIVE DIRECTOR'S REPORT**

Dr. Carter provided an overview of the Board's budget and a PowerPoint presentation on the agency's statistics and performance measures. Dr. Carter asked that discussion regarding S1365 be moved to the August 19, 2021 Full Board meeting.

## **HEALTHCARE WORKFORCE DATA CENTER**

Dr. Shobo provided an update and PowerPoint presentation on the data centers activities since the last meeting. (Attachment 1)

## **INDIVIDUAL BOARD REPORTS**

### **Board of Audiology & Speech-Language Pathology**

Dr. Carter provided the ASLP report on behalf of Dr. King. (Attachment 2)

### **Board of Counseling**

Dr. Doyle provided an overview of the Board of Counseling's activities. Dr. Doyle's term with the Board of Counseling and the Board of Health Professions is ending June 30, 2021. He thanked staff and stated that he enjoyed his service on BHP. (Attachment 3)

### **Board of Dentistry - no report provided**

### **Funeral Directors & Embalmers**

Mr. Jones provided an overview of the Board of Funeral Directors & Embalmers activities. Mr. Jones stated that he enjoyed his service on both Boards and thanked the agency staff. (Attachment 4)

### **Long-Term Care Administrators**

Mr. Kendall provided an overview of the Board of Long-Term Care Administrators activities. Mr. Kendall's term on both boards is ending June 30, 2021. He thanked board staff and stated that he was honored to be appointed by the Governor to represent the long-term care community, especially during such a trying time. (Attachment 5)

### **Board of Medicine - Dr. Stokes**

Dr. Stokes provide an overview of the activities of the Board of Medicine. She advised that the Board has been holding committee, hearing and board meetings virtually. She noted changes in legislation of surgical technologists and midwives, and that Virginia is the first of ten states to sign on for the occupational therapy compact. Dr. Kevin O'Connor, prior Board of Medicine representative, received the leadership award given by the Federation of State Medical Boards.

### **Board of Nursing - Ms. Hershkowitz**

Ms. Hershkowitz provided an overview of the Board of Nursing's activities. She advised that her term on both Boards ends June 30, 2021 and that she appreciated serving on the BHP and thanked agency staff. (Attachment 6)

### **Board of Optometry - Dr. Clayton-Jeter**

Dr. Clayton-Jeter provided an overview of the Board of Optometry's activities. (Attachment 7)

### **Board of Pharmacy - Mr. Logan**

Mr. Logan provided an overview of the Board of Pharmacy's activities to include cannabis regulation and an amendment to the Boards workforce survey question regarding statewide protocol. His term on both boards ends June 30, 2021, thanking staff and the agency for the opportunity to serve.

**Board of Physical Therapy - Dr. Jones, Jr.**

Dr. Jones, Jr. provided an overview of the Board of Physical Therapy's activities. (Attachment 8)

**Board of Psychology - Dr. Stewart**

Dr. Stewart provided an overview of the Board of Psychology's activities. Dr. Stewart's term on both boards ends June 30, 2021 and he thanked staff and fellow board members for their service. (Attachment 9)

**Board of Social Work**

Mr. Salay provided an overview of the Board of Social Work's activities. Mr. Salay's term on both boards ends June 30, 2021 and he stated it was an honor and pleasure to serve on both boards. (Attachment 10)

**Board of Veterinary Medicine**

Dr. Karras provided an overview of the Board of Veterinary Medicine's activities. (Attachment 11)

**NEW BUSINESS**

Mr. Wells stated for the record that there was no new business brought before the board.

**NEXT FULL BOARD MEETING**

The next Full Board meeting will be held August 19, 2021.

**ADJOURNMENT**

The meeting adjourned at 1:24 p.m.

**SIGNATURE** \_\_\_\_\_ / \_\_\_\_\_  
Elizabeth A. Carter, PhD, Executive Director, Board of Health Professions

An audio recording of this meeting may be found at:  
<https://www.dhp.virginia.gov/audio/BHP/FullBoardMeeting05132021.mp3>

Virginia Department of Health Professions  
Cash Balance  
As of May 31, 2021

	<u>110- Social Work</u>
<b>Board Cash Balance as June 30, 2020</b>	\$ 1,331,348
<b>YTD FY21 Revenue</b>	574,560
<b>Less: YTD FY21 Direct and Allocated Expenditures</b>	<u>617,250</u>
<b>Board Cash Balance as May 31, 2021</b>	<u><u>\$ 1,288,658</u></u>

Virginia Department of Health Professions  
 Revenue and Expenditures Summary  
 Department 11000 - Social Work  
 For the Period Beginning July 1, 2020 and Ending May 31, 2021

