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JANICE K. BREWER
Governor

TOBI ZAVALA
Interim Executive Director

MEMORANDUM

TO: Rules Subcommittee
FROM: Donna Dalton
DATE: 4/22/2014
RE: Meeting documents for 4/24/2014

Following you will find the documents we'll be reviewing at the rules subcommittee meeting on 4/24/2014. The majority of the meeting will be spent discussing clinical supervision. Several of the documents are intended for resource purposes as examples of how other state boards handle this subject.

ATTACHMENT A Social Work credentialing committee's definition of "Clinical Social Work"

ATTACHMENT B R4-6-1101, R4-6-1102, and R4-6-1103 with feedback from credentialing committees as requested

ATTACHMENT C Excerpt from new statute 32-3253 pertaining to Supervision

ATTACHMENT D Sample of current supervision register from website

ATTACHMENT E Feedback from AZ Council for Human Service Providers on Supervision

ATTACHMENT F Current rule for R4-6-212

ATTACHMENT G Current rule for R4-6-210, and statute 32-3271

ATTACHMENT H Current rule for R4-6-211

ATTACHMENT I Current rule for R4-6-404

ATTACHMENT J Current rule for R4-6-504

ATTACHMENT K Current rule for R4-6-604

ATTACHMENT L Current rule for R4-6-701(D-I), and R4-6-706

ATTACHMENT M Kansas examples

ATTACHMENT N Oregon examples

ATTACHMENT O Texas examples

ATTACHMENT

A

“Clinical Social Work” is defined as social work involving assessment, diagnosis, and treatment of individuals, couples, families, and groups.

Draft

ATTACHMENT

B

R4-6-1101. Consent For Treatment

A licensee shall:

1. Provide treatment to a client only in the context of a professional relationship based on valid informed consent for treatment;
2. Document in writing for each client served the following elements of informed consent for treatment:
 - a. Purpose of treatment;
 - b. Genal procedures to be used in treatment, including benefits, limitations, and potential risks;
 - c. A client's right to have client records and all information regarding the client kept confidential and an explanation of the limitations on confidentiality;
 - d. Notificatieron of the licensee's supervision or involvement with a treatment team of professionals;
 - e. Methods for a client to obtain information about the client's records;
 - f. The client's right to participate in treatment decisions and in the development and periodic review and revision of the client's treatment plan;
 - g. A client's right to refuse any recommended treatment or to withdraw informed consent to treatment and to be advised of the consequences of such refusal or withdrawal; and
 - h. The client's right to be informed of all fees that the client is required to pay and the licensee's refund and collection policies and procedures.
3. Obtain a dated and signed informed consent for treatment from a client or a client's legal representative before providing treatment to a client, or and when substantial changes occur in the elements listed in subsection (2)(a-h).
4. Inform a client of the limitations and risks associated with providing treatment via electronic media before providing such services;
5. Obtain a dated and signed informed consent for treatment from a client or a client's legal representative before providing treatment to the client via electronic media; and
6. Obtain a dated and signed informed consent for treatment from a client or a client's legal representative before audio or video taping a client or permitting a third party to observe treatment provided to a client.

Historical Note

New Section made by exempt rulemaking at 10 A.A.R. 2700, effective July 1, 2004 (Supp. 04-2).

R4-6-1102. Treatment Plan

A licensee shall:

1. Work jointly with each client served or a client's legal representative to prepare an integrated, individualized, written treatment plan, based on the licensee's provisional or principal diagnosis and assessment of behavior and the treatment needs, abilities, resources, and circumstances of the client, that includes:
 - a. One or more treatment goals;
 - b. One or more treatment methods;
 - c. The date when the client's treatment plan shall be reviewed;
 - d. If a discharge date has been determined, the aftercare needed after discharge;
 - e. The signature and date signed by the client or the client's legal representative; and
 - f. The signature and date signed by the licensee.
2. At a minimum, review and reassess the treatment plan according to the review date specified in the treatment plan and at least annually with each client or the client's legal representative to ensure the continued viability and effectiveness of the treatment plan and, where appropriate, a description of the services the client may need after terminating treatment with the licensee.
3. Ensure that all ~~clients are advised and understand the risks and benefits of~~ treatment plan updates and revisions. Modifications to the treatment plan shall include the signature and date signed by the client or the client's legal representative and the signature and date signed by the licensee.
4. Upon written request, provide a client or a client's legal representative an explanation of all aspects of the client's condition and treatment.
5. Ensure that a client's treatment is in accordance with the client's treatment plan.

Comment [DD1]: MFT said not needed

Historical Note

New Section made by exempt rulemaking at 10 A.A.R. 2700, effective July 1, 2004 (Supp. 04-2).

R4-6-1103. Client Record

A. A licensee shall ensure that a client record is maintained for each client and:

1. Is protected at all times from loss, damage or alteration;
2. Is confidential;
3. Is legible and recorded in ink or electronically recorded;
4. Contains entries that are dated and **includesigned with** the ~~first and last name~~ **AND SIGNATURE** of the individual signing the document or electronically authenticated by the individual making the entry;
5. Is current and accurate;
6. Contains original documents and original signature, initials or authentication; and
7. Is disposed of in a manner that protects client confidentiality.

B. A licensee shall ensure that a client record contains the following, if applicable:

1. The client's name, address, and **home tele**phone number;
2. Documentation of informed consent to treatment;
3. Documentation of the treatment plan and all updates and revisions to the treatment plan;
4. Information or records provided by or obtained from another person regarding the client;
5. Written authorization to release a client record or information;
6. Documentation of requests for client records and of the resolution of those requests;
7. Documentation of the release of any information in the client record;
8. Progress notes;
9. Documentation of **telephone, written, or face-to-face** contact with the client or another individual that relates to the client's health, safety, welfare, or treatment;
10. Documentation of behavioral health services provided to the client;
11. Other information or documentation required by state or federal law.
12. Financial records, including:

Comment [DD2]: MFT says leave in

- a. Records of financial arrangements for the cost of providing behavioral health services;
 - b. Measures that will be taken for nonpayment of the cost of behavioral health services provided by the licensee.
- C. A licensee shall make client records in the licensee's possession promptly available to another health professional, the client or the client's legal representative in accordance with A.R.S. § 12-2293.
- D. A licensee shall make client records of a minor client in the licensee's possession promptly available to the minor client's parent in accordance with A.R.S. § 25-403.06.
- E. A licensee shall retain records in accordance with A.R.S. § 12-2297.
- F. A licensee shall ensure the safety and confidentiality of any client records the licensee creates, maintains, transfers, or destroys whether the records are written, taped, computerized, or stored in any other medium.
- G. A licensee shall ensure that a client's privacy and the confidentiality of information provided by the client is maintained by subordinates, including employees, supervisees, clerical assistants, and volunteers.
- H. A licensee shall ensure that a **EACH** progress note includes the following:
1. The date a behavioral health service was provided;
 2. The duration of time spent providing the behavioral health service;
 3. If counseling services were provided, whether the counseling was individual counseling, family counseling or group counseling; and
 4. The **NAME**, signature, **CREDENTIALS** and date signed by the licensee who provided the behavioral health service.

Historical Note

New Section made by exempt rulemaking at 10 A.A.R. 2700, effective July 1, 2004 (Supp. 04-2).

ATTACHMENT

C

32-3253. Powers and duties NEW STATUTE

14. Adopt rules regarding the application for and approval of educational curricula of regionally accredited colleges or universities with a program not otherwise accredited by an organization or entity recognized by the board that are consistent with the requirements of this chapter and maintain a list of those programs. Approvals shall be valid for a period of five years if no changes of curricula are made that are inconsistent with the requirements of this chapter or board rule.

15. Maintain a registry of licensees who have met the educational requirements to provide supervision as required pursuant to this chapter to applicants in the same profession.

16. Adopt rules to allow approval of persons who wish to provide supervision pursuant to this chapter and who are not licensed by the board and who are licensed in a profession other than the profession in which the applicant is seeking licensure.

17. Recognize not more than four hundred hours of psychoeducation for work experience required pursuant to sections 32-3293, 32-3301, 32-3311 and 32-3321.

B. The board may join professional organizations and associations organized exclusively to promote the improvement of the standards of the practice of behavioral health, protect the health and welfare of the public or assist and facilitate the work of the board.

C. The board may enter into stipulated agreements with a licensee for the confidential treatment, rehabilitation and monitoring of chemical dependency or medical, psychiatric, psychological or behavioral health disorders in a program provided pursuant to subsection D of this section. A licensee who materially fails to comply with a program shall be terminated from the confidential program. Any records of the licensee who is terminated from a confidential program are no longer confidential or exempt from the public records law, notwithstanding any law to the contrary. Stipulated agreements are not public records if the following conditions are met:

1. The licensee voluntarily agrees to participate in the confidential program.
2. The licensee complies with all treatment requirements or recommendations including participation in approved programs.

3. The licensee refrains from professional practice until the return to practice has been approved by the treatment program and the board.

4. The licensee complies with all monitoring requirements of the stipulated agreement, including random bodily fluid testing.

5. The licensee's professional employer is notified of the licensee's chemical dependency or medical, psychiatric, psychological or behavioral health disorders and participation in the confidential program and is provided a copy of the stipulated agreement.

D. The board shall establish a confidential program for the monitoring of licensees who are chemically dependent or who have medical, psychiatric, psychological or behavioral health disorders that may impact their ability to safely practice and who enroll in a rehabilitation program that meets the criteria prescribed by the board. The licensee shall be responsible for the costs associated with rehabilitative services and monitoring. The board may take further action if a licensee refuses to enter into a stipulated agreement or fails to comply with the terms of a stipulated agreement. In order to protect the public health and safety, the confidentiality requirements of this subsection do not apply if a licensee does not comply with the stipulated agreement.

E. The board shall audio record all meetings and maintain all audio and video recordings or stenographic records of interviews and meetings for a period of three years from when the record was created.

ATTACHMENT

D

Supervisor's Name	Last	Supervisor's First Name	License Number	Compliant w/Clinical supervisor training	Non-Compliant	Compliant w/Clinical supervisor training	Non-Compliant	Compliant w/Clinical supervisor training	Non-Compliant
Earle		Marcus	LMFT-0012	7/1/04-10/31/14					
Eblen		Cristobal	Ph.D.1482	7/1/04-4/30/07	5/1/07-11/13/13	11/12/14/-4/30/15			
Egan		Kimberly	LPC-11838	10/1/04-9/30/06	10/1/06-9/7/08	10/08/08-9/30/14			
Eggsware		Stacy	LPC-11745	7/1/04-5/31/08	6/1/08-12/2/09	12/3/09-5/31/14			
Ehmann		Shelly	LPC-2472	7/1/04-4/30/08	5/1/08-3/2/12	3/3/12-4/30/14			
Eidson		Faith	LCSW-12459	3/1/08-2/28/14					
Elkins		Shoshana	LCSW-12449	2/1/08-1/1/14					
Ellis		Kellee	LPC-13765	10/1/11-9/30/13					
Ely		John	LPC-11865	11/1/04-10/31/06	11/1/06-2/21/07	2/22/07-10/31/10	11/1/10-3/26/12	3/27/10-10/31/14	
Ensdorff		Denise	LCSW-12535	6/1/08-5/31/14					
Erhart		Mary	LISAC-0874	7/1/04-6/30/08	7/1/08-10/23/09	10/24/09-6/30/14			
Erickson		Jodi	LCSW-10962	7/1/04-2/28/08	3/1/08-8/16/10	8/17/10-2/28/14	3/1/14-3/18/14	3/19/14-2/28/16	
Espinoza		Miguel	LISAC-10127	7/1/04-2/28/07	3/1/07-10/17/11	10/18/11-2/28/13			
Evangelist-Ajvix		Joyce	LPC-11123	7/1/04-1/31/08	2/1/08-2/16/09	2/17/09-1/31/12	2/1/12-2/21/13	2/22/13-1/31/16	
Evans		Joanne	LCSW-10437	7/1/04-7/31/14					
Fabian		Jill	LCSW-10470	7/1/04-8/31/14					
Fabian		Jill	LISAC-10027	7/1/04-5/31/14					
Fairchild		Janel	LPC-13320	9/1/09-8/31/13					
Faircloth		Ronald	LPC-11915	2/1/05-1/31/07	2/1/07-7/28/08	7/29/08-1/31/11	2/1/11-1/29/13	1/30/13-1/31/15	
Fancy		Krista	LCSW-10462	7/1/04-8/31/06	9/1/06-10/17/11	10/18/11-8/31/14			
Farnsworth		Russell	LCP-13948	3/1/12-4/30/16					
Feingold-Huff		Lori	LPC-10637	7/1/04-8/31/06	9/1/06-4/30/12	5/1/12-8/31/14			
Finecey		Michael	LPC-12362	7/1/06-6/30/14					
Finn		Kelly	LCSW-13043	7/1/10-6/30/14					
Finn		Kelly	LISAC-10886	7/1/04-3/31/08	4/1/08-8/16/10	8/17/10-5/31/14			
Fiscus		Georgina	LCSW-10635	7/1/04-4/30/13					
Fitzpatrick-Rodgers		Colleen	LISAC-1402	7/1/04-12/31/07	1/1/08-9/14/12	9/15/12-12/31/13			
Fleming		Mark	Ph.D-4404	2/9/12-4/30/13	5/1/13-11/12/13	11/13/13-4/30/15			
Flower		Susan	LCSW-12862	11/1/09-10/31/11	11/1/11-1/27/12	1/28/12-10/31/15			
Ford		Kelly	LPC-13568	10/1/10-9/30/12					
Follensbee		Jill	LPC-14462	12/1/13-11/30/15					
Foreman		Jeanine	LPC-10878	7/1/04-8/31/13					
Forrester		Connie	LCSW-13620	6/1/12-5/31/14					
Fortino		Juliet	LPC-10235	7/1/04-6/30/13	07/01/13-12/05/2013	12/06/2013-06/30/2015			

ATTACHMENT

E

COMMENTS OF ARIZONA COUNCIL OF HUMAN SERVICE PROVIDERS

RULES OF THE BOARD OF BEHAVIORAL HEALTH EXAMINERS

REGARDING SUPERVISED WORK EXPERIENCE

Arizona Revised Statutes Sections 32-3293, 3301, 3311 and 3321 provide that applicants for certain independent practice licenses issued by the BBHE shall document supervised work experience “that meets the requirements prescribed by the Board by rule.” Obtaining the appropriate number of supervised work hours represents a significant commitment of time and money by applicants. It is, therefore, vital that the applicant have a reasonable basis for determining that applicant’s activities meet the requirement of the statutes and rules. That can be accomplished in two ways. The first is by promulgating, to the extent possible, clear and unambiguous language in rules. The second is by providing for a method of verification so that applicants can have determined in advance whether the circumstances of supervised work experience meet the Board’s requirements.

The comments below address a number of the concerns of the Council regarding the existing rules (which are referred by number). We hope this will provide some assistance as the Rules Committee considers appropriate changes to rules related to supervised work. We submit these with the caveat that they are not exclusive but as considerations continue we may have other issues.

4-6-210 Supervision Requirements—General

1. This subsection prohibits supervision being provided by an immediate family member of an individual “whose objective assessment of the supervisee’s performance may be limited by a relationship with the supervisee” Neither definitions nor criteria are provided and there is no means provided for resolving questions of interpretation in advance.

3.b. Requires that the supervisee receive an “appropriate” level of supervision “as determined by the board.” Provides neither definition, criteria or means for resolving questions of interpretation in advance.

4-6-211 Direct Supervision Requirements

A.1 Provides supervisor must be employed by the same entity as the supervisee. Does this preclude either or both being independent agents with contracts with the entity?

B. Should applications for exemptions for the number of supervisees be reviewed by the Board or the Academic Review Committees?

4-6-212 Clinical Supervision Requirements

B. Same issue as 4-6-211 B.

C. Requires clinical supervisor to have “adequate experience, training and

competence". No definition, criteria or means for resolving questions of "adequacy" in advance. Licensing and continuing education should be sufficient.

F.1. What does "review" mean?

F. 5. and 6. There is no definition of "conflict of interest".

H. While limiting an applicant to four supervisors may, as a general rule, be appropriate there is no provision for exceptions.

L.

Are all continuing education requirements waived or only initial ones?

General comments:

References to "credentialing committees" should be removed.

References to "after July 12, 2006" can be removed.

ATTACHMENT

F

R4-6-212. Clinical Supervision Requirements

- A.** An individual shall provide clinical supervision to a maximum of 15 supervisees at the same time.
- B.** An applicant may submit a written request to the credentialing committee for an exemption from the requirement of subsection (A). The credentialing committee shall review the exemption request and the clinical supervisor's other job responsibilities to determine whether the clinical supervisor can provide an appropriate level of clinical supervision to more than 15 supervisees at the same time. The credentialing committee shall not grant an exemption request for more than 30 supervisees.
- C.** A clinical supervisor shall have experience, training, and competence adequate to perform and direct all services provided by the supervisee.
- D.** No more than 25 percent of the clinical supervision hours required for licensure as a professional counselor, marriage and family therapist, social worker, or substance abuse counselor may be acquired telephonically.
- E.** Clinical supervision acquired telephonically shall not be accepted for a communication lasting less than 30 minutes.
- F.** To be approved by the Board, clinical supervision of an applicant shall include all of the following:
 - 1. A review of ethical and legal requirements applicable to the supervisee's practice, including unprofessional conduct as defined in A.R.S. § 32-3251(12);
 - 2. Monitoring of the supervisee's activities to verify the supervisee is providing services safely and competently;
 - 3. Verification that the supervisee provides clients with appropriate written notice of clinical supervision, including the name and telephone number of the supervisee's clinical supervisor;
 - 4. Documentation written and maintained by the clinical supervisor for a minimum of seven years of all clinical supervision sessions that, for each clinical supervision session, at a minimum, includes the following:
 - a. The date and duration of each clinical supervision session;
 - b. A comprehensive clinical description of topics discussed during each clinical supervision session. Identifying information regarding clients is not required;

- c. Beginning on July 1, 2006, the name and signature of the individual receiving clinical supervision;
 - d. The name, signature, and telephone number of the clinical supervisor and the date signed; and
 - e. Whether clinical supervision occurred on a group or individual basis;
 5. Verification that no conflict of interest exists between the clinical supervisor and the supervisee;
 6. Verification that no conflict of interest exists between the supervisee and the supervisee's clients; and
 7. Monitoring of the supervisee's clinical documentation through on-going compliance review to ensure that the supervisee maintains adequate written documentation.
- G.** Effective July 1, 2006, an applicant must receive a minimum of 10 hours of clinical supervision obtained during direct observation or a review of audiotapes or videotapes by the clinical supervisor of the applicant while the applicant is providing treatment and evaluation services to a client.
- H.** An applicant may submit clinical supervision hours from a maximum of four clinical supervisors.
- I.** Clinical supervision may include both individual and group supervision. Group clinical supervision hours shall not exceed individual supervision hours.
- J.** Clinical supervision of a supervisee for licensure as a marriage and family therapist, professional counselor, clinical social worker, or independent substance abuse counselor. Beginning on July 1, 2006, a licensee acting as a clinical supervisor shall complete continuing education as follows:
1. Between July 1, 2004, and the individual's first license expiration date following July 1, 2006, at least 12 clock hours shall be taken in the following categories:
 - a. The role and responsibility of a clinical supervisor;
 - b. The skill sets necessary to provide oversight and guidance to a supervisee who diagnoses, creates treatment plans, and treats clients;
 - c. The concepts of supervision methods and techniques; and
 - d. Evaluation of a supervisee's ability to plan and implement clinical assessment and treatment processes; and

2. A licensee who seeks to continue providing clinical supervision after completion of the requirements under subsection (J)(1) shall complete at least six clock hours of continuing education as provided in subsections (J)(1)(a) through (d) between the date the Board receives the licensee's last renewal application and the next license expiration date.
- K.** Clinical supervision by a licensee of the Arizona Board of Psychologist Examiners, the Arizona Medical Board, the Arizona Board of Osteopathic Examiners in Medicine and Surgery, or the Arizona Board of Nursing. Beginning on July 1, 2006, a clinical supervisor of a supervisee listed in subsection (J) shall comply with the continuing education requirements under subsections (J)(1) and (2).
- L.** Clinical supervision training required pursuant to subsections (J) and (K) shall be waived if the clinical supervisor holds any of the following certifications or designations if the certification or designation is current as of the clinical supervisor's license renewal date:
1. National Board for Certified Counselors/Center for Credentialing and Education ("NBCC/CCE") Approved Clinical Supervisor certification,
 2. International Certification and Reciprocity Consortium ("ICRC") Clinical Supervisor certification, or
 3. American Association of Marriage and Family Therapists Clinical Member with Approved Supervisor designation.

