

Agenda
State Board for Social Work
Wednesday, June 7th, 2023
10:00 a.m. - 12:30 p.m.

Sites:
1411 Broadway, NYC
Albany, NY
Syracuse, NY

****Agenda and Discussion**

1. Welcome and review of agenda
2. Review of January 25th, 2023, meeting minutes
3. ASWB CEO Stacey D. Hardy-Chandler, Ph.D., J.D., LCSW, and legal counsel Dale Atkinson, Esq., will discuss the exam pass rate data published in August. The presentation will include information on ASWB's initiatives as it collaborates with the entire social work community and develops exams for the future of social work. Plus, Q&A from Board Members.
4. Executive Secretary's Report
 - a. Staffing and Processing
 - b. Board member recruitment
 - c. Executive Orders, Review
5. Legislation and Regulation affecting social work
 - a. Progress Diagnostic Privilege for mental health counselors (Ch. 230 of 2022) progress
 - b. Elimination of R Privilege
6. Discussion Topics
 - a. Teletherapy Regulation Discussion
 - b. School Social Work Discussion
7. Other business
8. Adjournment

The University of the State of New York
State Education Department
Office of the Professions

**New York State Board of Social Work
Meeting Minutes**

Wednesday, January 25, 2023

The meeting was held in person via WebEx at the following locations:

State Education Building, 89 Washington Avenue, EB 150, Albany, NY 12234
Office of the Professions, 1411 Broadway, 10th Floor, New York, NY 10018
Syracuse Regional Office, 333 East Washington Street, Suite 211, Syracuse, NY 13202

Board members present:

Celisia Street (Chair) (Albany)
Laura Eastman-Follis (Albany)
Tracyavon Ford (New York)
Michelle Manley Belge (Syracuse)
Sujata Pai (New York)

Board members absent:

Liz Espinoza
Lola Greene
Denise Krause
Mohini Mishra
Susan Nayowith
Darryl Nicholson-Sansani
Frances Septimo

Staff present:

Evan Seiden, Executive Secretary (New York)
David Hamilton, Assistant Commissioner of Professional Licensing & Practice (Albany)
Dennis Spillane, Executive Director of Office of Professional Discipline (New York)
Mary Fish, Associate in Professional Education (Albany)
Michele Govertsen, Senior Administrative Analyst (Albany)

Welcome and Review of the Agenda

Evan Seiden called the meeting to order at 10:06 AM. Board members and staff introduced themselves and welcomed new Board member Laura Eastman-Follis, LCSW. Laura provided a summary of her background and work experience. It was determined that a quorum of the Board members was not present, therefore, all agenda items were presented for informational purposes. There were no changes in the agenda.

Review of the September 28, 2022 Board Meeting Minutes

The minutes of the September 28, 2022 Board meeting were reviewed and corrected.

Office of Professional Discipline Presentation

Dennis Spillane provided a presentation and handout on the work of the Office of Professional Discipline and the different types of discipline cases that Board members would be involved in. Questions were entertained and answered by Dennis Spillane, and the Board thanked him for the helpful information he provided.

Executive Secretary's Report

- a. **Staffing and Processing:** The Executive Secretary reported that the State Grade 18, Senior Administrative Analyst position has been filled. A new State Grade 14 Education Program Assistant was hired and will begin work on February 2, 2023. With this new position being filled the Board office is now fully staffed. Application processing times are currently at 3-4 weeks out. It was noted that unofficially, the number of limited permit applications has risen 13% compared to the same time last year.
- b. **Board Member Recruitment:** The Executive Secretary is still actively recruiting new members to the Board and asked Board members to refer those interested to him for further information.
- c. **Executive Orders 4.0:** The two executive orders covering the Social Work and Mental Health Practitioner professions expired on January 23, 2023. We are waiting to hear from the Governor's office if these will be extended for another month as they have been in the past.
- d. **State of the State:** As an information item, the Executive Secretary presented two items of interest discussed in the Governor's 2023 State of the State Address. The first item is licensing compacts specifically concerning the nursing and medical professions. Discussion ensued regarding challenges for state licensing boards. There is currently no social work compact. The second item is the permanent expansion of the scope of practice for certain professions to alleviate the healthcare workforce shortages in New York