Account Number	Account Description	Amount	Budget	Amount	
				Under/(Over) Budget	% of Budget
4002400	Fee Revenue				
4002401	Application Fee	267,160.00	141,075.00	(126,085.00)	189.37%
4002406	License & Renewal Fee	288,260.00	653,767.50	365,507.50	44.09%
4002407	Dup. License Certificate Fee	2,875.00	850.00	(2,025.00)	338.24%
4002409	Board Endorsement - Out	8,750.00	4,625.00	(4,125.00)	189.19%
4002421	Monetary Penalty & Late Fees	7,440.00	780.00	(6,660.00)	953.85%
4002432	Misc. Fee (Bad Check Fee)	50.00	35.00	(15.00)	142.86%
	<b>Total Fee Revenue</b>	<b>574,535.00</b>	<b>801,132.50</b>	<b>226,597.50</b>	<b>71.72%</b>
4003000	Sales of Prop. & Commodities				
4003020	Misc. Sales-Dishonored Payments	25.00	-	(25.00)	0.00%
	<b>Total Sales of Prop. &amp; Commodities</b>	<b>25.00</b>	<b>-</b>	<b>(25.00)</b>	<b>0.00%</b>
	<b>Total Revenue</b>	<b>574,560.00</b>	<b>801,132.50</b>	<b>226,572.50</b>	<b>71.72%</b>
5011110	Employer Retirement Contrib.	11,930.24	13,874.95	1,944.71	85.98%
5011120	Fed Old-Age Ins- Sal St Emp	7,271.74	7,340.48	68.74	99.06%
5011140	Group Insurance	1,175.77	1,285.78	110.01	91.44%
5011150	Medical/Hospitalization Ins.	13,396.50	29,868.00	16,471.50	44.85%
5011160	Retiree Medical/Hospitalizatn	984.58	1,074.68	90.10	91.62%
5011170	Long term Disability Ins	535.85	585.32	49.47	91.55%
	<b>Total Employee Benefits</b>	<b>35,294.68</b>	<b>54,029.22</b>	<b>18,734.54</b>	<b>65.33%</b>
5011200	Salaries				
5011230	Salaries, Classified	89,313.70	95,954.00	6,640.30	93.08%
5011250	Salaries, Overtime	8,724.90	-	(8,724.90)	0.00%
	<b>Total Salaries</b>	<b>98,038.60</b>	<b>95,954.00</b>	<b>(2,084.60)</b>	<b>102.17%</b>
5011300	Special Payments				
5011340	Specified Per Diem Payment	1,600.00	-	(1,600.00)	0.00%
5011380	Deferred Compnstrn Match Pmts	322.00	1,056.00	734.00	30.49%
	<b>Total Special Payments</b>	<b>1,922.00</b>	<b>1,056.00</b>	<b>(866.00)</b>	<b>182.01%</b>
5011600	Terminatn Personal Svce Costs				
5011660	Defined Contribution Match - Hy	741.20	-	(741.20)	0.00%
	<b>Total Terminatn Personal Svce Costs</b>	<b>741.20</b>	<b>-</b>	<b>(741.20)</b>	<b>0.00%</b>
5011930	Turnover/Vacancy Benefits				
	<b>Total Personal Services</b>	<b>135,996.48</b>	<b>151,039.22</b>	<b>15,042.74</b>	<b>90.04%</b>
5012000	Contractual Svcs				
5012100	Communication Services				
5012110	Express Services	-	537.00	537.00	0.00%
5012120	Outbound Freight Services	10.38	-	(10.38)	0.00%
5012140	Postal Services	5,541.75	4,411.00	(1,130.75)	125.63%
5012150	Printing Services	2.79	67.00	64.21	4.16%
5012160	Telecommunications Svcs (VITA)	332.24	550.00	217.76	60.41%
5012190	Inbound Freight Services	19.46	-	(19.46)	0.00%
	<b>Total Communication Services</b>	<b>5,906.62</b>	<b>5,565.00</b>	<b>(341.62)</b>	<b>106.14%</b>

Virginia Department of Health Professions  
Revenue and Expenditures Summary  
Department 11000 - Social Work  
For the Period Beginning July 1, 2020 and Ending May 31, 2021

Account Number	Account Description	Amount	Budget	Amount	% of Budget
				Under/(Over) Budget	
5012200	Employee Development Services				
5012210	Organization Memberships	-	1,500.00	1,500.00	0.00%
	Total Employee Development Services	-	1,500.00	1,500.00	0.00%
5012400	Mgmnt and Informational Svcs	-			
5012420	Fiscal Services	6,671.81	5,500.00	(1,171.81)	121.31%
5012440	Management Services	149.71	212.00	62.29	70.62%
	Total Mgmnt and Informational Svcs	6,821.52	5,712.00	(1,109.52)	119.42%
5012500	Repair and Maintenance Svcs				
5012510	Custodial Services	323.22	-	(323.22)	0.00%
5012530	Equipment Repair & Maint Srvc	1,018.68	-	(1,018.68)	0.00%
	Total Repair and Maintenance Svcs	1,341.90	-	(1,341.90)	0.00%
5012600	Support Services				
5012630	Clerical Services	-	62,208.00	62,208.00	0.00%
5012640	Food & Dietary Services	-	480.00	480.00	0.00%
5012660	Manual Labor Services	327.99	2,188.00	1,860.01	14.99%
5012670	Production Services	1,085.24	2,405.00	1,319.76	45.12%
5012680	Skilled Services	3,777.96	24,297.00	20,519.04	15.55%
	Total Support Services	5,191.19	91,578.00	86,386.81	5.67%
5012800	Transportation Services				
5012820	Travel, Personal Vehicle	-	3,809.00	3,809.00	0.00%
5012850	Travel, Subsistence & Lodging	-	3,107.00	3,107.00	0.00%
5012880	Trvl, Meal Reimb- Not Rprtble	-	2,417.00	2,417.00	0.00%
	Total Transportation Services	-	9,333.00	9,333.00	0.00%
	Total Contractual Svcs	19,261.23	113,688.00	94,426.77	16.94%
5013000	Supplies And Materials				
5013100	Administrative Supplies				
5013110	Apparel Supplies	12.49	-	(12.49)	0.00%
5013120	Office Supplies	1,261.75	276.00	(985.75)	457.16%
5013130	Stationery and Forms	-	41.00	41.00	0.00%
	Total Administrative Supplies	1,274.24	317.00	(957.24)	401.97%
5013400	Medical and Laboratory Supp.				
5013420	Medical and Dental Supplies	1.75	-	(1.75)	0.00%
	Total Medical and Laboratory Supp.	1.75	-	(1.75)	0.00%
5013500	Repair and Maint. Supplies				
5013510	Building Repair & Maint Materl	4.60	-	(4.60)	0.00%
5013520	Custodial Repair & Maint Matr	0.64	-	(0.64)	0.00%
	Total Repair and Maint. Supplies	5.24	-	(5.24)	0.00%
5013600	Residential Supplies				
5013620	Food and Dietary Supplies	-	21.00	21.00	0.00%
5013630	Food Service Supplies	-	82.00	82.00	0.00%
	Total Residential Supplies	-	103.00	103.00	0.00%
	Total Supplies And Materials	1,281.23	420.00	(861.23)	305.05%