Historical Note

New Section made by exempt rulemaking at 10 A.A.R. 2700, effective July 1, 2004 (Supp. 04-2). Amended by exempt rulemaking at 11 A.A.R. 2713, effective June 27, 2005 (Supp. 05-2).

ATTACHMENT

G

R4-6-210. Supervision Requirements – General

In addition to the specific supervision requirements contained in Articles 4, 5, 6, and 7:

1. An immediate family member or other individual whose objective assessment of the supervisee's performance may be limited by a relationship with the supervisee shall not provide direct or clinical supervision.
2. A supervisee may not acquire supervised work experience in a professional setting which the supervisee operates or manages or in which the supervisee has an ownership interest.
3. Supervised work experience acquired as an independent contractor must include the following:
 - a. The supervisee has entered into a written contract to provide services for a behavioral health entity;
 - b. The supervisee receives ~~an appropriate level of~~ direct supervision from the contracting behavioral health entity, as ~~determined by the Board~~;
 - c. The supervisee is paid by the contracting behavioral health entity and receives no payment directly from clients;
 - d. The supervisee provides services to clients who are advised in writing that they are clients of the contracting behavioral health entity.
 - e. The written contract between the contracting behavioral health entity and the supervisee provides that the supervisee is required to comply with the contracting behavioral health entity's clinical policies and procedures, including its code of ethics and record-keeping procedures; and
 - f. The written contract between the contracting behavioral health entity and the supervisee provides that all client records belong to the contracting behavioral health entity and remain the contracting behavioral health entity's property at the termination of the contract between the contracting behavioral health entity and the supervisee.
4. Beginning on January 1, 2006, the Board SHALL NOT ACCEPT WORK EXPERIENCE ACQUIRED AFTER DECEMBER 31, 2005, BY AN UNLICENSED PROFESSIONAL PRACTICING UNDER AN EXEMPTION PROVIDED IN A.R.S. § 32-3271.

32-3271. Exceptions to licensure; jurisdiction

A. This chapter does not apply to:

1. A person who is currently licensed, certified or regulated pursuant to another chapter of this title and who provides services within the person's scope of practice if the person does not claim to be licensed pursuant to this chapter.

2. A person who is not a resident of this state if the person:

(a) Performs behavioral health services in this state for not more than ninety days in any one calendar year as prescribed by board rule.

(b) Is authorized to perform these services pursuant to the laws of the state or country in which the person resides or pursuant to the laws of a federally recognized tribe.

(c) Informs the client of the limited nature of these services and that the person is not licensed in this state.

3. A rabbi, priest, minister or member of the clergy of any religious denomination or sect if the activities and services that person performs are within the scope of the performance of the regular or specialized ministerial duties of an established and legally recognizable church, denomination or sect and the person performing the services remains accountable to the established authority of the church, denomination or sect.

4. A member run self-help or self-growth group if no member of the group receives direct or indirect financial compensation.

5. A behavioral health technician or behavioral health paraprofessional who is employed by an agency licensed by the department of health services.

6. A person contracting with the supreme court or a person employed by or contracting with an agency under contract with the supreme court who is otherwise ineligible to be licensed or who is in the process of applying to be licensed under this chapter as long as that person is in compliance with the supreme court contract conditions regarding professional counseling services and practices only under supervision.

7. A person who is employed by the department of economic security and who practices social work, marriage and family therapy, substance abuse counseling, counseling and case management within the scope of the person's job duties and under direct supervision by the department of economic security.

8. A student, intern or trainee who is pursuing a course of study in social work, counseling, marriage and family therapy, substance abuse counseling or case management in a regionally accredited institution of higher education or training institution if the person's activities are performed under qualified supervision and are part of the person's supervised course of study.

9. A person who is practicing social work, counseling and case management and who is employed by an agency licensed by the department of economic security.

10. A paraprofessional employed by the department of economic security or by an agency licensed by the department of economic security.

11. A christian science practitioner if all of the following are true:

(a) The person is not providing psychotherapy.

(b) The activities and services the person performs are within the scope of the performance of the regular or specialized duties of a christian science practitioner.

(c) The person remains accountable to the established authority of the practitioner's church.

12. A person who is not providing psychotherapy.

B. A person who provides services pursuant to subsection A, paragraph 2 is deemed to have agreed to the jurisdiction of the board and to be bound by the laws of this state.

ATTACHMENT

H

R4-6-211. Direct Supervision Requirements

A. In addition to the specific supervision requirements contained in Articles 4, 5, 6, and 7:

1. A direct supervisor must be employed by the same entity as the supervisee.
2. *An individual shall provide direct supervision to a maximum of 15 supervisees at the same time.*

B. *An applicant may submit a written request to the Academic Review Committee ~~credentialing committee~~ for an exemption from the requirement of subsection (A)(2). The Academic Review Committee ~~credentialing committee~~ shall review the exemption request and the direct supervisor's other job responsibilities to determine whether the direct supervisor can provide an appropriate level of direct supervision to more than 15 supervisees at the same time. The Academic Review Committee ~~credentialing committee~~ shall not grant an exemption request for more than 30 supervisees.*

Historical Note

New Section made by exempt rulemaking at 10 A.A.R. 2700, effective July 1, 2004 (Supp. 04-2). Amended by exempt rulemaking at 11 A.A.R. 2713, effective June 27, 2005 (Supp. 05-2).

ATTACHMENT

I

R4-6-404. Clinical Supervision for Clinical Social Worker Licensure

- A. During the supervised work experience required in R4-6-403, an applicant for clinical social worker licensure shall receive a minimum of 100 hours of clinical supervision in no less than 24 months.
- B. During the supervised work experience required in R4-6-403, an applicant for clinical social worker licensure shall demonstrate satisfactory performance in the following areas: assessment, diagnostics, individual and group psychotherapy, referrals, personal integrity, appropriate use of supervision, insight into client's problems, objectivity, ethics, concern for welfare of clients, responsibility, boundaries, recognition of own limits, and confidentiality by having the applicant's clinical supervisor submit a performance evaluation on forms available from the Board agency.
- C. The time span covered by the performance evaluations shall be the same as that for the supervised work experience required in R4-6-403.
- D. Clinical supervision of an applicant for clinical social worker licensure shall be provided by a clinical social worker licensed in Arizona.
- E. An potential applicant may submit a written request to the social work credentialing committee for an exemption from the requirement of subsection (D). The request shall include the name of the behavioral health professional proposed by the applicant to act as the clinical supervisor, a copy of the proposed clinical supervisor's transcript and curriculum vitae, and any additional documentation requested by the committee. The social work credentialing committee shall review the supervision exemption request to determine whether the proposed supervisor has the necessary education, training, and experience to provide supervision acceptable for clinical social worker licensure. If the proposed supervisor has the necessary education, training, and experience, the social work credentialing committee shall grant the supervision exemption request.
 1. The social work credentialing committee shall accept a maximum of 75 hours of clinical supervision provided by an alternative behavioral health professional as provided in subsection (E)(2). An applicant must obtain a minimum of 25 hours of clinical supervision by a social worker at the masters or higher level certified or licensed at the independent level by a state behavioral health regulatory entity.
 2. When reviewing supervision exemption requests, the social work credentialing committee will only consider supervision provided by a masters or higher level professional certified or licensed IN ARIZONA at the independent level by a state behavioral health regulatory entity, a licensed psychologist, or a medical doctor with a specialty in psychiatry. The social work credentialing committee will take into consideration an applicant's ability to demonstrate that supervision by a certified or licensed social worker was not available or available supervision was not specific to the applicant's area of practice. When considering the availability of a certified or licensed social worker, the social work credentialing committee will consider the size of the professional setting in which the applicant worked and its geographic location.
 3. The social work credentialing committee will not grant an exemption request for an unlicensed clinical supervisor providing clinical supervision in Arizona after July 1, 2006, except that an exemption may be granted by the committee if the clinical supervisor holds a current active license to practice behavioral health at the independent level and is providing services

pursuant to a contract or grant with the federal government under the authority of 25 U.S.C. 450 - 450(n) or 25 U.S.C. 1601 - 1683.

4. Beginning on July 1, 2006, the social work credentialing committee will not grant an exemption request for a substance abuse counselor.

Historical Note

New Section made by exempt rulemaking at 10 A.A.R. 2700, effective July 1, 2004 (Supp. 04-2). Amended by exempt rulemaking at 11 A.A.R. 2713, effective June 27, 2005 (Supp. 05-2).

ATTACHMENT

J

R4-6-504. Clinical Supervision for Professional Counselor Licensure

- A. During the supervised work experience required in R4-6-503, an applicant for professional counselor licensure shall receive a minimum of 100 hours of clinical supervision in no less than 24 months.
- B. During the supervised work experience required in R4-6-503, an applicant for licensure as a professional counselor shall demonstrate satisfactory performance in the following areas: assessment, diagnostics, individual and group psychotherapy, referrals, personal integrity, appropriate use of supervision, insight into client's problems, objectivity, ethics, concern for welfare of clients, responsibility, boundaries, recognition of own limits, and confidentiality by having the applicant's clinical supervisor submit a performance evaluation on forms available from the Board Agency.
- C. The time span covered by the performance evaluation shall be the same as that for the supervised work experience requirement required in R4-6-503.
- D. An applicant for professional counselor licensure shall receive the clinical supervision required by subsection (A) from any of the following behavioral health professionals licensed at the independent level in Arizona:
 1. A licensed professional counselor,
 2. A licensed clinical social worker,
 3. A licensed marriage and family therapist,
 4. A licensed psychologist, or
 5. An allopathic or osteopathic medical doctor with a specialty in psychiatry.
- E. An applicant may submit a written request to the counseling credentialing committee for an exemption from the requirement in subsection (D). The request shall include the name of the behavioral health professional proposed by the applicant to act as the clinical supervisor, a copy of the proposed clinical supervisor's transcript and curriculum vitae, and any additional documentation requested by the committee. The counseling credentialing committee shall review the supervision exemption request to determine if the proposed supervisor has the necessary education, training, and experience to provide supervision acceptable for professional counselor licensure. If the proposed supervisor has the necessary education, training, and experience, the counseling credentialing committee shall grant the supervision exemption request.
 1. The counseling credentialing committee will not grant an exemption request for an unlicensed clinical supervisor providing clinical supervision in Arizona after July 1, 2006, except that an exemption may be granted by the committee if the clinical supervisor holds a current active license to practice behavioral health at the independent level and is providing services pursuant to a contract or grant with the federal government under the authority of 25 U.S.C. 450 - 450(n) or 25 U.S.C. 1601 - 1683.
 2. Beginning on July 1, 2006, the counseling credentialing committee will not grant an exemption request for a substance abuse counselor.

ATTACHMENT

K

R4-6-604. Clinical Supervision for Marriage and Family Therapy Licensure

- A. During the supervised work experience required in R4-6-603, an applicant for licensure as a marriage and family therapist shall receive a minimum of 200 hours of clinical supervision in no less than 24 months and at least 120 of the hours shall address issues focusing on couples and families.
- B. An applicant for licensure as a marriage and family therapist shall ensure that the applicant's clinical supervisor submits a performance evaluation on forms available from the Board Agency. The Board shall not license an applicant unless the performance evaluation demonstrates satisfactory performance in the following areas: assessment, diagnostics, individual and group psychotherapy, referrals, personal integrity, appropriate use of supervision, insight into client's problems, objectivity, ethics, concern for welfare of clients, responsibility, boundaries, recognition of own limits, and confidentiality.
- C. The time span covered by the performance evaluation shall be the same period as the supervised work experience under R4-6-603.
- D. Clinical supervision of an applicant for marriage and family therapist licensure shall be provided by a marriage and family therapist licensed in Arizona.
- E. An applicant may submit a written request to the marriage and family therapy credentialing committee for an exemption from the requirement of subsection (D).
 - 1. The request shall include the name of the behavioral health professional proposed by the applicant as the clinical supervisor and a copy of the proposed clinical supervisor's graduate degree transcript and curriculum vitae. The applicant shall provide any additional documentation requested by the committee.
 - 2. The marriage and family therapy credentialing committee shall review the supervision exemption request to determine whether the proposed supervisor has education, training, and experience comparable to that of a licensed marriage and family therapist. If the proposed supervisor has comparable education, training, and experience, the marriage and family therapy credentialing committee shall grant the supervision exemption request.
 - a. Beginning on July 1, 2006, the marriage and family therapy credentialing committee shall not grant an exemption request for clinical supervision provided in Arizona by a person not licensed to practice psychotherapy in Arizona, except that the committee may grant an exemption if the clinical supervisor holds a current active license in any state or jurisdiction to practice psychotherapy at the independent level and is providing services pursuant to a contract or grant with the federal government under 25 U.S.C. 450 – 450n or 25 U.S.C. 1601 - 1683.
 - b. Beginning on July 1, 2006, the marriage and family credentialing committee shall not grant an exemption for clinical supervision by a substance abuse counselor.

ATTACHMENT

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R4-6-701. Licensed Substance Abuse Technician Curriculum

- D.** The supervised work experience in the practice of substance abuse counseling required in subsection (C) is limited to the use of psychotherapy for the purpose of assessment, diagnosis, and treatment of individuals, couples, families, and groups as they relate to substance abuse and chemical dependency issues.
- E.** During the period of required supervised work experience in the practice of substance abuse counseling required in subsection (C), an applicant for substance abuse technician licensure shall not engage in independent practice.
- F.** During the supervised work experience required in subsection (C), an applicant for substance abuse technician licensure shall demonstrate satisfactory performance in the following areas as they relate to substance abuse counseling by having the applicant's clinical supervisor submit a performance evaluation on forms available from the Boardagency:
 - 1. Intake;
 - 2. Diagnostics;
 - 3. Assessment;
 - 4. Triage;
 - 5. Crisis intervention;
 - 6. Treatment planning;
 - 7. Family, group, and individual therapy;
 - 8. Outreach; and
 - 9. Consultation with other professionals .
- G.** The time span covered by the performance evaluations required under subsection (F) shall be the same as that for the supervised work experience required in subsection (C).
- H.** Clinical supervision of an applicant for substance abuse technician licensure required in subsection (C) shall be provided by an independent substance abuse counselor licensed in Arizona.
- I.** An applicant may submit a written request to the substance abuse credentialing committee for an exemption from subsection (H). The request shall include the name of the behavioral health professional proposed by the applicant to act as the clinical supervisor, a copy of the proposed supervisor's transcript and curriculum vitae, and any additional documentation requested by the committee.
 - 1. The substance abuse credentialing committee shall review the supervision exemption request to determine whether the proposed supervisor has the necessary education, training, and experience to provide supervision acceptable for substance abuse technician licensure. If the proposed supervisor has the necessary education, training, and experience, the substance abuse credentialing committee shall grant the supervision exemption request.
 - 2. The substance abuse credentialing committee will not grant an exemption request for an unlicensed clinical supervisor providing clinical supervision in Arizona after July 1, 2006, except than an exemption may be granted by the committee if the clinical supervisor holds a current active license to practice behavioral health at the independent level and is providing services

pursuant to a contract or grant with the federal government under the authority of 25 U.S.C. 450 – 450(n) or 25 U.S.C. 1601 – 1683.

R4-6-706. Clinical Supervision for Associate Substance Abuse Counselor and Independent Substance Abuse Counselor Licensure

- A. During the supervised work experience required in R4-6-705, an applicant for associate substance abuse counselor and independent substance abuse counselor licensure shall receive a minimum of 100 hours of clinical supervision in no less than 24 months.
- B. During the supervised work experience required in R4-6-705, an applicant for associate substance abuse counselor and independent substance abuse counselor licensure shall demonstrate satisfactory performance in the following areas as they relate to substance abuse counseling: intake, diagnostics, assessment, triage, crisis intervention, treatment planning, family, group and individual psychotherapy, outreach, and consultation with other professionals by having the applicant's clinical supervisor submit a performance evaluation on forms available from the Board Agency.
- C. The time span covered by the performance evaluations shall be the same as that for the supervised work experience required in R4-6-705.
- D. Clinical supervision of an applicant for associate substance abuse counselor and independent substance abuse counselor licensure shall be provided by an independent substance abuse counselor licensed in Arizona.
- E. An applicant may submit a written request to the substance abuse credentialing committee for an exemption from the requirement of subsection (D). The request shall include the name of the behavioral health professional proposed by the applicant to act as the clinical supervisor, a copy of the proposed clinical supervisor's transcript and curriculum vitae, and any additional documentation requested by the committee. The substance abuse credentialing committee shall review the supervision exemption request to determine whether the proposed supervisor has the necessary education, training, and experience to provide supervision acceptable for associate substance abuse counselor and independent substance abuse counselor licensure. If the proposed supervisor has the necessary education, training, and experience, the substance abuse credentialing committee shall grant the supervision exemption request. The substance abuse credentialing committee will not grant an exemption request for an unlicensed clinical supervisor providing clinical supervision in Arizona after July 1, 2006, except that an exemption may be granted by the committee if the clinical supervisor holds a current active license to practice behavioral health at the independent level and is providing services pursuant to a contract or grant with the federal government under the authority of 25 U.S.C. 450 – 450(n) or 25 U.S.C. 1601 – 1683.