Legislation and Regulation Affecting Social Work

- a. **Mandatory Continuing Education on Appropriate Boundaries:** The Board of Regents approved regulations on October 4, 2022 that requires all social workers, mental health practitioners and psychologists to complete three hours of acceptable continuing education on issues related to maintaining appropriate professional boundaries between licensees and clients, for every three-year registration period. The course work must be taken from an approved CE provider and counts toward the 36 hours of CE required for every three-year period. The regulation goes into effect for those licensees renewing their registration on April 1, 2023 and thereafter. An Advisory Notice has been placed on the homepage for each of these professions.

- b. Expiration of 100% Self-Study for Continuing Education: Although not an agenda item, the Executive Secretary announced the expiration of the continuing education adjustment provided to licensees as part of the Covid-19 response. The adjustment allowed licensees with registrations due to renew between March 1, 2020 – January 1, 2023 to complete 100% of their CE requirement by self-study courses. This adjustment expired on January 1, 2023. The Covid-19 Frequently Asked Questions website has been updated to read: Starting January 2, 2023, the adjustment is no longer available and licensees should resume their required percentages of self-study for continuing education that is in each individual profession’s laws and regulations.
- c. Diagnostic Privilege for Mental Health Practitioners: Regulations are being drafted for Chapter 230 of the Laws of 2022.
- d. Insurance Law: Chapter 818 of the Laws of 2022 has been signed by the Governor. This law adds all licensed mental health providers as eligible for insurance reimbursement. It requires blanket health insurance policies to provide coverage for outpatient treatment by a mental health practitioner or clinical social worker. Insurers providing reimbursement for psychiatric or psychological services or for the diagnosis and treatment of mental health conditions by physicians, psychiatrists or psychologists, shall provide the same coverage to the insured for such services when performed by a licensed clinical social worker, licensed mental health counselor, licensed creative arts therapist, licensed marriage and family therapist, and licensed psychoanalyst, within the scope of practice. This law eliminates the need for the “R” privilege. Currently, there is no reference to the “R” privilege in insurance law. A chapter amendment to the Insurance Law is being introduced that will remove any reference to licensed creative arts therapists as eligible providers, based on cost concerns.

Professional Practice and Licensure

The following narrative was read by the Executive Secretary in response to recent discussion by certain groups regarding the elimination of the exam requirement for the LMSW license:

The Association of Social Work Boards (ASWB) is comprised of every U.S. State and Canadian jurisdiction and the primary function is to develop and administer an examination that tests for entry level competence by an applicant for licensure. ASWB offers four examinations-- bachelor’s, master’s, advanced generalist, and clinical social work.

There are 150 items in the examination and candidates have 4 hours to complete the examination. Every 5 to 7 years, ASWB conducts a practice analysis by surveying licensed social workers across the U.S. The responses to this analysis are published on the ASWB website and are used to develop the areas in which social work candidates will be tested.

Test items are developed by a diverse pool of licensed social workers who have been trained in writing multiple choice items. Each item is reviewed by the ASWB examination committee and, after any editing, pre-tested as a non-scored item on an examination. Items are assigned to practice areas and, after a certain number of years “retired” due to exposure or changes in social work education and practice. These procedures are consistent with national standards for high-stakes examinations, particularly those for professional licensure.

The State Board has received annual reports from ASWB regarding the performance of New York candidates for license on the Masters and Clinical examinations. We also receive reports that list the number of self-identified graduates of each New York school for a particular year. This listing, however, does not provide individual scores or attributes of those test-takers nor the state in which the graduate sought licensure. A summative report has been provided to the Board and schools by the office for more than a decade.