Virginia Department of Health Professions  
 Revenue and Expenditures Summary  
 Department 11000 - Social Work  
 For the Period Beginning July 1, 2020 and Ending May 31, 2021

Account Number	Account Description	Amount	Budget	Amount	
				Under/(Over)	% of Budget
<b>5015000</b>	<b>Continuous Charges</b>				
<b>5015100</b>	<b>Insurance-Fixed Assets</b>				
5015160	Property Insurance	-	26.00	26.00	0.00%
	<b>Total Insurance-Fixed Assets</b>	-	26.00	26.00	0.00%
<b>5015300</b>	<b>Operating Lease Payments</b>				
5015340	Equipment Rentals	546.12	540.00	(6.12)	101.13%
5015350	Building Rentals	19.20	-	(19.20)	0.00%
5015390	Building Rentals - Non State	11,455.75	11,888.00	432.25	96.36%
	<b>Total Operating Lease Payments</b>	12,021.07	12,428.00	406.93	96.73%
<b>5015500</b>	<b>Insurance-Operations</b>				
5015510	General Liability Insurance	-	97.00	97.00	0.00%
5015540	Surety Bonds	-	6.00	6.00	0.00%
	<b>Total Insurance-Operations</b>	-	103.00	103.00	0.00%
	<b>Total Continuous Charges</b>	12,021.07	12,557.00	535.93	95.73%
<b>5022000</b>	<b>Equipment</b>				
<b>5022100</b>	<b>Computer Hrdware &amp; Sftware</b>				
5022170	Other Computer Equipment	106.20	-	(106.20)	0.00%
	<b>Total Computer Hrdware &amp; Sftware</b>	106.20	-	(106.20)	0.00%
<b>5022200</b>	<b>Educational &amp; Cultural Equip</b>				
5022240	Reference Equipment	-	43.00	43.00	0.00%
	<b>Total Educational &amp; Cultural Equip</b>	-	43.00	43.00	0.00%
<b>5022600</b>	<b>Office Equipment</b>				
5022610	Office Appurtenances	-	21.00	21.00	0.00%
	<b>Total Office Equipment</b>	-	21.00	21.00	0.00%
<b>5022700</b>	<b>Specific Use Equipment</b>				
5022710	Household Equipment	14.03	-	(14.03)	0.00%
5022740	Non Power Rep & Maint- Equip	1.03	-	(1.03)	0.00%
	<b>Total Specific Use Equipment</b>	15.06	-	(15.06)	0.00%
	<b>Total Equipment</b>	121.26	64.00	(57.26)	189.47%
	<b>Total Expenditures</b>	168,681.27	277,768.22	109,086.95	60.73%
	<b>Allocated Expenditures</b>				
20100	Behavioral Science Exec	86,522.44	92,066.00	5,543.56	93.98%
30100	Data Center	56,906.53	83,092.99	26,186.46	68.49%
30200	Human Resources	9,724.28	8,985.15	(739.13)	108.23%
30300	Finance	54,170.20	56,353.91	2,183.71	96.13%
30400	Director's Office	18,383.78	20,248.44	1,864.65	90.79%
30500	Enforcement	91,463.46	105,678.88	14,215.42	86.55%
30600	Administrative Proceedings	106,215.43	32,147.18	(74,068.25)	330.40%
30700	Impaired Practitioners	293.50	1,600.94	1,307.44	18.33%
30800	Attorney General	1,502.18	761.48	(740.71)	197.27%

Virginia Department of Health Professions  
 Revenue and Expenditures Summary  
 Department 11000 - Social Work  
 For the Period Beginning July 1, 2020 and Ending May 31, 2021

Account Number	Account Description	Amount	Budget	Amount Under/(Over)	
				Budget	% of Budget
30900	Board of Health Professions	14,884.59	15,241.40	356.81	97.66%
31100	Maintenance and Repairs	246.88	1,542.21	1,295.34	16.01%
31300	Emp. Recognition Program	144.31	603.84	459.53	23.90%
31400	Conference Center	1,021.03	223.45	(797.58)	456.94%
31500	Pgm Devlpmnt & Implmentn	7,090.40	9,078.26	1,987.86	78.10%
	<b>Total Allocated Expenditures</b>	<u>448,569.02</u>	<u>427,624.13</u>	<u>(20,944.89)</u>	<u>104.90%</u>
	<b>Net Revenue in Excess (Shortfall) of Expenditures</b>	<u>\$ (42,690.29)</u>	<u>\$ 95,740.16</u>	<u>\$ 138,430.45</u>	<u>44.59%</u>