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102-3-7a. Professional postgraduate supervised experience requirement to be licensed as a clinical professional counselor.

In order to be approved by the board for licensure as a clinical professional counselor, the applicant's postgraduate supervised professional experience of professional counseling shall meet all of the following standards.

(a) Except as provided in subsection (b), clinical supervision shall be provided throughout the entirety of the postgraduate supervised professional experience at a ratio of one hour of clinical supervision for each 15 hours of direct client contact, specified as follows:

- (1) At least 50 hours of one-on-one, individual supervision occurring with the supervisor and supervisee in the same physical space;
- (2) at least 100 hours of supervision with one supervisor and no more than six supervisees in the same physical space, except when not practical due to an emergency or other exigent circumstances, at which time person-to-person contact by interactive video or other telephonic means maintaining confidentiality shall be allowed; and
- (3) at least two separate clinical supervision sessions per month, at least one of which shall be one-on-one, individual supervision.

(b) Each applicant with a doctor's degree in professional counseling shall complete a minimum of one-half of the postgraduate supervised professional experience requirements as follows:

- (1) At least 25 hours of one-on-one, individual supervision occurring with the supervisor and supervisee in the same physical space;
- (2) at least 50 hours of supervision with one supervisor and no more than six supervisees in the same physical space, except when not practical due to an emergency or other exigent circumstances, at which time person-to-person contact by interactive video or other telephonic means maintaining confidentiality shall be allowed; and
- (3) at least two separate supervisory sessions per month, one of which shall be one-on-one, individual supervision.

(c) The clinical supervisor of a person attaining the 4,000 hours of postgraduate supervised professional experience required for licensure as a clinical professional counselor, at the time of providing supervision, shall meet one of the following qualifying provisions:

- (1) The clinical supervisor shall be a clinical professional counselor who is licensed in Kansas or is registered or licensed in another jurisdiction and who has practiced as a clinical professional counselor for two years beyond the supervisor's licensure date.
- (2) If a licensed clinical professional counselor is not available, the clinical supervisor may be a person who is qualified by educational coursework and degree for licensure as a clinical professional counselor in Kansas and who has at least five years of postgraduate professional experience in clinical professional counseling.
- (3) If a licensed clinical professional counselor is not available, the clinical supervisor may be a person who is licensed at the graduate level to practice in one of the behavioral sciences, and whose authorized scope of practice permits the independent practice of counseling, therapy, or psychotherapy. The qualifying individual shall not have had less than two years of clinical practice beyond the qualifying licensure date at the time the individual provided the clinical supervision.

(d) In addition to the requirements of subsection (c), each clinical supervisor shall meet these requirements:

- (1) Have professional authority over and responsibility for the supervisee's clinical functioning in the practice of professional counseling;
- (2) not have a dual relationship with the supervisee;
- (3) not be under any sanction from a disciplinary proceeding, unless this prohibition is waived by the board for good cause shown by the proposed supervisor;
- (4) have knowledge of and experience with the supervisee's client population;
- (5) have knowledge of and experience with the methods of practice that the supervisee employs;
- (6) have an understanding of the organization and the administrative policies and procedures of the supervisee's practice setting; and
- (7) be a staff member of the supervisee's practice setting or meet the requirements of subsection (e).

(e) If a qualified clinical supervisor is not available from among staff in the supervisee's practice setting, the supervisee may secure an otherwise qualified clinical supervisor outside the practice setting if all of the following conditions are met:

- (1) The supervisor has a solid understanding of the practice setting's mission, policies, and procedures.
- (2) The extent of the supervisor's responsibility for the supervisee is clearly defined in terms of client cases to be supervised, role in personnel evaluation within the practice setting, and other aspects of the clinical supervision training plan.
- (3) The responsibility for payment for supervision is clearly defined.
- (4) If the supervisee pays the supervisor directly for the supervision, the supervisor maintains responsibility to the client and to the practice setting.

(f) Each professional counseling clinical supervisor shall perform the following duties:

- (1) Provide oversight, guidance, and direction of the supervisee's clinical practice of professional counseling by assessing and evaluating the supervisee's performance;
- (2) conduct supervision as a process distinct from personal therapy, didactic instruction, or professional counseling consultation;
- (3) provide documentation of supervisory qualifications to the supervisee;
- (4) periodically evaluate the supervisee's clinical functioning;
- (5) provide supervision in accordance with the clinical supervision training plan;
- (6) maintain documentation of supervision in accordance with the clinical supervision training plan
- (7) provide the documentation required by the board when a supervisee completes the postgraduate supervised professional experience. The supervisor shall submit this documentation on board-approved forms and in a manner that will enable the board to evaluate the extent and quality of the supervisee's professional experience and assign credit for that experience;
- (8) provide a level of supervision that is commensurate with the education, training, experience, and ability of both the supervisor and the supervisee; and
- (9) ensure that each client knows that the supervisee is practicing professional counseling under supervision.

(g) Clinical supervision training plan. Each supervisor and supervisee shall develop and co-sign a written clinical supervision training plan on forms provided by the board at the

beginning of the supervisory relationship. The supervisee shall submit this plan to the board for and shall receive board approval of the plan before any supervised professional experience hours can begin to accrue. This plan shall clearly define and delineate the following items:

- (1) The supervisory context;
- (2) a summary of the anticipated types of clients and the services to be provided;
- (3) the format and schedule of supervision;
- (4) a plan for documenting the following information:
 - (A) The date of each supervisory meeting;
 - (B) the length of each supervisory meeting;
 - (C) a designation of each supervisory meeting as an individual or group meeting;
 - (D) a designation of each supervisory meeting as conducted in the same physical space or otherwise, in the case of emergency; and
 - (E) an evaluation of the supervisee's progress under clinical supervision;
- (5) a plan for notifying clients of the following information:
 - (A) The fact that the supervisee is practicing professional counseling under supervision;
 - (B) the limits of client confidentiality within the supervisory process; and
 - (C) the name, address, and telephone number of the clinical supervisor;
- (6) the date on which the parties entered into the clinical supervision training plan and the time frame that the plan is intended to encompass;
- (7) an agreement to amend or renegotiate the terms of the clinical supervision training plan, if warranted, including written notification of these changes to the board office, as provided in subsection (h);
- (8) the supervisee's informed consent for the supervisor to discuss supervision or performance issues with the supervisee's clients, the supervisee's other professional counseling or employment supervisors, the board, or any other individual or entity to which either the supervisee or the supervisor is professionally accountable; and
- (9) a statement signed by each supervisor and supervisee acknowledging that each person has read and agrees to the postgraduate supervised professional experience requirements set forth in this regulation.

(h) All changes to the clinical supervision training plan shall be submitted by the supervisee to the board for its approval. The changes shall be submitted no more than 45 days after the date on which the changes took effect. If the supervisee fails to submit the changes to the board within that 45-day period, no supervised hours of practice shall be accrued or credited for any practice, beginning on the date the changes took effect through the date on which the changes to the plan are approved by the board.

(Authorized by K.S.A. 74-7507; implementing K.S.A. 65-5804a; effective April 17, 1998; amended Aug. 4, 2000; amended July 7, 2003; amended Aug. 13, 2004.)

KANSAS LISAC

102-7-6. Professional postgraduate supervised experience requirement for a clinical addiction counselor. For each applicant for licensure as a clinical addiction counselor, the postgraduate supervised professional experience of addiction counseling shall meet all of the following requirements:

(a) The postgraduate supervised professional experience of addiction counseling shall consist of 4,000 hours of professional experience, including 1,500 hours of direct client contact conducting substance abuse assessments and treatment.

(b) Except as provided in subsection (c), clinical supervision shall be provided throughout the entirety of the postgraduate supervised professional experience at a ratio of one hour of clinical supervision for each 20 hours of direct client contact, specified as follows:

(1) At least 50 hours of one-on-one, individual clinical supervision occurring with the supervisor and supervisee in the same physical space;

(2) at least 100 hours of clinical supervision with one supervisor and no more than six supervisees, which may be obtained in person or, if confidentiality is technologically protected, person-to-person contact by interactive video or other telephonic means; and

(3) at least two separate clinical supervision sessions per month, at least one of which shall be one-on-one individual supervision.

(c) Each applicant with a doctor's degree in addiction counseling or a related field as defined in K.A.R. 102-7-1(s) shall be required to complete, after the doctoral degree is granted, at least one-half of the postgraduate supervised professional experience requirements as follows:

(1) At least 25 hours of one-on-one, individual clinical supervision occurring with the supervisor and supervisee in the same physical space;

(2) at least 50 hours of clinical supervision with one supervisor and no more than six supervisees, which may be obtained in person or, if confidentiality is technologically protected, person-to-person contact by interactive video or other telephonic means; and

(3) at least two separate clinical supervision sessions per month, at least one of which shall be one-on-one individual supervision.

(d) The clinical supervisor of each person attaining the 4,000 hours of postgraduate supervised professional experience required for licensure as a clinical addiction counselor shall meet one of the following requirements while the individual is providing supervision:

(1) The clinical supervisor shall be a clinical addiction counselor who is licensed in Kansas or is certified or licensed in another jurisdiction and, on and after January 1, 2014, who has engaged in the independent practice of clinical addiction counseling, including the diagnosis and treatment of substance use disorders, for at least two years beyond the supervisor's certification or licensure date as a clinical addiction counselor.

(2) If a licensed clinical addiction counselor is not available, the clinical supervisor may be a person who is certified or licensed at the graduate level to practice in one of the behavioral sciences and whose authorized scope of practice permits the diagnosis and treatment of mental disorders independently. The qualifying individual shall have had at least two years of clinical professional experience beyond the date of the supervisor's certification or licensure.

(e) In addition to the requirements of subsection (d), each clinical supervisor shall meet the following requirements:

(1) Have professional authority over and responsibility for the supervisee's clinical functioning in the practice of addiction counseling;

(2) not have a harmful dual relationship with the supervisee;

- (3) not be under any sanction from a disciplinary proceeding, unless the board waives this prohibition for good cause shown by the proposed supervisor;
- (4) have knowledge of and experience with the supervisee's client population;
- (5) have knowledge of and experience with the methods of practice that the supervisee employs;
- (6) have an understanding of the organization and the administrative policies and procedures of the supervisee's practice setting; and
- (7) be a member of the practice setting staff or meet the requirements of subsection (f).
- (f) If a qualified clinical supervisor is not available from among staff in the supervisee's practice setting, the supervisee may secure an otherwise qualified clinical supervisor outside the practice setting if all of the following conditions are met:
 - (1) The supervisor has an understanding of the practice setting's mission, policies, and procedures.
 - (2) The extent of the supervisor's responsibility for the supervisee is clearly defined in terms of client cases to be supervised, role in personnel evaluation within the practice setting, and other aspects of the clinical supervision training plan.
 - (3) The responsibility for payment for supervision is clearly defined.
 - (4) If the supervisee pays the supervisor directly for the supervision, the supervisor maintains responsibility for the client and to the practice setting.
- (g) Each clinical supervisor shall perform the following duties:
 - (1) Provide oversight, guidance, and direction for the supervisee's clinical practice of addiction counseling by assessing and evaluating the supervisee's performance;
 - (2) conduct supervision as a process distinct from personal therapy, didactic instruction, or addiction counseling consultation;
 - (3) provide documentation of supervisory qualifications to the supervisee;
 - (4) periodically evaluate the supervisee's clinical functioning;
 - (5) provide supervision in accordance with the clinical supervision training plan;
 - (6) maintain documentation of supervision in accordance with the clinical supervision training plan;
 - (7) provide the documentation required by the board when the supervisee completes the postgraduate supervised professional experience. The supervisor shall submit this documentation on board-approved forms and in a manner that will enable the board to evaluate the extent and quality of the supervisee's professional experience and assign credit for that experience;
 - (8) provide a level of supervision that is commensurate with the education, training, experience, and ability of both the supervisor and the supervisee; and
 - (9) ensure that each client knows that the supervisee is practicing addiction counseling under supervision.
- (h)(1) In order for an applicant for a clinical addiction counselor license to obtain credit for hours accrued before August 1, 2011 toward the required 4,000 hours of clinical supervision, the applicant shall provide an attestation that the clinical supervision occurred in accordance with a plan that meets the following conditions:
 - (A) The supervision was scheduled and formalized.
 - (B) The supervision included review and examination of cases.
 - (C) Assessment of the supervisee's competencies was addressed by the supervisor.
- (2) The attestation shall be signed by one of the following:
 - (A) The supervisor, if available; or

(B) if the supervisor is not available, another person who was in the supervisee's practice setting with knowledge of the supervisee's clinical supervision.

(i) For supervision hours accrued on and after August 1, 2011, each supervisor and supervisee shall develop and cosign a written clinical supervision training plan on forms provided by the board at the beginning of the supervisory relationship. The supervisee shall submit an official position description and the training plan to the board and shall receive board approval of the plan before any supervised professional experience hours for clinical licensure can begin to accrue. This plan shall clearly define and delineate the following items:

- (1) The supervisory context, which shall include the purpose of supervision;
 - (2) a summary of the anticipated types of clients and the services to be provided, as evidenced by the supervisee's official position description;
 - (3) a plan that describes the supervision goals and objectives and the means to attain and evaluate progress towards the goals;
 - (4) the supervisor's responsibilities;
 - (5) the supervisee's responsibilities;
 - (6) the format and schedule of supervision;
 - (7) a plan for documenting the following information:
 - (A) The date of each supervisory meeting;
 - (B) the length of each supervisory meeting;
 - (C) a designation of each supervisory meeting as an individual or group meeting;
 - (D) a designation of each supervisory meeting as conducted in the same physical space or by another means as specified in paragraph (b)(2);
 - (E) the 4,000 hours of postgraduate supervised clinical addiction counseling experience, which shall include specifically documenting the 1,500 hours of direct client contact conducting substance abuse assessments and treatment; and
 - (F) an evaluation of the supervisee's progress under clinical supervision;
 - (8) a plan to address and remedy circumstances in which there is a conflict between the supervisor and the supervisee;
 - (9) a plan to notify clients of the following information:
 - (A) The fact that the supervisee is practicing addiction counseling under supervision;
 - (B) the limits of client confidentiality within the supervisory process; and
 - (C) the name, address, and telephone number of the clinical supervisor;
 - (10) the date on which the parties entered into the clinical supervision training plan and the time frame that the plan is intended to encompass;
 - (11) an agreement to amend or renegotiate the terms of the clinical supervision training plan, if warranted, including written notification of these changes to the board office, as provided in subsection (j);
 - (12) the supervisee's informed consent for the supervisor to discuss supervision or performance issues with the supervisee's clients, the supervisee's other addiction counseling or employment supervisors, the board, or any other individual or entity to which either the supervisee or the supervisor is professionally accountable; and
 - (13) a statement signed by each supervisor and supervisee acknowledging that each person has read and agrees to the postgraduate supervised professional experience requirements specified in this regulation.
- (j) All changes to the clinical supervision training plan shall be submitted by the supervisee to the board for its approval. The changes shall be submitted no more than 45 days after the date on

which the changes took effect. If the supervisee fails to submit the changes to the board within that 45-day period, no supervised hours of practice shall be accrued or credited for any practice, beginning on the date the changes took effect through the date on which the changes to the plan are approved by the board.

(Authorized by K.S.A. 2010 Supp. 74-7507, as amended by L. 2010, ch. 45, §15; implementing L. 2010, ch. 45, §4, as amended by 2011 HB 2182, §12; effective, T-102-7-1-11, July 1, 2011; effective, T-102-10-27-11, Oct. 27, 2011; effective Jan. 20, 2012.)

SAM BROWNBACK
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BEHAVIORAL SCIENCES REGULATORY BOARD FILING OF CLINICAL SUPERVISION TRAINING PLAN

In order to begin accruing hours and working toward the LCPC you must submit a training plan for pre-approval to the Board.

- There is no fee to file a Clinical Supervision Training Plan.
- The Clinical Supervision Training Plan needs to be completed by you and your supervisor(s).
- You and your supervisor(s) will need to read the statutes and regulations prior to completing the training plan. Please see K.A.R. 102-3-7a, for the supervision requirements for a clinical license. All statutes and regulations may be found on our website www.ksbsrb.org
- **You must attach an official job description with your training plan.**
- You must receive approval, in writing, from the Board before you may begin counting supervision hours.
- Supervision requirements may not be finished in less than two years.
- You will be notified in writing by the Board office within 30 days regarding approval of your training plan. If you have not received notification within 30 days, please contact the board office.
- Once the training plan has been approved you must keep the Board up to date with any changes. Any changes to the approved training plan must be submitted **within 45 days of the change** or the hours accrued during that time period will not be counted.

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BEHAVIORAL SCIENCES REGULATORY BOARD

**Clinical Supervision Training Plan
Professional Counselors**

You must be fully licensed (not temporarily licensed) as an LPC to be eligible to submit a clinical training plan.

Please answer **ALL** questions. The form needs to be filled out completely, and legibly.
The supervisee shall complete sections I and II.
The supervisee together with the supervisor(s) shall complete sections III and VI.
The supervisor(s) shall complete sections IV and V.

I. Information regarding supervisee: [Completed by supervisee]

Name _____ Email _____

Home Phone _____ Cell Phone _____
(Optional)

Home Address _____

City, State, Zip _____

License number _____ Issue date _____ Expiration date _____

Name of your clinical training plan supervisor _____

Name of 2nd clinical training plan supervisor (if applicable) _____

II. Information regarding the Supervision Setting: [Completed by supervisee]

Name of Agency and address where you will be participating in the supervised work experience.

Agency _____

Address _____

City, State, Zip _____

Phone _____ Your Title in this supervised setting? _____

You are required to attach a copy of your official position description to your training plan.