Over the years, there have been identified differences in performance among schools of social work. Although the Department sought additional information, such as year of graduation and class cohort, ASWB did not provide that information. The ASWB examination application collected self-reported ethnicity, but did not require this information and ASWB had no way to confirm the accuracy of such information.

ASWB did not provide an annual report in 2021, but did provide that information in a recent report available on their website. This report provided a snapshot in time of test takers—based on self-identified ethnicity. As we discussed in prior meetings the ethnicity, age and years since graduation are some of the significant factors identified in the ASWB report.

ASWB is making changes in the exam, starting January 1, 2023 and hopes to complete by 2025 changing some multiple-choice questions from 4 to 3 answers reducing time pressure while maintaining examination validity. They will also update the examination experience by allowing candidates to retrieve a snack during the examination window.

Licensing laws are established to protect the public, by requiring education, experience and examination for entry to the profession, whether it is social work, medicine or one of the more than 50 professions regulated by the Department. Prior to licensure, there was limited oversight of professional practice and little recourse when patients were harmed by an incompetent or unethical practitioner.

The 2022 ASWB report provided a starting point for discussions and research into examination development and performance, to ensure that each candidate has the opportunity to pass the examination and become licensed as a social worker. The Executive Secretary of the State Board will represent the Department and continue to participate in meetings and forums regarding the examination.

The Board of Regents and the State Board are committed to policies that address diversity, equity and inclusion (DEI). In response to the report, the organization has convened information sessions and has scheduled in-person and on-line community meetings. Anyone who is interested can sign up for those meetings on the ASWB website [Contributing to the conversation - Association of Social Work Boards \(aswb.org\)](https://www.aswb.org/contributing-to-the-conversation)

In the meantime, there are no changes in the requirements for licensure under New York law. We look forward to the community discussions and further research from ASWB and others to determine what changes may be required to ensure an appropriate examination for licensure.

The meeting was opened for discussion and questions. There was no disagreement with the information provided and ongoing discussions will occur over time.

Other Business

Board members brought up a few issues they would like to discuss at the next Board meeting. The first issue concerns the emergency regulation approved by the Board of Regents that allows supervision by telephone or video technology (remote supervision). Another issue that needs discussion is the definition of clinical experience for the LCSW license and how that requirement in regulation can be enforced. Both topics will be included on the agenda for the next Board meeting.

Adjournment

The meeting was adjourned at 11:49 AM by Chair Celisia Street.

Minutes submitted by,

A handwritten signature in black ink, appearing to read "Evan J. Seiden". The signature is fluid and cursive, with a large initial "E" and "S".

Evan Seiden MBA, LCSW-R
Executive Secretary
State Board for Social Work
State Board for Mental Health Practitioners

Acceptable LMSW Supervision Requirements (and Tele-supervision) (June 2023)

LMSW supervision requirements while working toward the LCSW can be found below and on this website:

<https://www.op.nysed.gov/professions/licensed-clinical-social-worker/license-requirements>

Supervision

A LMSW or other qualified individual seeking to meet the experience requirements for licensure as a Licensed Clinical Social Worker must be under the supervision of a qualified supervisor, as defined in the Education Law and regulations. Supervision of the clinical social work services provided by an LMSW or qualified individual seeking licensure must meet the following conditions:

Supervision of the clinical social work services provided by the applicant shall consist of contact between the applicant and supervisor during which:

- the applicant apprises the supervisor of the diagnosis and treatment of each client;
- the applicant's cases are discussed;
- the supervisor provides the applicant with oversight and guidance in diagnosing and treating clients;
- the supervisor regularly reviews and evaluates the professional work of the applicant; and
- **the supervisor provides at least 100 hours of in-person individual or group clinical supervision**, distributed appropriately over the period of the supervised experience.