## Virginia Department of Health Professions

## Revenue and Expenditures Summary

## Department 11000 - Social Work

For the Period Beginning July 1, 2020 and Ending May 31, 2021

Account Number	Account Description	July	August	September	October	November	December	January	February	March	April
4002400	Fee Revenue										
4002401	Application Fee	22,745.00	26,070.00	24,555.00	24,590.00	19,510.00	20,485.00	24,725.00	25,285.00	28,985.00	23,200.00
4002406	License & Renewal Fee	13,160.00	2,385.00	960.00	1,835.00	605.00	760.00	965.00	380.00	630.00	915.00
4002407	Dup. License Certificate Fee	475.00	260.00	255.00	125.00	190.00	130.00	135.00	75.00	430.00	145.00
4002409	Board Endorsement - Out	825.00	500.00	725.00	825.00	375.00	675.00	850.00	750.00	975.00	1,050.00
4002421	Monetary Penalty & Late Fees	915.00	585.00	780.00	915.00	390.00	135.00	585.00	585.00	1,110.00	660.00
4002432	Misc. Fee (Bad Check Fee)	-	-	-	-	-	-	-	-	-	-
	Total Fee Revenue	38,120.00	29,800.00	27,275.00	28,290.00	21,070.00	22,185.00	27,260.00	27,075.00	32,130.00	25,970.00
4003000	Sales of Prop. & Commodities										
4003020	Misc. Sales-Dishonored Payments	-	-	-	-	-	-	-	-	-	-
	Total Sales of Prop. & Commodities	-	-	-	-	-	-	-	-	-	-
	Total Revenue	38,120.00	29,800.00	27,275.00	28,290.00	21,070.00	22,185.00	27,260.00	27,075.00	32,130.00	25,970.00
5011000	Personal Services										
5011100	Employee Benefits										
5011110	Employer Retirement Contrib.	1,014.42	692.10	1,603.21	1,088.72	1,088.72	1,088.72	1,485.34	574.23	1,098.26	1,098.26
5011120	Fed Old-Age Ins- Sal St Emp	693.35	652.27	615.71	667.05	652.75	666.99	647.56	660.03	662.69	681.54
5011140	Group Insurance	100.75	67.68	146.64	107.16	107.16	107.16	146.66	67.66	108.30	108.30
5011150	Medical/Hospitalization Ins.	1,030.50	1,374.00	1,374.00	1,374.00	1,374.00	-	1,374.00	1,374.00	1,374.00	1,374.00
5011160	Retiree Medical/Hospitalizatn	86.10	56.56	122.56	89.56	89.56	89.56	122.56	56.56	90.52	90.52
5011170	Long term Disability Ins	46.45	30.80	66.75	48.78	48.78	48.78	66.74	30.81	49.32	49.32
	Total Employee Benefits	2,971.57	2,873.41	3,928.87	3,375.27	3,360.97	2,001.21	3,842.86	2,763.29	3,383.09	3,401.94
5011200	Salaries										
5011230	Salaries, Classified	9,047.61	7,996.18	7,996.18	7,996.18	7,996.18	7,996.18	7,996.18	8,039.65	8,083.12	8,083.12
5011250	Salaries, Overtime	254.99	841.46	369.74	1,019.96	832.97	764.97	764.97	883.97	875.46	1,121.95
	Total Salaries	9,302.60	8,837.64	8,365.92	9,016.14	8,829.15	8,761.15	8,761.15	8,923.62	8,958.58	9,205.07
5011340	Specified Per Diem Payment	-	-	-	-	100.00	550.00	200.00	-	250.00	450.00
5011380	Deferred Compnstn Match Pmts	42.00	28.00	28.00	28.00	28.00	28.00	28.00	28.00	28.00	28.00
	Total Special Payments	42.00	28.00	28.00	28.00	128.00	578.00	228.00	28.00	278.00	478.00



## Virginia Department of Health Professions

## Revenue and Expenditures Summary

## Department 11000 - Social Work

For the Period Beginning July 1, 2020 and Ending May 31, 2021

Account Number	Account Description	July	August	September	October	November	December	January	February	March	April
5013110	Apparel Supplies	3.81	-	4.25	-	-	-	4.43	-	-	-
5013120	Office Supplies	87.54	101.35	101.02	-	189.03	268.49	146.41	44.34	34.76	211.95
	Total Administrative Supplies	91.35	101.35	105.27	-	189.03	268.49	150.84	44.34	34.76	211.95
5013400	Medical and Laboratory Supp.										
5013420	Medical and Dental Supplies	-	-	-	-	-	1.75	-	-	-	-
	Total Medical and Laboratory Supp.	-	-	-	-	-	1.75	-	-	-	-
5013500	Repair and Maint. Supplies										
5013510	Building Repair & Maint Materl	-	4.60	-	-	-	-	-	-	-	-
5013520	Custodial Repair & Maint Matr	-	0.64	-	-	-	-	-	-	-	-
	Total Repair and Maint. Supplies	-	5.24	-	-	-	-	-	-	-	-
	Total Supplies And Materials	91.35	106.59	105.27	-	189.03	270.24	150.84	44.34	34.76	211.95
5015000	Continuous Charges										
5015300	Operating Lease Payments										
5015340	Equipment Rentals	51.40	48.70	48.70	2.51	97.40	48.70	51.40	-	97.40	51.21
5015350	Building Rentals	-	-	-	4.80	-	4.80	-	-	4.80	4.80
5015390	Building Rentals - Non State	1,072.80	1,091.93	1,047.75	995.97	1,056.70	995.12	987.49	1,037.59	989.05	1,049.38
	Total Operating Lease Payments	1,124.20	1,140.63	1,096.45	1,003.28	1,154.10	1,048.62	1,038.89	1,037.59	1,091.25	1,105.39
	Total Continuous Charges	1,124.20	1,140.63	1,096.45	1,003.28	1,154.10	1,048.62	1,038.89	1,037.59	1,091.25	1,105.39
5022000	Equipment										
5022170	Other Computer Equipment	-	-	96.49	(37.66)	47.37	-	-	-	-	-
	Total Computer Hrdware & Sftware	-	-	96.49	(37.66)	47.37	-	-	-	-	-
5022710	Household Equipment	-	-	-	-	-	-	-	-	-	-
5022740	Non Power Rep & Maint- Equip	-	-	-	-	-	-	1.03	-	-	-
	Total Specific Use Equipment	-	-	-	-	-	-	1.03	-	-	-
	Total Equipment	-	-	96.49	(37.66)	47.37	-	1.03	-	-	-