**III. Information regarding Supervision Training Plan:
[Completed by supervisee and supervisor(s) together]**

Please provide answers to questions 1 through 18 on a separate sheet of paper:

1. Will you be using the DSM IV in diagnosing clients?
2. Please list some specific diagnoses you expect to treat.
3. What are the anticipated types of clients to whom you will be providing services?
4. What services will you be providing to clients?
5. What are some theories of psychotherapy you plan to use in treating clients?
6. What dates are expected to be covered with the Supervision Training Plan?
(Training plan must be approved by the board before post graduate hours can begin to be accrued.)
7. List your clinical supervision goals and briefly describe how you will attain those goals. Be sure to review the definition of clinical professional counseling and incorporate into your goals. [See K.A.R. 102-3-1a (e)] **Also, include goals that relate to diagnosis and treatment of mental disorders. Include a description that specifies how you will meet the requirement to provide 1500 hours of psychotherapy and assessment.**
8. Outline your supervisor's responsibilities in relation to these goals and objectives.
9. Outline your responsibilities in relation to these goals and objectives.
10. Describe your plan and your supervisor's plan for the documentation of the date, length, method, content, and format of each supervisory meeting and your progress toward the learning goals.
11. Answer the following questions regarding your supervision:
 - a. Describe the schedule for supervision.
 - b. What is the ratio of supervision to direct client contact that you will receive?
 - c. How many supervision hours will be individual?
 - d. Will you receive group supervision? If so, how many supervision hours will be done in group? Also, how many supervisees will be in the group?
 - e. What is the total number of supervision hours you will you complete?
12. Describe the plan for documenting your progress toward meeting the required 4000 hours of supervised clinical experience.
13. Describe the plan for documenting your progress toward meeting the required 1500 hours of direct face to face client contact providing psychotherapy and assessment services.
14. Describe the plan for evaluating your progress in supervision. Periodic written evaluations are encouraged.
15. Describe the plan for notifying the clients that you are practicing under supervision, the limits of confidentiality under supervision, and the name and contact information for your supervisor.
16. Describe the process for renegotiating this plan if warranted, including the need to submit all changes to the board office **within 45 days of the change.**
17. Describe the process for remediating conflicts between yourself and your supervisor.
18. Describe the contingency plans for emergency supervision, missed supervision sessions, and supervision while your supervisor is unavailable. Be sure to include a backup supervisor.

The supervisor(s) shall complete sections IV, V, and VI.

[If there is more than one supervisor each supervisor must complete all three sections.]

IV. Information regarding supervisor: [Completed by supervisor(s)]

Name _____ Email _____

Agency _____

Address _____

City, State, Zip _____

Home Phone _____ Work Phone _____

License Type _____ License Number _____ Issue date _____ Expiration date _____

Were you licensed at the clinical independent level in a state prior to Kansas? Yes _____ No _____

If yes, state of licensure _____ License type _____

Issue date _____ Expiration date _____

Have you practiced clinical professional counseling for a minimum of two years? Yes _____ No _____

If not, you are not eligible to be a clinical supervisor.

Are you currently under disciplinary investigation, sanction, or practice limitation or any other adverse action imposed by a state credentialing board or professional organization? Yes _____ No _____

If yes, please explain fully in an attached, signed statement.

V. Information regarding the supervisory relationship: [Completed by supervisor(s)]

Please read K.A.R. 102-3-7a prior to answering the following questions.

1. Per K.A.R. 102-3-7a(d)(1) – Do you have professional authority and responsibility for the supervisee’s clinical functioning in the practice of clinical professional counseling? Yes _____ No _____

2. Do you have a dual relationship with the supervisee? Yes _____ No _____

3. Do you have knowledge of and experience with the supervisee’s client population? Yes _____ No _____

4. Do you have knowledge of and experience with the methods of practice that the supervisee will employ? Yes _____ No _____

5. Do you have an understanding of the organization and administrative policies and procedures of the supervisee’s practice setting? Yes _____ No _____

6. Are you a staff member of the practice setting? Yes _____ No _____

If not, please answer the following five questions:

A. Do you have a solid understanding of the practice setting's mission, policies, and procedures? Yes _____ No _____

B. Is the extent of your responsibility for the supervisee clearly defined in terms of client cases to be supervised, role in personnel evaluation within the practice setting, and other aspects of the clinical supervision training plan? Yes _____ No _____

C. Is the responsibility for payment of supervision clearly defined? Yes _____ No _____

D. Is the supervisee paying the supervisor directly for supervision? Yes _____ No _____

E. Do you maintain responsibility to the client and the practice setting? Yes _____ No _____

7. Will you perform the following?

A. Provide oversight, guidance, and direction of the supervisee's clinical practice of clinical professional counseling by assessing and evaluating the supervisee's performance? Yes _____ No _____

B. Conduct supervision as a process distinct from personal therapy, didactic instruction, or professional counseling consultation? Yes _____ No _____

C. Provide documentation of supervisory qualifications to the supervisee? Yes _____ No _____

D. Periodically evaluate the supervisee's clinical functioning? Yes _____ No _____

E. Provide supervision in accordance with the clinical supervision training plan? Yes _____ No _____

F. Maintain documentation of supervision in accordance with the clinical supervision training plan? Yes _____ No _____

G. Provide the documentation required by the board when a supervisee completes the postgraduate supervised professional experience? Yes _____ No _____

H. Provide a level of supervision that is commensurate with the education, training, experience, and ability of both the supervisor and supervisee. Yes _____ No _____

I. Ensure that the each client knows that the supervisee is practicing clinical professional counseling under supervision? Yes _____ No _____

8. Do you have a thorough knowledge and understanding of BSRB statutes and regulations regarding the requirements of post graduate supervision for the supervisee's profession? Yes _____ No _____

9. Will the supervisee be involved in the process of diagnosing clients? Yes _____ No _____

**** If your answer is yes, please describe how.**

10. Will the supervisee, under your direction, be providing psychotherapy to the clients?
** If your answer is yes, please describe how. Yes_____ No_____

VI. Supervisor's and Supervisee's Attestation:

We, the undersigned supervisee and supervisor, acknowledge that we have both read and agree to all aspects of this plan, and have read and understand the post graduate supervised work experience requirements set forth in regulations. We attest, to the best of our knowledge, that this plan meets the training requirements as outlined in statute and regulation, including the requirements for the provision of psychotherapy and assessment as well as the required supervision. We also attest that the forgoing information constitutes an accurate and honest description of the duties to be performed by the supervisee.

Additionally, the supervisee hereby gives consent to the supervisor to discuss supervision or performance issues with the supervisee's clients, other professionals in the practice setting, the Board, or any other individual to whom either is professionally accountable.

Signature of Supervisee Date

Signature of Supervisor Date

You should receive a written response regarding your clinical training plan from the board office within 30 days. If you have not received a response within 30 days from submission, please contact the board office.

Attention supervisors, for additional information regarding clinical supervision, please see the website at: www.ksbsrb.org

SAM BROWNBACK
Governor

MAX L. FOSTER, Jr.
Executive Director



700 S.W. Harrison St. Ste 420
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(785) 296-3240
FAX (785) 296-3112
www.ksbsrb.org

BEHAVIORAL SCIENCES REGULATORY BOARD

**Training Plan Amendment – New/Additional Work Site
Professional Counselors**

This form should only be used if you have an approved training plan on file with the BSRB and you have changed employment or are adding an additional work site.

I. Information regarding supervisee:

Name _____ LPC Number _____
Home Address _____
City, State, Zip _____ Home Phone _____
Cell Phone _____ Email _____
(Optional)

II. Information regarding the supervision setting:

Name of Agency and address where the supervisee will be participating in the supervised work experience.

Agency _____
Address _____
City, State, Zip _____ Phone _____
Title of supervisee's position in this supervised setting? _____

III. Information regarding supervisor:

A. Name of your clinical supervisor: _____
B. Is this your previously approved supervisor for your clinical training plan? Yes _____ No _____
If "NO," you will also need to complete the Training Plan Amendment form for a new supervisor.

IV. Information regarding the new/additional employment setting:

A. Please specify whether this is a new work site or an additional work site? _____
B. End date of employment from previously approved training plan: _____
C. Date new/additional employment began: _____
D. Please submit a copy of the supervisee's new official position description with this amendment.

SAM BROWNBACK
Governor

MAX L. FOSTER, Jr.
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BEHAVIORAL SCIENCES REGULATORY BOARD

**Training Plan Amendment – New/Additional Supervisor
Professional Counselors**

This form should only be used if you have an approved training plan on file with the BSRB and you are changing supervisors or adding an additional supervisor.

I. Information regarding supervisee: (To be completed by supervisee)

Name _____ LPC Number _____

Home Address _____

City, State, Zip _____ Home Phone _____

Cell Phone _____ Email _____
(Optional)

Work Agency _____

Is this your previously approved worksite for your clinical training plan? Yes _____ No _____

If "NO," you will also need to complete the Training Plan Amendment form for a new worksite.

Please specify whether this is this a new or an additional supervisor? _____

Date to begin supervision: _____

End date, if applicable, with previous supervisor: _____

If the new supervisor you have chosen is **not** a Licensed Clinical Professional Counselor please provide answers for the following two questions:

1. Why did you choose this individual to provide your clinical supervision?
2. What steps have you taken to seek out supervision within your own profession?

II. Information regarding new supervisor: [To be completed by supervisor(s)]

Name _____

Address _____ work or home

Address _____

Phone _____ Email _____

Professional credentials: Degree _____ Conferred on _____

License type and Number _____ State _____

Initial issue date of license _____ Expiration date _____

Does this license authorize the supervisor to practice independently? Yes _____ No _____

Have you practiced clinical professional counseling for a minimum of two years beyond the date your clinical license was issued? Yes _____ No _____
If you answered "No," you are not eligible to be a clinical supervisor.

Are you currently under disciplinary investigation, sanction, or practice limitation or any other adverse action imposed by a state credentialing board or professional organization? Yes _____ No _____
If you answered "Yes," please explain fully in an attached, signed statement.

III. Information regarding the supervisory relationship: [To be completed by Supervisor(s)]

Please read K.A.R. 102-3-7a before answering the following questions.

1. Per K.A.R. 102-3-7a(d)(1) – Do you have professional authority and responsibility for the supervisee's clinical functioning in the practice of clinical professional counseling? Yes _____ No _____

2. Do you have a dual relationship with the supervisee? Yes _____ No _____

3. Do you have knowledge of and experience with the supervisee's client population? Yes _____ No _____

4. Do you have knowledge of and experience with the methods of practice that the supervisee will employ? Yes _____ No _____

5. Do you have an understanding of the organization and administrative policies and procedures of the supervisee's practice setting? Yes _____ No _____

6. Are you a staff member of the practice setting? Yes _____ No _____

If not, please answer the following four questions:

A. Is your responsibility for the supervisee clearly defined in terms of client cases to be supervised, their role in personnel evaluation within the practice setting? Yes _____ No _____

B. Is the responsibility for payment of supervision clearly defined? Yes _____ No _____

C. Is the supervisee paying the supervisor directly for supervision? Yes _____ No _____

D. Do you maintain responsibility to the client and the practice setting? Yes _____ No _____

7. Will you perform the following?

A. Provide oversight, guidance, and direction of the supervisee's clinical practice of clinical professional counseling by assessing and evaluating the supervisee's performance? Yes _____ No _____

B. Conduct supervision as a process distinct from personal therapy, didactic instruction, or professional counseling consultation? Yes _____ No _____

C. Provide documentation of supervisory qualifications to the supervisee? Yes _____ No _____

D. Periodically evaluate the supervisee's clinical functioning? Yes _____ No _____

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BEHAVIORAL SCIENCES REGULATORY BOARD

**Training Plan Amendment – New/Additional Supervisor
Professional Counselors**

This form should only be used if you have an approved training plan on file with the BSRB and you are changing supervisors or adding an additional supervisor.

I. Information regarding supervisee: (To be completed by supervisee)

Name _____ LPC Number _____

Home Address _____

City, State, Zip _____ Home Phone _____

Cell Phone _____ Email _____
(Optional)

Work Agency _____

Is this your previously approved worksite for your clinical training plan? Yes _____ No _____

If "NO," you will also need to complete the Training Plan Amendment form for a new worksite.

Please specify whether this is this a new or an additional supervisor? _____

Date to begin supervision: _____

End date, if applicable, with previous supervisor: _____

If the new supervisor you have chosen is **not** a Licensed Clinical Professional Counselor please provide answers for the following two questions:

1. Why did you choose this individual to provide your clinical supervision?
2. What steps have you taken to seek out supervision within your own profession?

II. Information regarding new supervisor: [To be completed by supervisor(s)]

Name _____

Address _____ work or home

Address _____

Phone _____ Email _____

Professional credentials: Degree _____ Conferred on _____

License type and Number _____ State _____

Initial issue date of license _____ Expiration date _____

Does this license authorize the supervisor to practice independently? Yes _____ No _____

Have you practiced clinical professional counseling for a minimum of two years beyond the date your clinical license was issued? Yes _____ No _____

If you answered "No," you are not eligible to be a clinical supervisor.

Are you currently under disciplinary investigation, sanction, or practice limitation or any other adverse action imposed by a state credentialing board or professional organization? Yes _____ No _____

If you answered "Yes," please explain fully in an attached, signed statement.

III. Information regarding the supervisory relationship: [To be completed by Supervisor(s)]

Please read K.A.R. 102-3-7a before answering the following questions.

1. Per K.A.R. 102-3-7a(d)(1) – Do you have professional authority and responsibility for the supervisee's clinical functioning in the practice of clinical professional counseling? Yes _____ No _____

2. Do you have a dual relationship with the supervisee? Yes _____ No _____

3. Do you have knowledge of and experience with the supervisee's client population? Yes _____ No _____

4. Do you have knowledge of and experience with the methods of practice that the supervisee will employ? Yes _____ No _____

5. Do you have an understanding of the organization and administrative policies and procedures of the supervisee's practice setting? Yes _____ No _____

6. Are you a staff member of the practice setting? Yes _____ No _____

If not, please answer the following four questions:

A. Is your responsibility for the supervisee clearly defined in terms of client cases to be supervised, their role in personnel evaluation within the practice setting? Yes _____ No _____

B. Is the responsibility for payment of supervision clearly defined? Yes _____ No _____

C. Is the supervisee paying the supervisor directly for supervision? Yes _____ No _____

D. Do you maintain responsibility to the client and the practice setting? Yes _____ No _____

7. Will you perform the following?

A. Provide oversight, guidance, and direction of the supervisee's clinical practice of clinical professional counseling by assessing and evaluating the supervisee's performance? Yes _____ No _____

B. Conduct supervision as a process distinct from personal therapy, didactic instruction, or professional counseling consultation? Yes _____ No _____

C. Provide documentation of supervisory qualifications to the supervisee? Yes _____ No _____

D. Periodically evaluate the supervisee's clinical functioning? Yes _____ No _____

ATTACHMENT

N

Board of Licensed Professional Counselors and Therapists



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SUPERVISORS of REGISTERED INTERNS

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GUIDELINES & REQUIREMENTS

The mission of the Board of Licensed Professional Counselors and Therapists is consumer protection by the regulation of licensed counselors and therapists and those persons working toward licensure.

Regulation of persons working toward licensure is accomplished by allowing applicants to register as interns while gaining the supervised work experience required for licensure. Registration requires the applicant to be working under an Approved Plan for Supervision. The Plan assures an adequate level of supervision by a trained supervisor, and allows the Board to monitor progress through Six-Month Evaluation Reports filed by the supervisor.

This guide is to assist those supervisors as they provide supervision to help an intern qualify for licensure. Oregon Administrative Rules governing supervisor qualifications are contained in [OAR 833, Division 130](#). Registered intern administrative rules are contained in [OAR 833, Division 50](#).

PLAN APPROVAL

- The Approved Plan is an agreement between the Board, the Supervisor, and Registered Intern. The purpose of this agreement is to enhance the applicant's professional development while meeting the licensing requirements, keeping in mind the responsibilities toward clients and the profession.
- The Board accepts supervisors from related fields: social work, psychology, and psychiatry. Supervisors are required to become familiar with the requirements of this Board.
- Approved supervisors must hold at least a master's degree in a mental health field, have a current active Oregon license in a mental health field, and have at least 30 clock hours of clinical supervisor training.

ELEMENTS OF SUPERVISION

- Supervision encourages responsible provision of services, promotes the welfare and best interests of clients, fosters refinement of skills, and promotes personal and professional development.
- Supervision must involve discussions case notes, charts, records, and available audio or video tapes. The review should evaluate the appropriateness of the services to clients and the supervisee's therapeutic skill. Supervision must occur in a professional setting, one on one with the supervisee, or privately with a small group of other supervisees. Supervision should include:
 - setting goals, responsibilities, practical arrangements
 - licensing requirements -- laws, rules
 - personal management of time
 - strategies of clinical decision-making prioritizing responsibilities
 - professional relationships, coordinating with other professionals and staff
 - ethical and cultural consideration
- Evaluation of practice should include:
 - diagnosis, assessment and identification of presenting problems
 - application ethics
 - research methods
 - knowledge of human behavior and/or social environment
 - termination of clinical relationships
 - methods for maintaining clinical/professional boundaries
 - treatment planning
 - therapeutic interventions or treatment approaches

EXPECTATIONS

By signing the Plan for Supervised Clinical Experience, you have agreed to:

- Provide supervision that meets the licensing standards for level and type of supervision
- Share responsibility with intern for establishing and maintaining a good recordkeeping system, that will be available if requested by the Board.
- File timely six month evaluation reports that include: total actual number of direct client contact hours, number of cch that were done by telephone; total number of hours of individual supervision, number of hours of individual supervision provided by phone; and number of hours of group supervision.
 - Reports need to be received by the board within 30 days following the reporting period.
 - Reports are to be submitted on forms provided to the intern for your use.
- Seek clarification or consultation from the Board regarding requirements, conflicts coming out of the plan/supervision.
- Notify the Board if your business address, phone number change, or license status changes.
- Notify the Board in a timely fashion if the plan is changed, interrupted or is terminated.

HOURS

Client Contact Hours are defined as counseling/therapy hours, where the intern provides clinical counseling or therapy directly to a client (individual, couple, family, group). Distance counseling hours should be counted in the same way as face-to-face hours.

Related activities that are **not considered direct client contact hours** include: related client services or professional activities such as case management, advocacy, administration of programs, casual/social contact, casual client interaction in milieu therapy, research, receiving supervision; instruction or teaching; training; or participating in discussion groups, counseling by correspondence.

Group Supervision involves supervision of 2-6 individuals. The leader must maintain role.

Group supervision should not be claimed where: more than six supervisees are in the group, the group includes non-counselor staff members, is consultation from another mental health professional, or may be considered a quality review or peer review group.

Group supervision is counted the same as individual supervision -- one hour in group supervision equals one hour of supervision.

Concurrent Supervision means the supervision must be taking place within the same general timeframe (week or two) of the client contact hours. Supervision should be regularly scheduled, not sporadic.

Level of Supervision. There must be a total of no less than two hours of supervision per month. At least three hours of supervision each month in which an Intern accrued 46 or more direct client contact hours. If a supervision session is missed, then it should be made up or additional supervision time added to the next meeting to compensate. Failure to maintain the required level of supervision means the client contact hours for that month will not be accepted due to inadequate supervision.

CLIENT CONTACT HOURS

NUMBER AND DEFINITION OF CLIENT CONTACT HOURS

LPC Intern - 2,400 total hours:
• Up to 400 pre-degree CCH.

LMFT Intern Method - 2,000 total hours:
• All must be accumulated post-degree, per date on transcript.

At least 1,000 hours must be providing therapy to couples or families

CLINICAL EXPERIENCE SITE

The clinical experience work site may include community based agencies, institutions, schools, and private practice. Work experience may be either paid or unpaid employment.