The supervisor is responsible for maintaining records of the supervised experience, including client contact hours and supervision hours, and then submitting verification of the applicant's experience to the Department on [Form 4B](#).

The Education Law requires three years of full-time experience or the part-time equivalent over a continuous period not to exceed six years; this may not be reduced, even if the applicant provides more than 2,000 client contact hours in less time.

All client contact hours in diagnosis, psychotherapy and assessment-based treatment planning may be counted toward licensure, if appropriately supervised. The supervisor in each setting should record the client contact hours and supervision hours and submit verification on [Form 4B](#).

Supervisor Responsibility:

The supervisor is legally and professionally responsible for the diagnosis and treatment of each client and must have access to all relevant information. It is the responsibility of

the employer to provide appropriate supervision as an LMSW may only practice clinical social work under supervision. Any arrangements for third-party supervision must include a written agreement between the employer, third-party supervisor and the LMSW to specify the supervisor's access to clients and client records to ensure appropriate supervision of the LMSW. The supervisor must be employed by the employer, not the LMSW. The client must be informed of how confidential information is handled in the case of third-party supervision and how to raise questions with the employer and/or third-party supervisor.

Supervision during the Covid-19 Pandemic

The information listed below and on the following website describes how in-person supervision changed during Covid-19: <https://www.op.nysed.gov/about/covid-19-frequently-asked-questions>

21. Can a permit holder, intern or other **person only authorized to practice under supervision (supervisees)** provide client services by distance technology rather than in-person? Is remote supervision allowed?

Yes. The supervisor remains responsible for the assessment, evaluation and treatment of each client seen by the supervisee. Supervised client contact hours completed through distance technology may be submitted on Form 4B, as part of the supervised experience requirement for licensure and do not have to be designated as such.

The Board of Regents approved an [emergency regulation](#) that allows supervision by telephone or video technology to continue beyond the State of Emergency. The supervisor remains responsible for the assessment, evaluation, diagnosis and treatment of each client seen under supervision.

All treatment and supervision provided through distance technology must be completed through secure means, whether on the telephone or through the use of video conferencing. Texting and email are not acceptable forms of supervision at any time, other than to notify the supervisor of an urgent situation that requires intervention.

Telepractice Guidance was also provided during the pandemic, which is listed below and found on the following website: <https://www.op.nysed.gov/about/covid-19>

Telepractice Guidance

Telepractice is defined as the provision of professional service over geographical distances by means of modern telecommunications technology. Telepractice is used by many professionals in a growing number of areas including, but not limited to, health care (telehealth). As a general rule, New York State Public Health Law Article 29-G

authorizes reimbursement for health care services provided by telehealth means. Public Health Law §2999-cc defines, among other things, the following professions as telehealth providers: physicians, physician assistants, dentists, nurse practitioners, registered professional nurses when such nurse is receiving patient-specific health information or medical data at a distant site by means of remote patient monitoring, podiatrists, optometrists, psychologists, social workers, speech language pathologists, audiologists, midwives, physical therapists and occupational therapists. For more information on the requirements of telehealth, please review [New York State Public Health Law Article 29-G](#).

In response to the COVID-19 emergency disaster, Governor Cuomo has issued a number of [Executive Orders \(EOs\)](#), including Executive Order 202.1 which temporarily Suspended and modified Section 2999-cc of the Public Health Law and any regulatory provisions promulgated thereunder by the Department of Health, the Office of Mental Health, the Office of Addiction Services and Supports, and the Office for People with Developmental Disabilities, to the extent necessary to allow additional telehealth provider categories and modalities, to permit other types of practitioners to deliver services within their scopes of practice and to authorize the use of certain technologies for the delivery of health care services to established patients, pursuant to such limitations as the commissioners of such agencies may determine appropriate.