## Virginia Department of Health Professions

## Revenue and Expenditures Summary

## Department 11000 - Social Work

For the Period Beginning July 1, 2020 and Ending May 31, 2021

Account Number	Account Description	July	August	September	October	November	December	January	February	March	April
Total Expenditures		20,850.69	14,028.17	14,582.77	15,466.37	14,570.34	14,307.93	15,197.96	13,781.78	14,774.95	15,213.88
Allocated Expenditures											
20100	Behavioral Science Executive Director	10,768.24	7,247.75	7,292.72	7,591.50	7,646.62	6,960.25	7,869.34	7,962.52	7,742.17	7,848.73
20200	Opt/Vet-Med/ASLP Executive Director	-	-	-	-	-	-	-	-	-	-
20400	Nursing / Nurse Aide	-	-	-	-	-	-	-	-	-	-
20600	Funeral/LTCA/PT Executive Director	-	-	-	-	-	-	-	-	-	-
30100	Technology and Business Services	6,699.39	4,836.15	5,511.40	4,231.99	3,311.52	7,677.20	7,857.75	4,842.73	5,241.01	3,774.68
30200	Human Resources	40.87	48.00	56.66	8,658.64	84.00	152.61	159.90	127.05	126.92	137.26
30300	Finance	5,615.21	4,349.26	4,591.83	7,314.07	2,313.82	4,475.69	5,002.74	5,194.05	5,166.46	4,848.68
30400	Director's Office	2,056.73	1,541.32	1,547.37	1,561.27	1,781.00	1,480.64	1,772.50	1,630.81	1,620.97	1,692.29
30500	Enforcement	16,123.19	11,980.00	11,700.80	9,669.37	6,658.18	5,344.68	5,911.78	6,591.95	6,451.23	6,719.69
30600	Administrative Proceedings	13,979.84	635.66	7,581.71	5,241.92	9,904.27	12,648.80	12,458.35	7,910.09	13,685.55	10,136.05
30700	Health Practitioners' Monitoring Program	35.89	240.03	1.91	2.49	2.13	2.00	1.60	1.61	2.04	2.15
30800	Attorney General	159.28	-	-	359.32	-	-	624.26	-	-	359.32
30900	Board of Health Professions	1,653.52	1,040.74	1,882.22	974.11	2,096.71	868.11	1,125.20	1,718.54	1,097.59	1,368.79
31000	SRTA	-	-	-	-	-	-	-	-	-	-
31100	Maintenance and Repairs	-	-	246.88	-	-	-	-	-	-	-
31300	Employee Recognition Program	-	3.09	-	-	1.05	0.65	-	44.07	7.61	27.44
31400	Conference Center	2.17	10.39	78.18	(2.12)	(7.75)	(156.42)	2.60	219.89	634.50	150.77
31500	Program Development and Implementation	796.95	535.80	654.96	514.90	739.52	754.83	753.34	605.08	574.37	580.38
31600	Healthcare Workforce	-	-	-	-	-	-	-	-	-	-
31800	CBC (Criminal Background Check Unit)	-	-	-	-	-	-	-	-	-	-
Total Allocated Expenditures		57,931.27	32,468.19	41,146.62	46,117.48	34,531.09	40,209.03	43,539.38	36,848.39	42,350.42	37,646.23
Net Revenue in Excess (Shortfall) of Expenditures		\$ (40,661.96)	\$ (16,696.36)	\$ (28,454.39)	\$ (33,293.85)	\$ (28,031.43)	\$ (32,331.96)	\$ (31,477.34)	\$ (23,555.17)	\$ (24,995.37)	\$ (26,890.11)

## Virginia Department of Health Professions

## Revenue and Expenditures Summary

## Department 11000 - Social Work

For the Period Beginning July 1, 2020 and Ending May 31, 2021

Account Number	Account Description	May	Total
4002400	Fee Revenue		
4002401	Application Fee	27,010.00	267,160.00
4002406	License & Renewal Fee	265,665.00	288,260.00
4002407	Dup. License Certificate Fee	655.00	2,875.00
4002409	Board Endorsement - Out	1,200.00	8,750.00
4002421	Monetary Penalty & Late Fees	780.00	7,440.00
4002432	Misc. Fee (Bad Check Fee)	50.00	50.00
	Total Fee Revenue	295,360.00	574,535.00
4003000	Sales of Prop. & Commodities		
4003020	Misc. Sales-Dishonored Payments	25.00	25.00
	Total Sales of Prop. & Commodities	25.00	25.00
	Total Revenue	295,385.00	574,560.00
5011000	Personal Services		
5011100	Employee Benefits		
5011110	Employer Retirement Contrib.	1,098.26	11,930.24
5011120	Fed Old-Age Ins- Sal St Emp	671.80	7,271.74
5011140	Group Insurance	108.30	1,175.77
5011150	Medical/Hospitalization Ins.	1,374.00	13,396.50
5011160	Retiree Medical/Hospitalizatn	90.52	984.58
5011170	Long term Disability Ins	49.32	535.85
	Total Employee Benefits	3,392.20	35,294.68
5011200	Salaries		
5011230	Salaries, Classified	8,083.12	89,313.70
5011250	Salaries, Overtime	994.46	8,724.90
	Total Salaries	9,077.58	98,038.60
5011340	Specified Per Diem Payment	50.00	1,600.00
5011380	Deferred Compnstn Match Pmts	28.00	322.00
	Total Special Payments	78.00	1,922.00