OTHER INFORMATION

Supervision does not need to be on-site or come from within the same agency. Interns may purchase appropriate supervision by contracting with a supervisor.

Supervisors are accountable for the supervisee's actions.
Supervisors are expected to know and abide by *this* Board's Code of Ethics.

A supervisor may not be a spouse, relative by blood or marriage, a person of close personal relationship, or former therapist.

SUPERVISION TYPE & FREQUENCY

Effective January 1, 2009:

- At least 50% of the minimum required number of supervision hours must be Individual supervision, 1-to-1.
 - For example, if you have 45 client contact hours during a month, you must have at least 2 hours of supervision in that month. Of that two hours, at least 1 hour must be Individual supervision.
 - If you have 46 or more client contact hours during a month, you must have at least 3 hours of supervision. Of that 3 hours, at least 1.5 hours must be Individual supervision.
- You may have as many hours of supervision as you wish as long as you meet the minimum. We encourage you to get as much supervision as available -- Individual and group.
- Up to 75% of supervision may occur through electronic means such as videoconferencing.

Supervision must take place in the same calendar month as the client contact hours discussed. Supervision meetings must be no less than one hour. If longer, they must be extended in half-hour increments. Extra supervision hours from one supervisor may not be "carried over" for credit, either into the future or into another site where the supervision level was not adequate.

SUPERVISION AND CLIENT CONTACT HOURS ARE MEASURED ON A MONTHLY BASIS. IF THE LEVEL OF SUPERVISION IS NOT ADEQUATE DURING A MONTH, ALL CLIENT CONTACT HOURS ACCUMULATED DURING THAT MONTH ARE DISALLOWED

OREGON.GOV

- State Directories
- Agencies A to Z
- Oregon Administrative Rules
- Oregon Revised Statutes
- Oregon - an Equal Opportunity Employer
- About Oregon.gov

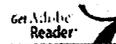


WEB SITE LINKS

- Text Only Site
- Accessibility
- Oregon.gov
- File Formats
- Privacy Policy
- Site Map
- Web Site Feedback

PDF FILE ACCESSIBILITY

Adobe Reader, or equivalent, is required to view PDF files. Click the "Get Adobe Reader" image to get a free download of the reader from Adobe.



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► The Oregon Administrative Rules contain OARs filed through February 15, 2014 ◀

QUESTIONS ABOUT THE CONTENT OR MEANING OF THIS AGENCY'S RULES?
CLICK HERE TO ACCESS RULES COORDINATOR CONTACT INFORMATION

BOARD OF LICENSED PROFESSIONAL COUNSELORS AND THERAPISTS

DIVISION 130

REGISTERED INTERN SUPERVISOR REQUIREMENTS

833-130-0010

Registry Established

(1) Effective September 1, 2010, the Board will establish a Supervisor Registry that consists of licensed professional counselors and licensed marriage and family therapists.

(2) The Board may approve placement of a licensee on the Supervisor Registry if the licensee is a Supervisor Candidate or an Approved Supervisor.

(3) Registered Interns pursuing licensure will be encouraged to find qualified supervisors from the registry.

Stat. Auth.: ORS 675.705 - 675.835
Stats. Implemented: ORS 675.705 - 675.835
Hist.: BLPCT 5-2010, f. 6-15-10, cert. ef. 7-1-10

833-130-0020

Placement on Supervisor Registry

Licensees wishing to be placed on the Supervisor Registry must submit a request on forms provided by the Board.

Stat. Auth.: ORS 675.705 - 675.835
Stats. Implemented: ORS 675.705 - 675.835
Hist.: BLPCT 5-2010, f. 6-15-10, cert. ef. 7-1-10

833-130-0030

Registry Renewal

A licensee who wishes to remain on the Supervisor Registry must complete the following every 5 years:

- (1) Complete a renewal form provided by the Board;
- (2) Successfully pass the Board's law and rules exam; and
- (3) Obtain at least 5 clock hours of supervision-related training.

Stat. Auth.: ORS 675.705 - 675.835
Stats. Implemented: ORS 675.705 - 675.835
Hist.: BLPCT 5-2010, f. 6-15-10, cert. ef. 7-1-10

833-130-0040

Supervisor Candidates

(1) Supervisor Candidates must work toward meeting the requirements of an Approved Supervisor. If after five years as a Supervisor Candidate, the candidate has not met Approved Supervisor requirements, the candidate may no longer supervise registered interns.

(2) To qualify as a Supervisor Candidate, a licensee must meet the following requirements:

- (a) Be licensed in Oregon as a professional counselor or as a marriage and family therapist;
- (b) Complete 30 hours of supervision training;
- (c) Receive supervision during supervisor candidacy from a board-approved supervisor;
- (d) Successfully complete all requirements to qualify as an Approved Supervisor within five years;
- (e) Successfully pass the Board's law and rules exam; and
- (f) Be free of Board disciplinary action.

(3) Supervisors of marriage and family therapist interns must also have supervision training that includes systems components.

Stat. Auth.: ORS 675.705 - 675.835
 Stats. Implemented: ORS 675.705 - 675.835
 Hist.: BLPCT 5-2010, f. 6-15-10, cert. ef. 7-1-10

833-130-0050

Approved Supervisors

(1) To qualify as an Approved Supervisor, a licensee must meet the following requirements:

- (a) Be licensed in Oregon for at least 3 years as a professional counselor or marriage and family therapist; or
- (b) Have an active Oregon license as a professional counselor or marriage and family therapist and be an Approved Supervisor through American Association for Marriage and Family Therapy or the NBCC Center for Credentialing and Education, or be an American Association of Pastoral Counselors diplomate.

(2) Before placement on the Supervisor Registry, a licensee must also:

- (a) Complete 30 hours of supervision training;
- (b) Successfully pass the Board's law and rules exam;
- (c) Be free of Board disciplinary action;
- (d) Provide the Board with documentation of at least 12 hours of supervision by a Board Approved Supervisor within the past 2 to 5 years. The licensee may have up to two Approved Supervisors, and both Approved Supervisors must complete an evaluation. Approved supervision may include one on one or group supervision of not more than 6 supervisees; and
- (e) Document a minimum of 100 hours between 2 and 5 years of experience supervising at least two registered interns or student interns from Board-Approved Oregon graduate programs.

(3) Supervisors of marriage and family therapist interns must also have supervision training that includes systems components.

Stat. Auth.: ORS 675.705 - 675.835
 Stats. Implemented: ORS 675.705 - 675.835
 Hist.: BLPCT 5-2010, f. 6-15-10, cert. ef. 7-1-10

833-130-0060

Current and former supervisors

(1) As of September 1, 2010, Licensed Professional Counselors and Licensed Marriage and Family Therapists may be placed on the Supervisor Registry as Approved Supervisors if they have:

- (a) A current, active license in Oregon as a professional counselor or as a marriage and family therapist;
- (b) Within the last five years.
 - (A) A minimum of three years supervising graduate students, registered interns, or counselors or therapists;
 - (B) Passed the Board's law and rules exam; and

(C) Are free of disciplinary action from the Board; and

(c) Completed 30 clock hours of supervision training.

(2) Current supervisors of registered interns who are operating under an approved clinical experience plan on September 1, 2010, may complete the plan without meeting requirements for placement on the registry.

Stat. Auth.: ORS 675.705 - 675.835

Stats. Implemented: ORS 675.705 - 675.835

Hist.: BLPCT 5-2010, f. 6-15-10, cert. ef. 7-1-10

833-130-0070

Supervisors Not on the Registry

(1) Licensed Professional Counselors or Licensed Marriage and Family Therapists who wish to supervise interns registered with the Board must meet the following requirements:

(a) Have a current, active license in Oregon as a professional counselor or as a marriage and family therapist;

(b) Been licensed as a professional counselor or marriage and family therapist in Oregon for at least 3 years or have national supervisor certification by the National Board of Certified Counselors Center for Credentialing and Education, the American Association of Marital and Family Therapists, or as a diplomate of the American Association of Pastoral Counselors;

(c) Complete 30 hours of supervision training;

(d) Successfully pass the Board's law and rules exam; and

(e) Are free of disciplinary action from the Board.

(2) Other mental health professionals may serve as supervisors of registered interns if they meet the following requirements:

(a) Have a current, active license in Oregon as a mental health professional;

(b) Have been licensed in Oregon as a mental health professional for at least 3 years;

(c) Complete 30 hours of supervision training;

(d) Successfully passed the Board's law and rules exam; and

(e) Are free of disciplinary action from his or her state licensing board.

(3) Supervisors of marriage and family therapist interns must also have supervision training that includes systems components.

Stat. Auth.: ORS 675.705 - 675.835

Stats. Implemented: ORS 675.705 - 675.835

Hist.: BLPCT 5-2010, f. 6-15-10, cert. ef. 7-1-10

833-130-0080

Supervisor Registry Appeal Process

(1) LPC and LMFT supervisor applicants denied placement on the registry may appeal the decision if the denial was based on discipline imposed by the Board.

(2) During review of the appeal, the Board will consider

(a) Type of violation and imposed discipline;

(b) The passage of time since the violation and discipline;

(c) Whether discipline was corrective, punitive or both;

(d) Compliance with imposed discipline;

(e) Results of national health care database search;

(f) Whether behavior resulted in harm to clients;

(g) Previous complaints resulting in discipline;

(h) Results of criminal background check; and

(j) Any other information the board finds relevant.

Stat. Auth.: ORS 675.705 - 675.835 & 676.150 - 676.405
Stats. Implemented: ORS 675.705 - 675.835 & 676.150 - 676.405
Hist.: BLPCT 6-2010, f. 12-13-10, cert. ef. 1-1-11

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Oregon Secretary of State • 138 State Capitol • Salem, OR 97310-0722
Phone: (503) 986-1523 • Fax: (503) 986-1616 • oregon.sos@state.or.us

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REQUEST FOR PLACEMENT ON SUPERVISOR REGISTRY

Your Name: _____

Agency Name: _____

Location Address: _____

Mailing Address: _____

City / State / Zip _____

Telephone: _____ E-mail: _____

A. SUPERVISION EXPERIENCE (List registered interns, graduate students, counselors, or therapists you have supervised in the last five years.)

Name of Supervisee:	Dates of Supervision	LPC	LMFT

B. NATIONAL SUPERVISOR CREDENTIAL:

Certification Title _____ Issuing organization _____

Certification No. _____ Original issue date _____ Expiration date _____

C. SUPERVISION TRAINING: Completed 30 clock hours of **post-masters training** in supervision theory and practice through master's workshops or post-master's graduate level academic coursework. List coursework, workshops or seminars.

Title of class / workshop / seminars	Sponsor of program	Date taken	# clock hours
--------------------------------------	--------------------	------------	---------------

If you wish to supervise LMFT interns, please list graduate-level training in systemic theory and approach to couples and families issues:

FORM #7: INTERN SUPERVISED CLINICAL EXPERIENCE PLAN

- As part of your Initial Application, attach a **Professional Disclosure Statement** (PDS) for *each* employer/practice. Plans will not be approved until the PDS(s) are received.
- For Intern Plan Change Requests, adding or removing supervisors, attach a revised **Professional Disclosure Statement** for each employer/practice.

Applicant/Intern Name: _____ LPC intern LMFT intern

1. SETTING – Location(s) applicant/intern's employer/practice site:

LOCATION 1

Agency Name: _____
Location Address: _____
Mailing Address or PO Box: _____
City / State / Zip: _____
Telephone: _____
E-mail: _____

LOCATION 2

Agency Name: _____
Location Address: _____
Mailing Address or PO Box: _____
City / State / Zip: _____
Telephone: _____
E-mail: _____

2. SUPERVISION REQUIRED

Supervision is required every month. The minimum level of supervision depends on the number of hours accrued in a month. If the number of client contact hours in any given month is less than 46 hours, then the minimum supervision requirement is two (2) hours, with a minimum of one (1) hour of individual supervision. If the number of client contact hours in any given month is 46 hours or more, then the minimum supervision requirement is three (3) hours of supervision, with a minimum of one and a half (1^{1/2}) hours of individual supervision. You can exceed the minimum level of supervision per month. If you do not meet minimum monthly supervision requirements, then the client contact hours for the month will not be approved.

Provide a brief description of clients and counseling activities to be performed. Activities must include assessment, diagnosis and treatment of your clients:

3. CLINICAL SUPERVISOR INFORMATION -- TO BE COMPLETED BY PROPOSED SUPERVISOR

Supervisor:

Name: _____

Business Address: _____

Phone: _____

E-mail: _____

Supervisor's Mental Health Graduate Degree(s):

School: _____ Degree: _____ Issued _____

School: _____ Degree: _____ Issued _____

How long have you known the applicant/intern? _____ years _____ months Describe pre-existent relationship.

Are you related to the applicant/intern? Yes No

Have you ever been disciplined by any regulatory board? Yes No

If applicant/intern is seeking registration as a MFT intern, please list graduate-level training in systemic theory and approach to couples and families issues:

Supervisor's Clinical Experience in counseling or marriage & family therapy:

Number of years licensed in Oregon: _____

Approved Supervisor/Candidate on the OBLPCT Supervisor Registry (LPC/LMFT only): Yes No

Supervisor's State License / National Credential:

License Title		Issued by [state or national org.]
License No		
Original issue date		Expiration date

License Title		Issued by [state or national org.]
License No		
Original issue date		Expiration date

4. SUPERVISION TRAINING.

Completed 30 clock hours of **post-masters training** in supervision theory and practice through workshops, or academic coursework, or completed the necessary requirements to be an AAMFT approved supervisor, NBCC approved clinical supervisor, or an APCA diplomate. List coursework, workshops, seminars, or national accreditation:

Title of class / workshop / seminars National Accreditation	Sponsor of program	Date taken	No. of clock hrs

SUPERVISOR AGREES TO:

Supervision:

- Ensure compliance with Board's current Oregon Administrative Rules.
- Provide ongoing, clinical supervision in a professional setting.
- Ensure that supervision of the supervisee is face-to-face; up to 75% of the supervision hours may be conducted through electronic means.
- Discuss and review case notes, charts, records, and available audio or video for all clients with the registered intern.
- Review and closely supervise the registered intern and all problem cases, providing special attention to assessments, diagnosis, treatment planning, ongoing case management, emergency intervention, record keeping, and termination.
- Focus on the appropriateness of the treatment plans and monitor the appropriateness of clients served based on the applicant/intern's therapeutic skill. Direct the applicant/intern to refer clients who fall beyond their level of competence.
- Maintain confidentiality of all client and supervisory materials.
- Review the Oregon licensing laws (ORS 675.705 – 675.835), administrative rules (OAR 833), and Code of Ethics (OAR 833, Division 100) with registered intern.
- Seek timely clarification/consultation from the Board if there are any problems or conflicts between commitments to agency, administrative supervisor, and client or other conflicts relating to the authority, or shared responsibility for fulfilling the responsibilities under this Plan.

Reporting:

- Establish and maintain a record-keeping system to track the direct client contact and supervision hours. Supervisor will be prepared to provide supporting documentation verifying the accuracy of information reported, if requested by Board.
- Ensure that the Six-month Registered Intern Supervisor Evaluation and Reported Hours are submitted to the Board within one-month of the end of the reporting period.
- Notify the Board of any changes to supervisor's business address and phone number or change in credential status.
- ***Notify the Board of any interruption or proposed termination of the plan.***

REGISTERED INTERN AGREES TO:

- Abide by the Code of Ethics for Counselors and Therapists as specified in OAR 833, Division 100 and Oregon law and rules for LPCs and LMFTs.
- Distribute Professional Disclosure Statements to clients at the onset of therapeutic services.
- Establish and maintain a record keeping system to track the direct client contact and supervision hours.
- Submit requests to change or modify the "Work Plan" to Board prior to implementing changes.
- Ensure supervisor has authority to review all records, determine appropriateness of records, direct referrals of inappropriate clients, determine caseload, and report to Board.

TERMINATION OF INTERN REGISTRATION

Approval of this Plan may be terminated for failing to obtain **prior approval** of the Board for changes in plan terms: place of practice[s]; supervisor[s], including license/certification status; and level of supervision.

Registration as an intern may be terminated for the following reasons

- Failure to file a replacement plan within 90 days of the termination of supervisor.
- Failure to file a replacement plan within 90 days of the termination of a place of practice/employment.
- Failure to submit a Registered Intern Six-Month Supervisor Evaluation & Hours Report.
- Failure to notify or file a replacement plan after placing internship on a 90-day hold.
- Failure to renew registration.
- Voluntary resignation or withdrawal of application.
- Exceeding five years from initial date of registration.

CERTIFICATION / SIGNATURES

I certify that the information provided in this document is true and correct to the best of my knowledge. I agree to follow the provisions set forth in this plan. I understand my responsibilities. I understand that knowingly making a false statement in connection with this proposed plan may result in disciplinary action. I have been given a copy of this Intern Supervised Work Plan, Pages 1 - 4.

Signature of Applicant _____
Date

Signature of Clinical Supervisor _____
Date

Instructions for Submitting Completed Form

- Provide copies of this form for all signatories.
- Submit this form, with original signatures and a Professional Disclosure Statement for each work location.
- Mail to: Oregon Board of Licensed Professional Counselors & Therapists, 3218 Pringle Rd SE, #250 Salem, OR 97302-6312

For Board Use Only

Effective Date: ____/____/____. End Date: ____/____/____.

Registration No: **R**_____ Board approval: _____

REGISTERED INTERN SIX-MONTH SUPERVISOR EVALUATION & HOURS REPORT

Registered Intern: _____ OBLPCT Registration #: _____

Six-Month Reporting Period From: _____ through _____
Month/Year Month/Year

Supervisor: _____

SUPERVISOR EVALUATION

Has Intern passed National Competency Examination (NCE, NCMHCE, CRC, AMFTRB, etc...) _____
Y N

What theory base or therapy underlies the intern's practice? _____

Does the intern demonstrate an understanding of assessment, diagnosis and
treatment planning? _____
Y N

If not, please describe how you are addressing the lack of understanding? _____

Is the Intern gaining experience in the diagnosis of mental disorders? _____
Y N

If not, please describe how you are addressing the lack of experience? _____

Is the Intern distributing a Professional Disclosure Statement at onset of counseling? _____
Y N

Does the Intern understand Oregon's laws and rules regulating LPCs and LMFTs? _____
Y N

Do you routinely discuss the above with emphasis on the OAR Code of Ethics? _____
Y N

Please evaluate the intern's strengths and weaknesses at the present time:

Please describe the Intern's professional growth in the last six months:

Please describe the Intern's goals for professional growth in the next six months:

Do you have any concerns regarding this Intern being licensed? _____
Y N

Is this Intern competent and practicing at an acceptable standard within the profession as a
whole?