Additional Telepractice Information and Resources

[General Telepractice Information for all Professions](#)

Profession-Specific Telepractice Guidance:

- [Applied Behavior Analysis](#)
- [Audiology](#)
- [Mental Health Practitioners](#)
- [Physical Therapy](#)
- [Psychology](#)
- [Social Work](#)
- [Speech-Language Pathology](#)

Department of Health:

- Telehealth laws Article 29-G: <https://www.nysenate.gov/legislation/laws/PBH/A29-G>
- Medicaid Update:
 - https://www.health.ny.gov/health_care/medicaid/program/update/2019/2019-02_speced.htm
 - [Telepractice Memo](#)

Department of Financial Services:

- https://www.dfs.ny.gov/reports_and_publications/press_releases/pr20203171

- https://www.dfs.ny.gov/industry_guidance/circular_letters/cl2020_06

Department of Health and Human Services: <https://www.hhs.gov/>

Centers for Medicare & Medicaid Services: <https://www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet>

Telepractice Guidelines written prior to the pandemic can be found listed below and on the following Social Work Professional Practice website:

<https://www.op.nysed.gov/professions/licensed-clinical-social-worker/professional-practice>

Telepractice

Advisory Notice: The following advisory constitutes a general discussion of the issues that may arise when a licensee provides professional services. The discussion is intended to alert practitioners to questions and concerns that they may want to consider with their legal counsel, if necessary, and are not to be construed as a directive or other requirement to take any particular action. The Advisory cannot be used as the basis for a charge of professional misconduct. The statements are generally based upon statutory and regulatory provisions relating to the practice of psychology, social work, creative arts therapy, marriage and family therapy, mental health counseling, and psychoanalysis, but are not legal interpretations of any of these provisions. The citations to the provisions of law, regulation and Regents Rules are included to add clarity to the discussion.

What is Telepractice?

Telepractice includes the use of telecommunications and web-based applications to provide assessment, diagnosis, intervention, consultation, supervision, education and information across distance. It may include providing non-face-to-face psychological, mental health, marriage and family, creative arts, psychoanalytic, psychotherapy and social work services via technology such as telephone, e-mail, chat and videoconferencing.

Telecommunications and Electronic Medical Records (EMRs) may include computer files, documents, e-mails, interactive media sessions, CD's, audio-tapes, video-tapes, fax images, phone messages and text messages.

Telepractice Issues

Telepractice issues of concern to practitioners include the therapeutic relationship, specifically, one's ability to maintain an effective working relationship in spite of physical distance. Potential licensure and jurisdiction issues mean that practitioners should become familiar with and abide by competency and licensure requirements when

practicing across state and national borders. In order to practice in a safe, legal, and confidential manner, it is important for licensed mental health professionals to understand the technology and potential limitations to confidentiality of both the software and hardware they are using. In order to ensure confidentiality, encryption and other technologies should be used whenever possible. Guidance regarding specific telepractice issues appears below.

To the extent it involves providing professional services in a jurisdiction other than the one in which the practitioner is physically located, telepractice raises the issue of the jurisdiction or jurisdictions in which the practitioner must be licensed. In New York State, a practitioner must hold a New York license, or be otherwise authorized to practice, when providing professional services to a patient located in New York or when the practitioner is located in New York.

EMRs: Same Responsibilities as any Other Medical Record

EMRs are subject to the same confidentiality and privilege as any other medical record. Privacy and security should be maintained and, to ensure this, encryption or password-restricted access may be necessary. It is necessary that EMRs can be reproduced if requested by patients or by court order and that fees charged for such reproduction are consistent with New York laws and regulations. Practitioners should also be aware that they are responsible for maintaining the confidentiality of the records of their patients and, therefore, must ensure that the billing or storage vendors engaged by them agree to follow all relevant privacy and security rules regarding medical records, and that the records will not be destroyed or released unless so directed by the licensee.