## Virginia Department of Health Professions

## Revenue and Expenditures Summary

## Department 11000 - Social Work

For the Period Beginning July 1, 2020 and Ending May 31, 2021

Account Number	Account Description	May	Total
5011600	Terminatn Personal Svce Costs		
5011660	Defined Contribution Match - Hy	70.54	741.20
	Total Terminatn Personal Svce Costs	<u>70.54</u>	<u>741.20</u>
	Total Personal Services	12,618.32	135,996.48
5012000	Contractual Svcs		-
5012100	Communication Services		-
5012120	Outbound Freight Services	-	10.38
5012140	Postal Services	716.61	5,541.75
5012150	Printing Services	-	2.79
5012160	Telecommunications Svcs (VITA)	32.06	332.24
5012190	Inbound Freight Services	0.25	19.46
	Total Communication Services	<u>748.92</u>	<u>5,906.62</u>
5012400	Mgmnt and Informational Svcs		
5012420	Fiscal Services	21.73	6,671.81
5012440	Management Services	22.30	149.71
	Total Mgmnt and Informational Svcs	<u>44.03</u>	<u>6,821.52</u>
5012500	Repair and Maintenance Svcs		
5012510	Custodial Services	29.38	323.22
5012530	Equipment Repair & Maint Srvc	2.20	1,018.68
	Total Repair and Maintenance Svcs	<u>31.58</u>	<u>1,341.90</u>
5012600	Support Services		
5012660	Manual Labor Services	116.29	327.99
5012670	Production Services	779.55	1,085.24
5012680	Skilled Services	296.18	3,777.96
	Total Support Services	<u>1,192.02</u>	<u>5,191.19</u>
	Total Contractual Svcs	2,016.55	19,261.23
5013000	Supplies And Materials		
5013100	Administrative Supplies		-

## Virginia Department of Health Professions

## Revenue and Expenditures Summary

## Department 11000 - Social Work

For the Period Beginning July 1, 2020 and Ending May 31, 2021

Account Number	Account Description	May	Total
5013110	Apparel Supplies	-	12.49
5013120	Office Supplies	76.86	1,261.75
	Total Administrative Supplies	76.86	1,274.24
5013400	Medical and Laboratory Supp.		
5013420	Medical and Dental Supplies	-	1.75
	Total Medical and Laboratory Supp.	-	1.75
5013500	Repair and Maint. Supplies		
5013510	Building Repair & Maint Materl	-	4.60
5013520	Custodial Repair & Maint Matr	-	0.64
	Total Repair and Maint. Supplies	-	5.24
	Total Supplies And Materials	76.86	1,281.23
5015000	Continuous Charges		
5015300	Operating Lease Payments		
5015340	Equipment Rentals	48.70	546.12
5015350	Building Rentals	-	19.20
5015390	Building Rentals - Non State	1,131.97	11,455.75
	Total Operating Lease Payments	1,180.67	12,021.07
	Total Continuous Charges	1,180.67	12,021.07
5022000	Equipment		
5022170	Other Computer Equipment	-	106.20
	Total Computer Hrdware & Sftware	-	106.20
5022710	Household Equipment	14.03	14.03
5022740	Non Power Rep & Maint- Equip	-	1.03
	Total Specific Use Equipment	14.03	15.06
	Total Equipment	14.03	121.26

## Virginia Department of Health Professions

## Revenue and Expenditures Summary

## Department 11000 - Social Work

For the Period Beginning July 1, 2020 and Ending May 31, 2021

Account Number	Account Description	May	Total
	Total Expenditures	<u>15,906.43</u>	168,681.27
	Allocated Expenditures		
20100	Behavioral Science Executive Director	7,592.62	86,522.44
20200	Opt/Vet-Med/ASLP Executive Director	-	-
20400	Nursing / Nurse Aide	-	-
20600	Funeral/LTCA/PT Executive Director	-	-
30100	Technology and Business Services	2,922.72	56,906.53
30200	Human Resources	132.37	9,724.28
30300	Finance	5,298.37	54,170.20
30400	Director's Office	1,698.88	18,383.78
30500	Enforcement	4,312.59	91,463.46
30600	Administrative Proceedings	12,033.18	106,215.43
30700	Health Practitioners' Monitoring Program	1.64	293.50
30800	Attorney General	-	1,502.18
30900	Board of Health Professions	1,059.07	14,884.59
31000	SRTA	-	-
31100	Maintenance and Repairs	-	246.88
31300	Employee Recognition Program	60.40	144.31
31400	Conference Center	88.80	1,021.03
31500	Program Development and Implementation	580.28	7,090.40
31600	Healthcare Workforce	-	-
31800	CBC (Criminal Background Check Unit)	-	-
	Total Allocated Expenditures	<u>35,780.92</u>	448,569.02
	Net Revenue in Excess (Shortfall) of Expenditures	<u>\$ 243,697.65</u>	<u>\$ (42,690.29)</u>