REPORTED HOURS

Report # _____

DATES	DIRECT CLIENT CONTACT HOURS		SUPERVISION HOURS			
Month/Year	(A) Total Direct Client Contact Hours, including telephone & electronic	(B) LMFT Interns Couples & Family*	(C) Individual In-Person Supervision	(D) Individual Electronic Supervision	(E) Group Supervision	(C, D + E) SUPERVISION TOTAL
EXAMPLE: May, 2001	42	12	2	1	2.5	5.5
TOTAL						

*Number of Reportable Couples and Family hours (LMFT Only)

SIGNATURES

Supervisor Signature: _____ Date: ____/____/____

Printed Name: _____

Supervisor Signature: _____ Date: ____/____/____

Printed Name: _____

Intern Signature: _____ Date: ____/____/____

⇒ Intern E-Mail address: _____

OFFICE USE ONLY

Notes: _____

Disposition: _____ / ____/____ _____
 Evaluator Date Approved Hours

INTERN PLAN CHANGE REQUEST

Intern Name _____ LPC _____ LMFT _____

Effective Date of Change: _____ Intern Number(s): R _____

I. CHANGE IN PLACE OF PRACTICE:

Attach revised PDS to this form (Supervisor(s) must sign below signifying knowledge of change)

Practice to Delete: _____

Practice to Add: [Requires new or revised Professional Disclosure Statement for approval]

New Practice Name: _____

Address: _____

Telephone(s) _____ E-Mail _____

Beginning Date of **this** employment: _____ Job Title: _____

Describe client population and your duties _____

II. CHANGE IN SUPERVISOR:

(Supervisor(s) must sign below signifying knowledge of change)

Change in Supervisor[s] -- **Attach Form #7 and revised PDS to this form**

How many supervisors in your current "approved" plan? _____

Are you?

Replacing Existing Supervisor

Adding a Supervisor

Removing a Supervisor

Other _____

Current supervisor(s) _____ Supervisor _____ Supervisor _____

New supervisor(s) _____ Supervisor _____ Supervisor _____

Acknowledgment of Plan Change:

Intern Signature _____

Supervisor Signature _____

Mail to: OBLPCT, 3218 Pringle Rd. SE, # 250, Salem, OR 97302-6312

Questions? [503] 378-5499 or E-Mail lpct.board@state.or.us

OFFICE USE ONLY

Plan Change Approved? [] YES [] Tentative [] NO Initial / Date _____

Six-Month Reporting Period: _____ to _____

Professional Disclosure Statement

Jane Smith, LPC
2121 Any Drive
Anytown, OR 97111
(503) 222-2424
jane.smith@sample.org

LICENSEE
SAMPLE

Philosophy and Approach: I believe that everyone can reach an optimum state of health. I employ an eclectic approach with a strong reliance on cognitive-behavioral aspects. . .

Formal Education and Training: I hold a master's degree in counseling from Portland State University. Major course work included human growth and development with an emphasis on adolescent adjustment, and group dynamics. . .

As a Licensee of the Oregon Board of Licensed Professional Counselors and Therapists, I abide by its Code of Ethics. To maintain my license I am required to participate in continuing education, taking classes dealing with subjects relevant to this profession.

Fees: Examples: 1) My fee is \$. . . per hour, 2) The agency charges. . . or 3) Attached is a sliding scale of fees.

As a client of an Oregon licensee, you have the following rights:

- * To expect that a licensee has met the qualifications of training and experience required by state law;
- * To examine public records maintained by the Board and to have the Board confirm credentials of a licensee;
- * To obtain a copy of the Code of Ethics (Oregon Administrative Rules 833-100);
- * To report complaints to the Board;
- * To be informed of the cost of professional services before receiving the services;
- * To be assured of privacy and confidentiality while receiving services as defined by rule or law, with the following exceptions: 1) Reporting suspected child abuse; 2) Reporting imminent danger to you or others; 3) Reporting information required in court proceedings or by your insurance company, or other relevant agencies; 4) Providing information concerning licensee case consultation or supervision; and 5) Defending claims brought by you against me;
- * To be free from discrimination because of age, color, culture, disability, ethnicity, national origin, gender, race, religion, sexual orientation, marital status, or socioeconomic status.

You may contact the Board of Licensed Professional Counselors and Therapists at
3218 Pringle Rd SE, #250, Salem, OR 97302-6312 Telephone: (503) 378-5499
Email: lpct.board@state.or.us Website: www.oregon.gov/OBLPCT

For additional information about this counselor or therapist, consult the Board's website.

Professional Disclosure Statement
Jane Smith, Registered LPC Intern

2121 Any Drive
Anytown, OR 97111
(503) 222-2424
jane.smith@sample.org

REGISTERED
INTERN
SAMPLE

Philosophy and Approach: I believe that everyone can reach an optimum state of health. I employ an eclectic approach with a strong reliance on cognitive-behavioral aspects. . .

Formal Education and Training: I hold a master's degree in counseling from the University of Oregon. Major course work included human growth and development with an emphasis on adolescent adjustment, group dynamics. . .

As an Intern registered with the Oregon Board of Licensed Professional Counselors and Therapists, I abide by its Code of Ethics. As an intern, I am supervised by George Public, a licensed marriage and family therapist, which I will be happy to explain.

Fees: Examples: 1) My fee is \$. . . per hour, 2) The agency charges. . . or 3) Attached is a sliding scale of fees.

As a client of an Oregon registered intern, you have the following rights:

- * To expect that a licensee has met the qualifications of training and experience required by state law;
- * To examine public records maintained by the Board and to have the Board confirm credentials of a licensee;
- * To obtain a copy of the Code of Ethics (Oregon Administrative Rules 833-100);
- * To report complaints to the Board;
- * To be informed of the cost of professional services before receiving the services;
- * To be assured of privacy and confidentiality while receiving services as defined by rule or law, with the following exceptions: 1) Reporting suspected child abuse; 2) Reporting imminent danger to you or others; 3) Reporting information required in court proceedings or by your insurance company, or other relevant agencies; 4) Providing information concerning licensee case consultation or supervision; and 5) Defending claims brought by you against me;
- * To be free from discrimination because of age, color, culture, disability, ethnicity, national origin, gender, race, religion, sexual orientation, marital status, or socioeconomic status.

You may contact the Board of Licensed Professional Counselors and Therapists at
3218 Pringle Rd SE, #250, Salem, OR 97302-6312 Telephone: (503) 378-5499

Email: lpct.board@state.or.us Website: www.oregon.gov/OBLPCT

For additional information about this intern, consult the Board's website.

PROFESSIONAL DISCLOSURE STATEMENT REQUIREMENTS/INSTRUCTIONS

License applicants must submit a Professional Disclosure Statement for Board approval. All licensees and interns must give their clients a Board-approved PDS prior to the performance of counseling / therapy services unless you provide crisis response or have a waiver from the Board.

Create your own statement adding whatever you like but make sure the necessary information in the checklist below is included. If you have more than one practice, the statement should include information regarding all practices, or you may submit a separate PDS for each practice.

Any time your information changes, you must revise your PDS and send a copy to the Board for approval. The Board office will contact you only if the new statement is not approved.

CHECKLIST: PDS REQUIRED ELEMENTS

- ✓ **Counselor/therapist/intern name, business name, address, and telephone number.** Although not required, you may want to include email and website addresses.
- ✓ **Philosophy and approach** to counseling; include the statement that you will abide by the Code of Ethics for counselors and therapists adopted by this Board.
- ✓ **Formal training and education** – highest relevant degree, subject, school granting degree, and major course work.
- ✓ **Continuing education or supervision requirements**
 - Licensees:** indicate that as a licensee you are required to participate in continuing education.
 - Interns:** Continuing education is not required for interns. Instead, indicate that as a registered intern you are under supervision and include your supervisor's name.
- ✓ **Client Bill of Rights** from the Code of Ethics.
- ✓ **Fees** – This is what the client will be charged regardless of who sets the fees. Give dollar amounts or a dollar range. Attach a sliding fee policy if relevant.
- ✓ **Statement about finding additional information about licensees and interns** (see sample PDS)
- ✓ **Board name, address, telephone number, and email address:**

Board of Counselors and Therapists
3218 Pringle Rd SE #250, Salem, OR 97302-6312
(503) 378-5499
Email: lpct.board@state.or.us
Website: www.oregon.gov/OBLPCT

It is not required, but you may want to include information about your custodian of record in your professional disclosure statement.



Oregon

Theodore R. Kulongoski, Governor

8/16/2010



State Board of Licensed Social Workers

3218 Pringle Road SE, Suite 240

Salem, OR 97302-6310

(503) 378-5735

1-866-355-7050

Fax: (503) 373-1427

E-mail: Oregon.blsw@state.or.us

<http://oregon.gov/blsw>

Dear Clinical Social Work Associate:

This is to inform you that your plan change was approved at the 8/10/2010 Board meeting and you will be able count all hours for group and/or individual supervision from that date onward. Your 6 month evaluation report will be due on 2/10/2011.

****IMPORTANT INFORMATION****

All 6 month reports must be kept current within 30 days of the due date. It is the responsibility of both the CSWA and/or the Clinical Supervisor to ensure that the report is completed and mailed in a timely manner. Failure to do so will result in the denial of the CSWA Certificate renewal in your birth month and possibly denial of hours accrued and documented on the past due 6 month report.

Also be aware that for plan changes no hours will be allowed to count if you have changed your current employment and/or supervisor without prior notification to and approval of the change at a formal Board meeting.

The above issues are extremely important to the progress of your plan and should be covered with your supervisor/s. Feel free to contact the Board office at any time to discuss concerns or questions you may have regarding this process.

Sincerely,

Pam Johansen

Pamela Johansen

Administrative Specialist II



ATTACHMENT

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TITLE 22

EXAMINING BOARDS

PART 34

TEXAS STATE BOARD OF SOCIAL WORKER EXAMINERS

CHAPTER 781

SOCIAL WORKER LICENSURE

SUBCHAPTER D

LICENSES AND LICENSING PROCESS

RULE §781.402

Clinical Supervision for LCSW and Non-Clinical Supervision for LMSW-AP and Independent Practice Recognition

(a) A person who has obtained a temporary license may not begin the supervision process toward independent non-clinical practice or independent clinical practice until the regular license is issued.

(b) An LMSW who plans to apply for the LCSW must:

(1) within 30 days of initiating supervision, submit to the board one clinical supervisory plan for each location of practice for approval by the board or executive director/designee;

(2) submit a current job description from the agency in which the social worker is employed with a verification of authenticity from the agency director or his or her designee on agency letterhead. In order for a plan to be approved, the position description or other relevant documentation must demonstrate that the duties of the position are clinical as defined in this chapter;

(3) submit a separate supervision verification form for each location of practice to the board for approval within 30 days of the end of each supervisory plan with each supervisor. If the supervisor does not recommend that the supervisee is eligible to examine for LCSW, the supervisor must indicate such on the clinical supervision verification form and provide specific reasons for not recommending the supervisee. The board may consider the supervisor's reservations as it evaluates the supervision verification submitted by the supervisee;

(4) submit a new supervisory plan within 30 days of changing supervisors or practice location; and

(5) submit an application for re-categorizing his/her licensure to Licensed Clinical Social Worker.

(c) An LMSW who plans to apply for the advanced practitioner specialty recognition must:

(1) submit one non-clinical supervisory plan for each location of practice to the board for approval by the board or executive director/designee within 30 days of initiating supervision;

(2) submit a current job description from the agency in which the social worker is employed with a verification of authenticity from the agency director or his or her designee on agency letterhead. In order for a plan to be approved, the position description must demonstrate that the duties of the position are social work;

(3) submit a separate supervision verification form for each practice location to the board for approval within 30 days of the end of each supervisory plan with each supervisor. If the supervisor does not recommend that the supervisee is eligible to examine for advanced practice specialty recognition, the supervisor must indicate such on the non-clinical supervision verification form and

provide specific reasons for not recommending the supervisee. The board may consider the supervisor's reservations as it evaluates the supervision verification that the supervisee submits;

(4) submit a new supervisory plan within 30 days of changing supervisors or practice location; and

(5) upon completing and submitting documentation of the required non-clinical supervision, the LMSW must apply for the advanced practitioner specialty recognition.

(d) An LBSW or an LMSW who plans to apply for the Independent Practice Recognition must:

(1) submit one supervisory plan to the board for each location of practice for approval by the board or executive director/designee within 30 days of initiating supervision;

(2) submit a current job description from the agency in which the social worker is employed with a verification of authenticity from the agency director or his or her designee on agency letterhead or submit a copy of the contract or appointment under which the LBSW or LMSW intends to work, along with a statement from the potential supervisor that the supervisor has reviewed the contract and is qualified to supervise the LBSW or LMSW in the setting;

(3) submit a separate supervision verification form for each practice location to the board within 30 days of the end of each supervisory plan with each supervisor. If the supervisor does not recommend that the supervisee is eligible for independent practice recognition, the supervisor must provide specific reasons for not recommending the supervisee. The board may consider the supervisor's reservations as it evaluates the supervision verification that the supervisee submits; and

(4) submit a new supervisory plan within 30 days of changing supervisors or practice location.

(e) A licensee who is required to be supervised as a condition of initial licensure, continued licensure, or disciplinary action must:

(1) submit one supervisory plan for each practice location to the board for approval by the board or executive director/designee within 30 days of initiating supervision;

(2) submit a current job description from the agency in which the social worker is employed with a verification of authenticity from the agency director or his or her designee on agency letterhead or submit a copy of the contract or appointment under which the licensee intends to work, along with a statement from the potential supervisor that the supervisor has reviewed the contract and is qualified to supervise the licensee in the setting;

(3) ensure that the supervisor submits reports to the board on a schedule determined by the board. In each report, the supervisor must address the supervisee's performance, how closely the supervisee adheres to statutes and rules, any special circumstances that led to the imposition of supervision, and recommend whether the supervisee should continue licensure. If the supervisor does not recommend the supervisee for continued licensure, the supervisor must provide specific reasons for not recommending the supervisee. The board may consider the supervisor's reservations as it evaluates the supervision verification the supervisee submits; and

(4) notify the board immediately if there is a disruption in the supervisory relationship or change in practice location and submit a new supervisory plan within 30 days of the break or change in practice location.

(f) An LBSW or an LMSW who has been approved for a probationary license under supervision while participating in the AMEC program must follow the application and supervision requirements in §781.413 of this title (relating to Alternate Method of Examining Competency (AMEC) Program).

Source Note: The provisions of this §781.402 adopted to be effective January 27, 2011, 36 TexReg 242

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TITLE 22**EXAMINING BOARDS****PART 34****TEXAS STATE BOARD OF SOCIAL WORKER EXAMINERS****CHAPTER 781****SOCIAL WORKER LICENSURE****SUBCHAPTER D****LICENSES AND LICENSING PROCESS****RULE §781.403****Independent Practice Recognition (Non-Clinical)**

(a) An LBSW or LMSW who seeks to obtain board approval for the specialty recognition of independent non-clinical practice shall meet requirements and parameters set by the board in §781.401 of this title (relating to Qualifications for Licensure).

(b) An individual supervising an LBSW for independent non-clinical practice recognition shall be an LBSW recognized for independent non-clinical practice; an LMSW recognized for independent non-clinical practice; an LMSW-AP; or an LCSW. The supervisor shall be board-approved.

(c) An individual supervising an LMSW for the independent non-clinical practice recognition shall be board-approved and shall be an LMSW recognized for independent non-clinical practice, an LMSW-AP, or an LCSW.

(d) A person who has obtained only the temporary license may not begin supervision until the board issues a regular license.

(e) The board may use the Internal Revenue Service (IRS) guidelines developed in 1996 to demonstrate whether a professional is an independent contractor or an employee. These guidelines revolve around the control an employer has in an employer-employee relationship, in which the employer has the right to control the "means and details" by which services are performed.

(1) Behavioral control. The employer can control the employee's behavior by giving instructions about how the work gets done rather than simply looking at the end products of work. The more detailed the instructions, the more control the employer exercises. An employer requiring that employees be trained for the job is also an example of behavioral control, though contractors may also go through training.

(2) Financial control. The employer determines the amount and regularity of payments to employees. A contractor is typically paid when he/she completes the work, and the contractor usually sets a timeframe for completing the work. The most important element of financial control is that a contractor has more freedom to make business decisions that affect the profitability of his/her work. A contractor, for instance, may invest in renting an office or buying equipment, while the employee does not. While employees are usually reimbursed for job-related expenses, the contractor may or may not be reimbursed, but lack of reimbursement usually signals that a worker is independent. An independent contractor often makes his or her services available to other potential clients, while an employee does not.

(3) Relationship of the parties. The intent of the relationship is significant. The relationship is usually outlined in the written contract and gives one party more control than the other. If a company gives a worker employee benefits, the worker is an employee. The ability to terminate the relationship is another evidence of control in the relationship. If the employer-employee relationship

appears to be permanent, it denotes an employee, not contractor, relationship. If a worker performs activities that are a key aspect of the company's regular business, that denotes an employee status.

(f) An LBSW or LMSW who plans to apply for the specialty recognition of non-clinical independent practice shall follow procedures set out in §781.402 of this title (relating to Clinical Supervision for LCSW and Non-Clinical Supervision for LMSW-AP and Independent Practice Recognition).

(g) An LBSW or LMSW may practice independently when the LMSW or LBSW holds the independent practice specialty recognition, or when under a supervision plan for independent practice that has been approved by the board.

Source Note: The provisions of this §781.403 adopted to be effective January 27, 2011, 36 TexReg 242

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TITLE 22

EXAMINING BOARDS

PART 34

TEXAS STATE BOARD OF SOCIAL WORKER EXAMINERS

CHAPTER 781

SOCIAL WORKER LICENSURE

SUBCHAPTER D

LICENSES AND LICENSING PROCESS

RULE §781.404**Recognition as a Board-approved Supervisor and the Supervision Process**

(a) Types of supervision include:

(1) administrative or work-related supervision of an employee, contractor or volunteer that is not related to qualification for licensure, practice specialty recognition, a disciplinary order, or a condition of new or continued licensure;

(2) clinical supervision of a Licensed Master Social Worker in a setting in which the LMSW is providing clinical services; the supervision may be provided by a Licensed Professional Counselor, Licensed Psychologist, Licensed Marriage and Family Therapist, Licensed Clinical Social Worker or Psychiatrist. This supervision is not related to qualification for licensure, practice specialty recognition, a disciplinary order, or a condition of new or continued licensure;

(3) clinical supervision of a Licensed Master Social Worker, who is providing clinical services and is under a board-approved supervision plan to fulfill supervision requirements for achieving the LCSW; a Licensed Clinical Social Worker who is a board-approved supervisor delivers this supervision;

(4) non-clinical supervision of a Licensed Master Social Worker or Licensed Baccalaureate Social Worker who is providing non-clinical social work service toward qualifications for independent non-clinical practice recognition; this supervision is delivered by a board-approved supervisor;

(5) non-clinical supervision of a Licensed Master Social Worker who is providing non-clinical social work service toward qualifications for the LMSW-AP; this supervision is delivered by a board-approved supervisor;

(6) supervision of a probationary Licensed Master Social Worker or Licensed Baccalaureate Social Worker providing non-clinical services by a board-approved supervisor toward licensure under the AMEC program; or

(7) board-ordered supervision of a licensee by a board-approved supervisor pursuant to a disciplinary order or as a condition of new or continued licensure.