## Staff Discipline Reports

02/26/2021 to 07/07/2021

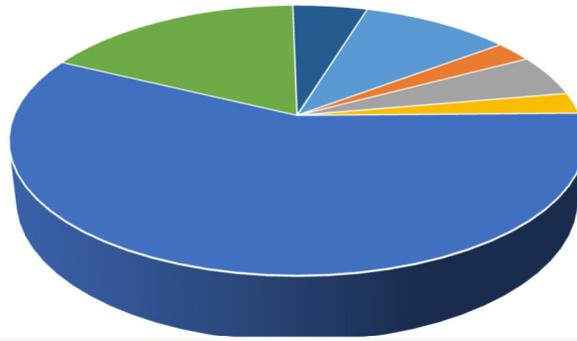
NEW CASES RECEIVED IN BOARD 02/26/2021 TO 07/07/2021				
	Counseling	Psychology	Social Work	BSU Total
Cases <b>Received</b> for Board review	152	56	41	<b>249</b>

OPEN CASES (as of 07/07/2021)				
Open Case Stage	Counseling	Psychology	Social Work	BSU Total
Probable Cause Review	104	91	7	
Scheduled for Informal Conferences	10	5	16	
Scheduled for Formal Hearings	6	1	0	
Other (on hold, pending settlement, etc)	26	6	2	
Cases with APD for processing (IFC, FH, Consent Order)	6	0	4	
<b>TOTAL CASES AT BOARD LEVEL</b>	<b>152</b>	<b>103</b>	<b>29</b>	<b>284</b>
<b>OPEN INVESTIGATIONS</b>	<b>69</b>	<b>32</b>	<b>14</b>	<b>115</b>
<b>TOTAL OPEN CASES</b>	<b>221</b>	<b>135</b>	<b>43</b>	<b>399</b>

UPCOMING CONFERENCES AND HEARINGS	
<b>Informal Conferences</b>	Conferences Held: -----  Scheduled Conferences: September 24, 2021 October 15, 2021
<b>Formal Hearings</b>	Hearings Held: -----  Scheduled Hearings: Following scheduled board meetings, as necessary

<b>CASES CLOSED (02/26/2021 to 07/07/2021)</b>	
Closed – <b>no violation</b>	36
Closed – <b>undetermined</b>	3
Closed – <b>violation</b>	1
Credentials/Reinstatement – <b>Denied</b>	0
Credentials/Reinstatement – <b>Approved</b>	0
<b>TOTAL CASES CLOSED</b>	<b>40</b>

### Closed Case Categories



■ Abuse/Abandonment/Neglect (4)  
1 Violation

■ Business Practice Issues (1)

■ Confidentiality Breach (2)

■ Inability to Safely Practice (1)

■ No jurisdiction (23)

■ Standard of Care-Diagnosis/Treatment (7)

■ Unlicensed Activity (2)

<b>AVERAGE CASE PROCESSING TIMES (counted on closed cases)</b>	
Average time for case closures	<b>79</b>
Avg. time in Enforcement (investigations)	56
Avg. time in APD (IFC/FH preparation)	19
Avg. time in Board (includes hearings, reviews, etc).	23
Avg. time with board member (probable cause review)	3

**2021 STATISTICAL LICENSURE INFORMATION**  
**(March 1, 2021- March 31, 2021)**

- Number of Social Work Licenses/Registrations Issued in March 2021

2021 (Mar 1- Mar 31)	Licensed Clinical Social Workers	Endorsement	66
		Examination	37
		Reinstatement	3
	Licensed Master's Social Worker	Endorsement	16
		Examination	18
		Reinstatement	0
	Licensed Baccalaureate Social Worker	Endorsement	2
		Examination	2
		Reinstatement	0
	LCSW Registration of Supervision	Add/Change	75
		Initial Application	53
	<b>Total # of Social Work Licenses/Registrations Issued:</b>		

- 2021 Online Applications Received

(Mar 1- Mar 31)	By Endorsement	By Examination	Total
LCSW	56	48	104
LMSW	16	19	35
LBSW	2	2	4

(Mar 1- Mar 31)	Initial Application	By Add/Change	Total
LCSW Registration of Supervision	54	57	111

**Total # of online applications received in March 2021: 254**

**Social Work 2021 Total Count- all license types (Mar 1, 2021- Mar 31, 2021)**

New Applications (initial, add/change, exam & endorsement- paper & online)	275
Duplicate License Request (LCSW- 12; LMSW- 3; LBSW- 0)	15
Duplicate Wall Certificate Request (LCSW- 6; LMSW- 0; LBSW- 0)	6
Verification of VA License Request (LCSW- 30; LMSW-9; LBSW- 0)	39
Inactive Renewal (LCSW- 0; LMSW- 0; LBSW- 0)	0
Inactive to Active (LCSW- 0; LMSW- 0; LBSW- 0)	0
Reinstatement Applications (LCSW- 5; LMSW- 1; LBSW- 0)	6

Renewals (LCSW- 6; LMSW- 0; LBSW- 0; Registered SW- 0; Associate SW-0)	6
Late Renewals (LCSW- 0; LMSW- 0; LBSW- 0)	0
Address Changes	51

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**2021 STATISTICAL LICENSURE INFORMATION**  
**(April 1, 2021- April 30, 2021)**

- Number of Social Work Licenses/Registrations Issued in April 2021

2021 (Apr 1- Apr 30)	Licensed Clinical Social Workers	Endorsement	59
		Examination	45
		Reinstatement	5
	Licensed Master's Social Worker	Endorsement	15
		Examination	12
		Reinstatement	2
	Licensed Baccalaureate Social Worker	Endorsement	1
		Examination	1
		Reinstatement	0
	LCSW Registration of Supervision	Add/Change	15
		Initial Application	15
	<b>Total # of Social Work Licenses/Registrations Issued:</b>		

- 2021 Online Applications Received

(Apr 1- Apr 30)	By Endorsement	By Examination	Total
LCSW	56	28	84
LMSW	10	20	30
LBSW	2	4	6

(Apr 1- Apr 30)	Initial Application	By Add/Change	Total
LCSW Registration of Supervision	54	34	88

**Total # of online applications received in April 2021: 208**

**Social Work 2021 Total Count- all license types (Apr 1, 2021- Apr 30, 2021)**

New Applications (initial, add/change, exam & endorsement- paper & online)	222
Duplicate License Request (LCSW- 6; LMSW- 2; LBSW- 0)	8
Duplicate Wall Certificate Request (LCSW- 1; LMSW- 0; LBSW- 0)	1
Verification of VA License Request (LCSW- 37; LMSW-4; LBSW- 0)	41
Inactive Renewal (LCSW- 0; LMSW- 0; LBSW- 0)	0
Inactive to Active (LCSW- 0; LMSW- 0; LBSW- 0)	0
Reinstatement Applications (LCSW- 2; LMSW- 2; LBSW- 0)	4

Renewals (LCSW- 7; LMSW- 3; LBSW- 0; Registered SW- 0; Associate SW-0)	10
Late Renewals (LCSW- 0; LMSW- 0; LBSW- 0)	0
Address Changes	59

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**2021 STATISTICAL LICENSURE INFORMATION**  
**(May 1, 2021- May 31, 2021)**

- Number of Social Work Licenses/Registrations Issued in May 2021

2021 (May 1- May 31)	Licensed Clinical Social Workers	Endorsement	37
		Examination	42
		Reinstatement	3
	Licensed Master's Social Worker	Endorsement	7
		Examination	12
		Reinstatement	1
	Licensed Baccalaureate Social Worker	Endorsement	0
		Examination	0
		Reinstatement	0
	LCSW Registration of Supervision	Add/Change	37
		Initial Application	46
	<b>Total # of Social Work Licenses/Registrations Issued:</b>		<b>185</b>

- 2021 Online Applications Received

(May 1- May 31)	By Endorsement	By Examination	Total
LCSW	61	35	96
LMSW	11	30	41
LBSW	1	5	6

(May 1- May 31)	Initial Application	By Add/Change	Total
LCSW Registration of Supervision	83	26	109

**Total # of online applications received in May 2021: 252**

**Social Work 2021 Total Count- all license types (May 1, 2021- May, 2021)**

New Applications (initial, add/change, exam & endorsement- paper & online)	258
Duplicate License Request (LCSW- 28; LMSW- 2; LBSW- 0)	30
Duplicate Wall Certificate Request (LCSW- 6; LMSW- 0; LBSW- 0)	6
Verification of VA License Request (LCSW- 44; LMSW-2; LBSW- 0)	46
Inactive Renewal (LCSW- 0; LMSW- 0; LBSW- 0)	0
Inactive to Active (LCSW- 68; LMSW- 6; LBSW- 0)	74
Reinstatement Applications (LCSW- 4; LMSW- 0; LBSW- 0)	4
Renewals (LCSW- 2,706; LMSW- 279; LBSW- 12; Registered SW- 3; Associate SW-0)	3,000

Late Renewals (LCSW- 0; LMSW- 0; LBSW- 0)	0
Address Changes	48

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**2021 STATISTICAL LICENSURE INFORMATION**  
**(June 1, 2021- June 30, 2021)**

- Number of Social Work Licenses/Registrations Issued in June 2021

2021 (Jun 1- Jun 30)	Licensed Clinical Social Workers	Endorsement	58
		Examination	36
		Reinstatement	7
	Licensed Master's Social Worker	Endorsement	9
		Examination	8
		Reinstatement	0
	Licensed Baccalaureate Social Worker	Endorsement	1
		Examination	2
		Reinstatement	0
	LCSW Registration of Supervision	Add/Change	26
		Initial Application	63
	<b>Total # of Social Work Licenses/Registrations Issued:</b>		

- 2021 Online Applications Received

(Jun 1- Jun 30)	By Endorsement	By Examination	Total
LCSW	60	44	104
LMSW	16	33	49
LBSW	2	2	4

(Jun 1- Jun 30)	Initial Application	By Add/Change	Total
LCSW Registration of Supervision	79	40	119

**Total # of online applications received in June 2021: 276**

**Social Work 2020 Total Count- all license types (June 1, 2021- June 30, 2021)**

New Applications (initial, add/change, exam & endorsement- paper & online)	289
Duplicate License Request (LCSW- 45; LMSW- 5; LBSW- 0)	50
Duplicate Wall Certificate Request (LCSW- 9; LMSW- 4; LBSW- 0)	13
Verification of VA License Request (LCSW- 36; LMSW-6; LBSW- 0)	42
Inactive Renewal (LCSW- 110; LMSW- 14; LBSW- 0)	124
Inactive to Active (LCSW- 2; LMSW- 0; LBSW- 0)	2
Reinstatement Applications (LCSW- 7; LMSW- 0; LBSW- 0)	7

Renewals (LCSW- 4,139; LMSW- 380; LBSW- 7; Registered SW- 4; Associate SW-1)	4,531
Late Renewals (LCSW- 0; LMSW- 0; LBSW- 0)	0
Address Changes	46

- **Current** active & **current** inactive Social Work Licenses/Registrations as of 07/12/2021:

	Current Active	Current Inactive	Total
Associate Social Worker	1	0	1
Licensed Clinical Social Worker	7,527	179	7,706
Licensed Masters Social Worker	806	22	828
Licensed Baccalaureate Social Worker	29	0	29
Registered Social Worker	7	0	7
Registration of Supervision	2,738	0	2,738
			<b>Total 11,309</b>