(b) A person who wishes to be a board-approved supervisor must file an application and pay the applicable fee.

(1) A board-approved supervisor must be actively licensed in good standing by the board as an LBSW, an LMSW, an LCSW, or be recognized as an Advanced Practitioner (LMSW-AP), or hold the equivalent social work license in another jurisdiction. An individual whose licensure status is emeritus may not serve as a board-approved supervisor. The person applying for board-approved status must have practiced at his/her category of licensure for two years. The board-approved

supervisor shall supervise only those supervisees who provide services that fall within the supervisor's own competency.

(2) The board-approved supervisor is responsible for the social work services provided within the supervisory plan.

(3) The board-approved supervisor must have completed a supervisor's training program acceptable to the board.

(4) The board-approved supervisor must complete three hours of continuing education every biennium in supervision theory, skills, strategies, and/or evaluation.

(5) The board-approved supervisor must designate at each license renewal that he/she wishes to continue board-approved supervisor status.

(6) The board-approved supervisor must submit required documentation and fees to the board as listed in §781.316 of this title (relating to Fees).

(7) When a licensee is designated a board-approved supervisor, he or she may perform the following supervisory functions.

(A) An LCSW may supervise clinical experience toward the LCSW license, non-clinical experience toward the Advanced Practitioner specialty recognition, non-clinical experience toward the Independent Practice Recognition (non-clinical), a licensee under probationary initial or continued licensure, board-ordered probated suspension, and probationary license holders under the AMEC program.

(B) An LMSW-AP may supervise non-clinical experience toward the Advanced Practitioner specialty recognition; non-clinical experience toward the non-clinical Independent Practice Recognition; a licensee under probationary initial or continued licensure; board-ordered probated suspension for non-clinical practitioners; and probationary license holders under the AMEC program.

(C) An LMSW with the Independent Practice Recognition (non-clinical) who is a board-approved supervisor may supervise an LBSW's or LMSW's non-clinical experience toward the non-clinical Independent Practice Recognition; an LBSW or LMSW under probationary initial or continued licensure; an LBSW or LMSW (non-clinical) under board-ordered probated suspension; and a probationary license holder under the AMEC program; however, an LMSW who does not hold the independent practice recognition may only supervise probationary license holders under the AMEC program in an employment setting.

(D) An LBSW with the non-clinical Independent Practice Recognition who is a board-approved supervisor may supervise: an LBSW's non-clinical experience toward the non-clinical Independent Practice Recognition; an LBSW under probationary initial or continued licensure; an LBSW under board-ordered probated suspension; and a probationary LBSW license holder under the AMEC program; however, an LBSW who does not hold the independent practice recognition may only supervise probationary license holders under the AMEC program in an employment setting.

(8) On receiving the licensee's application to be a board-approved supervisor, as well as fee and verification of qualifications, the board will issue a letter notifying the licensee that the licensee is a board-approved supervisor.

(9) The approved supervisor must renew the approved supervisor status in conjunction with the biennial license renewal. The approved supervisor may surrender supervisory status by documenting the choice on the appropriate board renewal form and subtracting the supervisory renewal fee from the renewal payment. If a licensee who has surrendered supervisory status desires to regain supervisory status, the licensee must reapply and meet the current requirements for approved supervisor status.

(10) A supervisor must maintain the qualifications described in this section while he or she is providing supervision.

(11) A board-approved supervisor who wishes to provide any form of board-approved or board-ordered supervision must comply with the following.

(A) The supervisor is obligated to keep legible, accurate, complete, signed supervision notes and must be able to produce such documentation for the board if requested. The notes shall document the content, duration, and date of each supervision session.

(B) A social worker may contract for supervision with written approval of the employing agency. A copy of the approval must accompany the supervisory plan submitted to the board.

(C) A board-approved supervisor may not charge or collect a fee or anything of value from his or her employee or contract employee for the supervision services provided to the employee or contract employee.

(D) Before entering into a supervisory agreement, the supervisor shall be aware of all conditions of exchange with the clients served by her or his supervisee. The supervisor shall not provide supervision if the supervisee is practicing outside the authorized scope of the license. If the supervisor believes that a social worker is practicing outside the scope of the license, the supervisor shall make a report to the board.

(E) A supervisor shall not be employed by or under the employment supervision of the person who he or she is supervising.

(F) A supervisor shall not be a family member of the person being supervised.

(G) A supervisee must have a clearly defined job description and responsibilities.

(H) A supervisee who provides client services for payment or reimbursement shall submit billing to the client or third-party payers which clearly indicates the services provided and who provided the services, and specifying the supervisee's licensure category and the fact that the licensee is under supervision.

(I) If either the supervisor or supervisee has an expired license or a license that is revoked or suspended during supervision, supervision hours accumulated during that time will be accepted only if the licensee appeals to and receives approval from the board.

(J) A licensee must be a current board-approved supervisor in order to provide professional development supervision toward licensure or specialty recognition, or to provide board-ordered supervision to a licensee. Providing supervision without having met all requirements for current, valid board-approved supervisor status may be grounds for disciplinary action against the supervisor.

(K) The supervisor shall ensure that the supervisee knows and adheres to the Code of Conduct and Professional Standards of Practice of this chapter.

(L) The supervisor and supervisee shall avoid forming any relationship with each other that impairs the objective, professional judgment and prudent, ethical behavior of either.

(M) Should a supervisor become subject to a board disciplinary order, that person is no longer a board-approved supervisor and must so inform all supervisees, helping them to find alternate supervision.

(N) The board may deny, revoke, or suspend board-approved supervisory status following a fair hearing for violation of the Act or rules, according to the department fair hearing rules. Continuing to supervise after the board has denied, revoked, or suspended board-approved supervisor status, or after the supervisor's supervisory status expires, may be grounds for disciplinary action against the supervisor.

(O) If a supervisor's board-approved status is expired, suspended, or revoked, the supervisor shall refund all supervisory fees the supervisee paid after the date the supervisor ceased to be board-approved.

(P) A supervisor is responsible for developing a well-conceptualized supervision plan with the supervisee, and for updating that plan whenever there is a change in agency of employment, job function, goals for supervision, or method by which supervision is provided.

(Q) All board-approved supervisors shall have taken a board-approved supervision training course by January 1, 2014 in order to renew board-approved supervisor status. The board recognizes that many licensees have had little, if any, formal education about supervision theories, strategies, problem-solving, and accountability, particularly LBSWs who may supervise licensees toward the IPR. Though some supervisors have functioned as employment supervisors for some time and have acquired practical knowledge, their practical supervision skills may be focused in one practice area, and may not include current skills in various supervision methods or familiarity with emerging supervisory theories, strategies, and regulations. Therefore, the board values high-quality, contemporary, multi-modality supervision training to ensure that all supervisors have refreshed their supervisory skills and knowledge in order to help supervisees practice safely and effectively.

(12) A board-approved supervisor who wishes to provide supervision towards licensure as an LCSW or towards specialty recognition in Independent Practice (IPR) or Advanced Practitioner (LMSW-AP), which is supervision for professional growth, must comply with the following.

(A) Supervision toward licensure or specialty recognition may occur in one-on-one sessions; in a combination of individual and group sessions; or in board-approved combinations of supervision in the same geographical location, supervision via audio and visual web technology, and other electronic supervision techniques.

(B) Supervision groups shall have no fewer than two members and no more than six.

(C) Supervision shall occur in proportion to the number of actual hours worked, with a base line of one hour of supervision for every 40 hours worked. If the supervisee works full-time, supervision shall occur on average at least twice a month and for no less than four hours per month; if the supervisee works part-time (at least 20 hours per week), supervision shall occur on average at least

once a month and no less than two hours per month. Supervisory sessions shall last at least one hour and no more than two hours per session. No more than 10 hours of supervision may be counted in any one month, or 30-day period, as appropriate, towards satisfying minimum requirements for licensure or specialty recognition.

(D) The board considers supervision toward licensure or specialty recognition to be supervision which promotes professional growth. Therefore, all supervision formats must encourage clear, accurate communication between the supervisor and the supervisee, including case-based communication that meets standards for confidentiality. Though the board favors supervision formats in which the supervisor and supervisee are in the same geographical place for a substantial part of the supervision time, the board also recognizes that some current and future technology, such as using reliable, technologically-secure computer cameras and microphones, can allow personal face-to-face, though remote, interaction, and can support professional growth. Supervision formats must be clearly described in the supervision plan, explaining how the supervision strategies and methods of delivery meet the supervisee's professional growth needs and ensure that confidentiality is protected. The plan must be approved by the board.

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TEXAS STATE BOARD OF SOCIAL WORKER EXAMINERS
Clinical Supervision Instructions and Clinical Supervision Plan
(for the requirements towards LCSW licensure by an LMSW)

Instructions

In order to most efficiently and effectively document and provide verification of minimum qualifications for licensure as an LCSW related to supervised clinical experience and supervision, the Texas State Board of Social Worker Examiner (board), recommends adherence to the following steps. These steps serve to reduce the number of individuals who hold an LMSW license, who aspire to or who are currently working towards fulfilling minimum requirements for licensure as an LCSW, who encounters problems getting a Clinical Supervision Plan approved by the board. They also serve to reduce the number who encounters problems in verification requirements and lack board approval related to all the clinical supervised experience and supervision hours towards fulfilling minimum requirements for licensure as an LCSW in which he/she has already engaged.

Step 1. The LMSW Supervisee (or more accurately, at this point in the process, the potential Supervisee) (henceforth referred to as “Supervisee”) initiates contact with one or more board-approved supervisor(s) related to engaging in board-approved supervision towards satisfaction of minimum requirements towards licensure as an LCSW. A list of board-approved supervisors is available on the board’s website at: http://www.dshs.state.tx.us/socialwork/sw_rosters.shtm.

The Supervisee identifies a potential LCSW board-approved Supervisor (henceforth referred to as Supervisor) who may be available to engage in professional growth supervision (as opposed to board-ordered, remediation or monitoring supervision) related to the Supervisee meeting the minimum requirements for supervised experience and supervision towards licensure as an LCSW.

Step 2. The potential Supervisor and Supervisee shall read/re-read the “Rules Relating to the Licensing and Regulation of Social Workers” (rules), which are located in Title 22, Texas Administrative Code (TAC), Chapter 781. In particular, the Supervisor and Supervisee should study “Subchapter D: Licenses and Licensing Process.” This is available on pp. 23-37 of the rules.

The rules are available on the board’s website at: http://www.dshs.state.tx.us/socialwork/sw_rules.shtm. The board recommends that all licensees re-read the law and rules governing social work practice in their entirety at least once per year and recommends that each licensee check the board’s website at least once per quarter to stay abreast of new information, information about rule changes, and information about the board and its meetings.

Step 3. The potential Supervisor shall specifically review the law and rules relating to social work practice, the supervision process, and clinical supervision to determine if she/he is appropriate to provide the requested supervision. The Supervisor shall determine if she/he has met minimum requirements as a board-approved supervisor, if she/he has received verification of board-approval of supervisor status, and if she/he has maintained the supervisor status through renewal of the license and status, if applicable.

It is the responsibility of both the Supervisor and the Supervisee to determine that the Supervisor is board-approved, and the supervisor status is current, prior to initiation of supervision. Individuals may check licensure and board-approved supervisor status on the board's website at:

http://www.dshs.state.tx.us/socialwork/sw_search.shtm.

Step 4. The potential Supervisor and Supervisee shall read and study "Licensing 101 for the Supervision Process."

Licensing 101 for the Supervision Process

The source document for the rules (and the official version, if there is a discrepancy between the version on the board's website and the version on the Secretary of State's website) is available on the Texas Secretary of State's website at: <http://www.sos.state.tx.us/tac/>. On the Secretary of State's webpage for the Texas Administrative Code (TAC), click on the link on the top right, under "Points of Interest" for "View the current *Texas Administrative Code*." On the webpage which opens following the click on "View the current *Texas Administrative Code*," click on "Title 22 Examining Boards." On that new page, scroll down the page, and click on "Part 34 Texas State Board of Social Worker Examiners." Then click on "Chapter 781 Social Worker Licensing." This will reveal the relevant subchapters for easy navigation.

Questions about the rules governing the practice of social work are an ideal topic for discussion between Supervisor and Supervisee. It is the responsibility of each licensee to be familiar with the law and rules governing practice and to practice within those requirements. Ignorance is not a valid defense for failing to meet minimum requirements.

A licensee is expected to seek formal professional consultation, as appropriate, when she/he has a question about a practice issue, a particular practice area, or an ethical dilemma. Board staff and board members may, as a courtesy, provide some direction about where to find particular content in the law and rules, but neither the board staff nor the individual board members can provide formal professional consultation, unless the issue is specifically addressed in law, rule, or board policy, or unless the opinion is the official opinion of the board and/or of its committees, as evidenced by a majority vote. [A board staff or member, *separate from her/his role as a board or staff member*, may provide professional consultation if it is appropriate within the individual's professional competency. The individual seeking professional consultation should not assume that the staff or board member is acting as an agent of the board in providing the consultation.]

A licensee or applicant for licensure should seek professional consultation for issues which are not directly addressed in the law, rules, and policy from such sources as an expert in the particular practice or ethical area, evidence-based research on the subject, social work educational resources, a professional association, legal counsel, and/or another appropriate source. The board's staff members and individual board members, separate from the formal work of the board in its meetings and committee meetings, do not and cannot provide legal advice to licensees. Legal counsel for the board serves to facilitate the work of the board rather than the work of individual licensees.

Individual licensees should seek legal counsel through an attorney of their choosing. The board, as an agency of the State of Texas, cannot recommend an appropriate attorney. Licensees should seek professional consultation to locate an appropriate attorney, if required. Accessing legal consultation when appropriate should be considered a regular part of a licensee's cost of doing business.

Individual board-approved supervisors are required to engage in a supervision process which is in compliance with the law, rules, and policies of the board, as well as which is consistent with the current, generally accepted standards of practice in social work supervision. As a result of the requirement for current knowledge and skills in supervision theory, methods, and practices, board-approved supervisors are now required to engage in a minimum of three hours of continuing education directly related to supervision for each biennial licensure renewal. All board-approved supervisors, if they did not have to provide verification of completion of a board-approved supervisor training course to gain board-approved supervisor status, are required to provide documentation of completion of a 40 hour course on supervision to the board office prior to January 1, 2014. Supervisors should study all of the law and rules related to practice and particularly focus on 22 TAC §781.402 "Clinical Supervision for LCSW and Non-Clinical Supervision for LMSW-AP and Independent Practice Recognition," as well as 22 TAC §781.404 "Recognition as a Board-approved Supervisor and the Supervision Process."

Frequently, social work educational institutions do not include comprehensive training of students on the law and rules governing social work practice or on supervision and the supervision process towards licensure as a part of required curricula for graduation with a degree in social work. Social work educational institutions must meet the minimum requirements of the Council on Social Work Education (CSWE). These minimum requirements do not generally require a demonstration of competency by the student in the licensing laws and rules as required by each state or jurisdiction's licensing board in order to confer a degree in Social Work. Social work licensing and social work education are two very different disciplines with very different requirements.

The law and rules governing social work practice are different from jurisdiction to jurisdiction, so anyone who practices outside of the jurisdiction of her/his licensure or who practices with clients who are located outside of the jurisdiction of the license, should be familiar with and comply with the requirements of each relevant jurisdiction. Every licensee is required to practice within the relevant law and rules governing her/his practice, regardless of whether her/his formal social work education included comprehensive training on licensing

requirements. The law and rules governing the practice of social work are ideal subjects for discussion between Supervisor and Supervisee.

An LMSW who intends to engage or who is engaging in board-approved supervision towards fulfillment of minimum requirements for licensure as an LCSW *should not rely solely* on the knowledge gained in a social work educational institution to teach the law and rules governing practice and governing the licensing process. The board is the entity designated by the Texas Legislature to establish and enforce licensing requirements, and licensees generally must engage in self-study, completely independent of formal social work education, of the law and rules throughout their social work career to become knowledgeable about licensing and practice accordingly.

For clarification, some LMSWs believe that they will obtain LCSW licensure within 24 months of engaging in board-approved supervision under a board-approved supervision process and make mental or logistical plans related to practice based on this assumption. In fact, it is *impossible* for an LMSW to obtain an LCSW license within 24 months following commencement of supervision because there is processing time required by board staff related to applications for licensure. An LMSW should expect the process to obtain an LCSW license to be a minimum of four to six weeks following completion of and submission to the board office of all LCSW licensure fees and requirements. For LMSWs who submit an application form, fee, and all other appropriate attachments for licensure as an LCSW, who are then determined by the board office to not have met minimum requirements for LCSW licensure, the process will be longer, depending on the nature of the application deficiency. Individuals will be informed in writing of application deficiencies.

Finally, the board office generally and primarily communicates with licensees and applicants via US mail; there are some exceptions. For this reason, it is *imperative* that the licensee at all times has her/his correct mailing address, contact information, and employment information on file with the board. An individual may check the mailing address which the board has on file by conducting an online verification of her/his licensure, which is available here: www.dshs.state.tx.us/socialwork/sw_search.shtm. A written notification to the board of a change of address or other information should be submitted to the board office within 30 days of the change. An individual licensee is required to know about and comply with all reporting requirements of the board, which are available in the board's rules and on the board's website.

Similarly, an LMSW who is practicing under a board-approved Clinical Supervision Plan *is required to submit* a Clinical Supervision Verification Form (Form V) within 30 days of changing the practice location or substantively changing the supervision process or social work practice as described and approved in writing by the board in the initial Clinical Supervision Plan. (This includes the requirement to submit a verification form within 30 days if practice at the location is disrupted for 30 days or more, for any reason, including in the case of a medical leave). The board will notify an LMSW *in writing*, generally within six to eight weeks, of its approval or of a deficiency, when a Clinical Supervision Plan has been received by the board for consideration for approval.

The board generally recommends that Clinical Supervision Plans be submitted via certified US mail to provide the Supervisee with verification of timely submission, in case the plan fails to reach its appropriate destination at the board office. Individuals should take care to indicate the complete and correct address of the board, *including the mail code*, when submitting information to the board. Also, due to the volume of materials submitted by approximately 20,000 licensees, as well as applicants for licensure and a wide variety of others, sometimes materials are accidentally misplaced. It is the responsibility of the LMSW who submits the Clinical Supervision Plan to the board to follow-up with the board office if a written notification of approval or of deficiency is not received within eight weeks. If a written notification of approval, indicating the board-approved supervisor, the board-approved location of practice, and the board-approved start date of supervision, is not sent by the board, the plan is not approved.

To clarify: The plan *is specific* to the supervisor, the location of practice listed, and it has a board-approved start date which is indicated on the written verification from the board of approval. Many individuals have more than one board-approved Clinical Supervision Plan on file with the board office because they practice in multiple locations. Ignorance of the law and rules is not a valid defense to the board. The board generally will not waive minimum requirements for licensure because the individual was not aware, through self-study of the law and rules, of the requirements, even upon appeal.

All licensees must comply with the minimum requirements as specified by the board. While all board-approved supervisors are legally required to know and abide by the law and rules, a Supervisee should not rely solely on a Supervisor to teach them about the minimum requirements for licensure. All professionals who are recognized by the State of Texas as having met minimum requirements toward professional licensure or certification are expected to engage in self-study of the law and rules, to demonstrate compliance with minimum requirements, and to seek professional consultation when appropriate.

If a Supervisee believes that her/his supervisor has failed to provide supervision consistent with the board's law or rules, the Supervisee may file an Ethics Complaint against the Supervisor. Additional information is available on the board's website at: http://www.dshs.state.tx.us/socialwork/sw_complaint.shtm. Any licensee may have an Ethics Complaint filed against her/him at any time. This is considered to be a regular cost of doing business as a licensed professional who is recognized by the state. The primary purpose of the board is to *protect the public from harm* related to inappropriate or unethical practice of social work in the State of Texas.

Step 5. The potential Supervisor and Supervisee shall review the job description(s) of the experience of the Supervisee to be supervised to determine if the supervised experience meets minimum requirements as "clinical" as defined by the board in its rules. Clinical social work is defined in the rules at 22 TAC §781.102(12) and includes "using specialized clinical knowledge and advanced skills to assess, diagnose, and treat mental, emotional, and behavioral disorders, conditions, and addictions... Treatment methods may include but are not limited to, providing individual, marital, couple, family, and group psychotherapy. Clinical social

workers are qualified and authorized to use the Diagnostic and Statistical Manual of Mental Disorders (DSM), the International Classification of Diseases (ICD), Current Procedural Terminology (CPT) codes, and other diagnostic classification systems in the assessment, diagnosis and other practice activities. The practice of clinical social work is restricted to either a Licensed Clinical Social Worker, or a Licensed Master Social Worker under clinical supervision in employment or under a clinical supervision plan.”

More information about the scopes of practice of the different categories of social work licensure are available in 22 TAC §781.202 “The Practice of Social Work.” Most importantly, the supervised experience must demonstrate that the LMSW will be competent, upon completion of the Clinical Supervision Plan, to provide the abovementioned practice activities without supervision.

The simplest way to determine if a job description meets the minimum requirements for developing competency in clinical social work is to ask: Will this individual, based on social work experience in this job, be competent to provide psychotherapy in independent practice upon completion of the supervised experience? Although equating clinical social work with psychotherapy is a controversial and complicated issue, strictly for the purposes of the licensing and regulation of social work, what separates the scope of practice of an LMSW and an LCSW is competency *without supervision* in using specialized clinical knowledge and advanced skills to assess, diagnose, and treat mental, emotional, and behavioral disorders, conditions, and addictions, and treatment methods may include but are not limited to, providing individual, marital, couple, family, and group psychotherapy.

After reviewing many job descriptions, the board has identified some social work practice areas which, unless it can be demonstrated to the appropriate committee of the board through formal appeal that this particular experience is fundamentally different than others, are not sufficiently “clinical” are: medical social work outside of a behavioral health setting; school social work; as well as work in case management, Employee Assistance Programs, and utilization review. While almost all social work practice has some clinical elements to it, not all supervised master’s level social work practice can reasonably be expected to result in professional competency in use of the advanced clinical skills which are restricted by the board to LCSWs and to LMSWs under clinical supervision.

For those for whom their job is not sufficiently “clinical,” the board has provided a remedy. An LMSW whose job description is not sufficient to be approved by the board for a Clinical Supervision Plan on its own merits may submit, in conjunction with the original Clinical Supervision Plan specific to the “non-clinical” job, a separate, supplemental Clinical Supervision Plan, which describes a minimum of four hours per week of clinical experience, as defined by the board’s rules, in the same or another setting with the same supervisor.

In the case of submission of a supplemental Clinical Supervision Plan, not only is an official job description on agency letterhead specific to the supplemental experience required as an attachment but also a letter is required from the agency executive or designee on agency letterhead which describes: (1) how many hours per week the potential Supervisee will work; (2) the clinical duties to be performed by the potential Supervisee; and (3) authorization by the agency for the potential Supervisee to engage in the work under the clinical supervision of the Supervisor (who must be specifically named).

When a supplemental plan is submitted, the original plan shall be submitted as an attachment. In this case, if approved by the board, the supervised experience hours at the “primary” job as well as the “supplemental” job(s) may be counted towards fulfilling minimum requirements for licensure as an LCSW. It is the ultimate responsibility of the Supervisor to ensure that the Supervisee has developed the appropriate competency in clinical social work as defined by the board in the course of all the supervised experience to be qualified and authorized by the board to perform clinical assessment, diagnosis, and treatment of mental health conditions, as outlined in the DSM, ICD, CPT codes, and other diagnostic classification systems, without supervision in independent practice.

Step 6. The potential Supervisee and Supervisor shall formally discuss the creation of a formal supervision relationship, including but not limited to such things as:

- confirmation of the Supervisor’s board-approved supervisor status, of which the most timely is to use the “Find a Licensee” function on the board’s website at www.dshs.state.tx.us/socialwork. Follow links to “Live Online Search,” “Verification,” and “Public License Search;”
- an evaluation of each person’s knowledge and understanding of the laws and rules governing the professional practice of social work, especially as it relates to the minimum requirements for licensure as an LCSW and the supervision process;
- a second evaluation of the job description and the conditions of the Supervisee’s employment or pro bono experience, to determine if the Supervisee is practicing within the board’s authorized scope of practice and whether the Supervisor is qualified to provide the supervision;
- if the Supervisee provides services for payment or reimbursement, evaluation of all conditions of exchange with the clients served by the Supervisee, to determine whether the conditions of exchange are appropriate as well as to determine whether the Supervisee clearly identifies her/his licensure category and the fact that the Supervisee is under supervision in all billing documents to clients or third parties for payment;
- a discussion of potential contemporary, multi-modality supervision formats and methods, as well as supervision goals;
- a discussion of client confidentiality as it relates to the supervision process;
- a determination of whether both parties consent to engage in a formal supervision process towards licensure as an LCSW; and

- the development of a well-conceptualized supervision plan, including an ongoing process to regularly review and update the supervision process and plan, particularly whenever there is a change in the Supervisee's agency of employment or practice; job function; goals for supervision; method by which supervision is provided; or supervisor.

Step 7. The Supervisor is responsible to create and implement an appropriate supervision process based on contemporary knowledge and skills related to social work supervision. Supervision towards licensure as an LCSW shall comply with the minimum requirements in relevant law and rule, including but not limited to 22 TAC §781.404(b)(12).

Step 8. The Supervisee, in conjunction with the Supervisor, submits Form III "Clinical Supervision Plan" with all relevant attachments to the board for consideration for approval. The Supervisee may (but is not required to) submit the Clinical Supervision Plan via certified US mail to provide evidence of timely submission if an error in delivery or processing occurs.

All LMSWs who submit Clinical Supervision Plans are required to submit the official job description(s) on agency letterhead of the experience to be supervised to accompany the Clinical Supervision Plan. The Clinical Supervision Plan Instructions comprise the first 12 pages of this document. The Clinical Supervision Plan (Form III) comprises pages 13-15. Only pages 13-15 must be/should be submitted to the board along with all required attachments.

The board-approved supervisor may be employed by or under contract with the agency to provide supervision, or alternately, may practice professional social work "outside" of the agency. If the board-approved supervisor is not employed by or under contract with the agency to provide supervision towards licensure, the Supervisee is required to obtain and submit with the Clinical Supervision Plan a letter from the agency executive or her/his designee on agency letterhead which authorizes the Supervisee to engage in supervision with the outside Supervisor.

Step 9. Within four weeks of receipt of the Clinical Supervision Plan, the board office will review the documents submitted and send a *written* confirmation of approval of the Clinical Supervision Plan, including all the specific board-approved details contained in that plan, including location of practice and start date, or alternately, will send a written notice of deficiency, to the address on file for the Supervisee.

The Supervisor and Supervisee may wish to establish a timeline by which the Supervisee will contact the board office if written notification of approval or deficiency of the Clinical Supervision Plan(s) is/are not received by the Supervisee within four to eight weeks of submission. Ultimately, the Supervisee is responsible to follow-up with board staff on the status of the submitted plan if written notification of board-approval or deficiency is not received within eight weeks.

Step 10: The Supervisor and Supervisee engage in supervised clinical experience and supervision under a board-approved plan. Both the Supervisor and the Supervisee shall appropriately document each supervision session, including but not limited to the date, duration, and topic. Both shall maintain these records.

Both the Supervisor and Supervisee shall ensure that the supervised clinical experience and supervision are consistent with the board rules. Both shall follow the law and rules governing practice. The Supervisor shall ensure that the Supervisee knows and adheres to the Code of Conduct and Professional Standards of Practice of the board's rules.

All licensees, within 30 days of a change of mailing address, contact information, or employment, all shall make a written report to the board of the change.

The Supervisor and the Supervisee shall seek formal professional consultation as needed. The board recommends that each access the board's website on at least a quarterly basis to stay abreast of critical information, including changes to the board's rules.

Step 11. During the course of board-approved supervision, the Supervisor and Supervisee shall review the plan periodically to make sure the plan is up-to-date and continues to be appropriate. In the case where there is a change after board-approval of a plan in such things as the practice description or location, or the supervision process or goals, the Supervisee shall submit a new Clinical Supervision Plan for board approval which reflects the changes to the original, board-approved plan.

In this case, where there is a substantive change, and a new Clinical Supervision Plan is required to be submitted for approval of the new details, the Supervisee and Supervisor shall also submit a Clinical Supervision Verification Form for the experience under the previous plan within 30 days of the change to "close out" the old plan. When a Clinical Supervision Verification Form, which should relate to *one and only one* specific Clinical Supervision Plan, is submitted to and received by the board office, the Clinical Supervision Plan related to work at that location of practice with that start date is closed by the board office.

Continued supervised experience and supervision may only be considered acceptable to the board towards minimum requirements for licensure after a plan has been closed under certain circumstances. The Supervisee and Supervisor should not assume that continued work will be acceptable to the board. Acceptance generally requires formal approval of the appropriate committee of the board.

Step 12: When all minimum requirements have been met related to supervised clinical experience and supervision, the Supervisee, in conjunction with the Supervisor, shall submit a Clinical Supervision Verification Form to the board for approval within 30 days of completion of the supervision process. The board may require submission of additional documentation related to supervised experience and

supervision to accompany the verification form. The board will notify the Supervisee in writing when additional documentation is required.

The board generally recommends that the Supervisee and Supervisor consider continuing the supervision process until board acceptance of all the minimum requirements have been confirmed, in case it is determined that not all minimum requirements have been met, and documentation of additional hours is required.

To help determine if all minimum requirements related to supervised clinical experience and supervision have been met, review the law and rules, and the following questions may provide a guide (this is *not* comprehensive of all requirements):

- (1) Did I submit a Clinical Supervision Plan within 30 days of commencing supervised experience and supervision?
- (2) Did I receive a letter of approval for the plan, specifying the location of practice, the supervisor, and the board-approved start date within eight weeks of submitting the plan to the board?
- (3) Did my supervision sessions last a minimum of one hour each?
- (4) When I am calculating minimum requirements, am I only counting whole months (at least 30 days) of supervision and supervised experience? (Partial months will not be accepted).
- (5) Have I engaged in at a minimum an average of one supervision session per 30-40 hours of supervised clinical experience?
- (6) Do I have documentation of a minimum of 3,000 hours of supervised experience which meets the minimum requirements of the board?
- (7) Did my supervision sessions occur throughout the course of the minimum of 3,000 hours of supervised clinical experience (or was it disproportionately distributed across the experience)?
- (8) Have I engaged in supervision and supervised experience for a minimum of 24 months under one or more board-approved plan(s), regardless of the number of supervised experience hours accrued?
- (9) Have I engaged in and met all minimum requirements related to supervision and supervised experience in no more than 48 months?
- (10) Do I have documentation of a minimum of 100 hours of supervision with my board-approved supervisor which meets the minimum requirements of the board?
- (11) Do I have documentation of an average of two supervision sessions per month for full-time work or one per month for part-time work?
- (12) Was my licensure active and in good standing throughout the course of supervision?
- (13) Was my Supervisor's license and board-approved supervisor status active and in good standing throughout the course of the supervision?
- (14) Did my Supervisor have a formal disciplinary action taken against her/him by the board during the period of supervision?

- (15) Have I confirmed that my name, contact information, and employment information are current with the board now and have been throughout the period of supervision?
- (16) Have I confirmed that my supervised experience and supervision was consistent with what was described in the board-approved plan? If not, did I submit a new plan and a verification form within 30 days of the change(s)?
- (17) Have I submitted a separate Clinical Supervision Verification form for each plan and location of practice?
- (18) Have both I and my Supervisor maintained documentation of supervised experience and supervision, in case additional information is requested by the board?
- (19) If I submitted a supplemental Clinical Supervision Plan to accommodate the board's minimum requirements for "clinical" supervised experience, did I attach a cover sheet with both the materials and forms for the supplemental experience as well as the primary experience?

Step 13: Once all minimum requirements have been met, the Supervisee may submit an application for licensure as an LCSW with all appropriate documentation and fees. Board approval of the application or identification of a deficiency will occur in writing. If the application materials are acceptable, the board shall authorize the Supervisee to register for and take the Association of Social Work Board's (ASWB) Clinical Examination. Once the application has been approved as meeting all minimum requirements for licensure, including passage of the ASWB Clinical Examination, the license certificate will be issued and mailed for delivery generally within approximately two weeks.

FORM III

TEXAS STATE BOARD OF SOCIAL WORKER EXAMINERS
Clinical Supervision Plan

(for the requirements towards LCSW licensure by an LMSW)

Supervisee Last Name: _____ First Name: _____ Middle Name: _____

Please refer to the law and rules governing social work practice for all information related to licensure. The law and rules are available on the board's website at: <http://www.dshs.state.tx.us/socialwork/>.

Important information about forms:

- Submission of a Clinical Supervision Plan (Form III) does not ensure acceptance of the plan by the board. Acceptance is verified by a letter mailed to the supervisee at the mailing address on file with the board.
- A separate Clinical Supervision Plan (Form III) *must be submitted* to the board for approval for *each location of practice*. Similarly, upon completion of supervision, a separate Clinical Supervision Verification (Form V) must be submitted for each board-approved Clinical Supervision Plan (Form III) in effect. Combining all locations of practice into one Clinical Supervision Plan (Form III) or Verification (Form V) is *not* acceptable to the board.
- Submission of a Clinical Supervision Verification (Form V) does *not* ensure that the board will accept the verification of supervised experience *as submitted*. The Verification (Form V) must be submitted *within 30 days* of completion of the supervision and must meet all criteria required by the board.
- A new Clinical Supervision Plan (Form III) must be submitted for approval when *any change occurs* in the conditions of supervision as approved by the board in the original, approved Clinical Supervision Plan (Form III) (such as who the supervisor is, number of hours worked, location of practice, etc.). This must be submitted *within 30 days* of the change, as must a Verification (Form V) for the experience accrued under the original, approved Clinical Supervision Plan (Form III).
- If the board approves the Plan (Form III), the supervisee will receive a written confirmation in the mail. If a written confirmation is not received, then the plan is not approved.

Question 1: Does this plan reflect a supplemental plan to the original plan which did not meet minimum "clinical" requirements? Have I attached the original Clinical Supervision Plan with all required attachments, as well as the separate, supplemental Clinical Supervision Plan with all required attachments? Yes No

Question 2: Does this plan reflect only a change in supervisor? Yes No

I. Supervisee Information

Name: _____ License Category and Number: _____

Business Name: _____

Business Address: _____

Business Phone: _____ Is supervision related to the clients from this business? Yes No

Work schedule: Full time (30hrs/wk) or more Part time (Hours per week _____)

II. Board-approved Supervisor Information

Name: _____ License Category and Number: _____

Business Name: _____

Business Address: _____

Business Phone: _____ Are you a board-approved supervisor? Yes No

III. Clinical Supervision Schedule

Beginning Date of Supervision: _____ (Supervision may begin up to 30 days before the plan is submitted for approval. The board office shall approve a start date no more than 30 days prior to the board's receipt of the plan. If board-approval is not granted, no creditable experience can be gained.)

Supervision Format: Individual Group Combination

Supervision Sessions per Month: _____ Hours Individual + _____ Hours Group = _____ Total Hours/Month

IV. Supervision Process

Describe the supervisee's work setting(s):

Describe the clients served:

Describe the supervisee's duties and responsibilities, including treatment methods utilized:

Formulate six goals for the supervision:

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____

Multi-modality methods of supervision, based on contemporary knowledge and skills of supervision, to be used:

V. Attachments to Include with Supervision Plan

- Official Job Description on agency letterhead (Official job description must reflect that duties are clinical as defined in applicable rules)
- If supervision of agency-based clients is done with a supervisor who practices outside of the agency setting and is not under contract with the agency to provide supervision, a letter from the agency executive or designee on agency letterhead approving the outside supervision with the specific supervisor must be attached.

VI. Comments

VII. Affidavit of Understanding and Signatures

I hereby certify that I have received and reviewed a copy of regulations pertaining to supervision for specialty recognition in the state of Texas. I understand that I must observe and comply with the supervision guidelines set forth in the rules.

Under penalties of perjury, I declare and affirm that the statements made in the supervision plan, including accompanying statements, are true, complete and correct. I understand that any false or misleading information in, or in connection with my supervision plan may be cause for denial or loss supervision time received and/or loss of licensure. (Supervision may begin up to 30 days before the plan is submitted for approval. If approval is not granted, no creditable experience can be gained.)

Supervisee Signature _____ Date _____
 Supervisee Name
 Printed _____

Supervisor Signature _____ Date _____
 Supervisor Name
 Printed _____

Submit to: Texas State Board of Social Worker Examiners, P.O. Box 149347, Mail Code 1982 Austin, Texas 78714-9347. Consider submission by certified US mail.



PRIVACY NOTIFICATION
 With few exceptions, you have the right to request and be informed about information that the State of Texas collects about you. You are entitled to receive and review the information upon request. You also have the right to ask the state agency to correct any information that is determined to be incorrect. See <http://www.dshs.state.tx.us> for more information on Privacy Notification. (Reference: Government Code, Section 552.021, 552.023, 559.003 and 559.004)

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