Cautions Regarding e-Data

One must remain cognizant of the fact that cell phones, e-mail, and text messages may not be secure modes of communication, specifically recognizing the question of who has access to the communication device and/or communication. Web-based applications vary in the level of security that is provided. In addition, digital storage devices (including computer hard drives) and fax and copy machines can retain images unless they are electronically wiped. Before disposing of a computer, it is the licensed professional's responsibility to ensure that all patient information is securely deleted. It is strongly recommended that once the memory is cleared of patient information, the device should be destroyed in a secure manner. It is important that patients are informed that there are risks to electronic communication. In addition, one should have a contingency plan in the event that telecommunications fail (i.e., another way to contact patient). Finally, one must be aware that there is always a potential for an individual to misrepresent his/her name, presenting problem or other information when engaging in electronic communications and the licensee bears responsibility for assuring the identity of the client.

Social Media Telecommunications

Social Media has great potential as a public education tool that can be used to reach a wide audience with information about mental health. One should, however, remain aware that a professional web presence must be consistent with laws and regulations related to advertising and engaging in professional relationships. A personal web presence can potentially involve issues of boundary violations and should not allow client access.

Example: Friend requests on social media sites should be confined to friends and colleagues, while not accepting such requests from clients or potential clients. An individual licensed under Title VIII of the Education Law may be charged with unprofessional conduct under section 29.1 of the Rules of the Board of Regents for advertising that is not in the public interest if he/she engages in advertising on web-postings that are fraudulent, false, deceptive or misleading, to the same extent as advertising in more traditional media.

While a licensed professional cannot be responsible for the client's social media interactions, when appropriate, the licensee should provide information to patients or discuss with them some of the pitfalls of social media as it may relate to the receipt of professional services. Due to the persistent stigma about mental illness and treatment, the licensed professional may want to point out to the client that certain activities may provide more information than the client is comfortable with sharing in the social media community, such as:

- posting a status update of "waiting in Dr. Smith's office for my weekly psychotherapy session" or
- allowing the GPS device in his/her smart-phone, tablet or computer to identify his/her location as the office of "Dr. Jones, Psychotherapist."

The licensee may be wise to consider including similar examples as a cautionary note to be discussed as part of the informed consent process, to avoid unfortunate, accidental disclosures of information.

Videoconferencing

Videoconferencing includes varied points of delivery, including hospitals/ER's, Community Mental Health Centers (CMHCs), doctors' offices, institutional settings (e.g., nursing homes, prisons, schools), and clients' homes

Clinical applications of videoconferencing include clinical interviews for intake and diagnosis, consultation with other providers including the referring provider and with family members, emergency pre- and post-hospitalization evaluations, outpatient psychotherapy (scheduled and crisis), medication management or consultation, and professional consultation.

Videoconferencing may include supervision and consultation. A licensed professional who is consulting with other health professionals or, if allowed by State law and regulation, receiving supervision through video technology, should exercise caution in these interactions, in order to ensure the confidentiality of patient information. A licensed professional remains responsible for the security of patient communications and information to the same extent as if the session or consultation were occurring with all parties in the practitioner's office. Prior to using any videoconferencing technology, the licensed professional should verify the encryption and security of data to protect the confidentiality of patient information.

Potential benefits of videoconferencing may include that it:

- can reduce costs to both client and practitioner,
- can reach individuals who might not otherwise have access to treatment,
- has overall empirical support for outcomes similar to traditional psychotherapies, and
- clients report positive experiences with videoconferencing.

Concerns regarding videoconferencing include whether practitioners are:

- ensuring that clients are able to adequately participate and understand the appropriate uses of videoconferencing (Informed Consent);
- whether videoconferencing technologies that are used are secure;
- whether the empirical validation of this methodology is sufficient; and
- whether individual states require that practitioners are qualified and licensed to practice within that state.

If using telecommunications, it is recommended that patients are informed there are risks to electronic communications. Clinicians should also have a contingency plan for telecommunications failures (e.g., a back-up way of contacting the patient). Patients should be informed as to how they can verify the clinician's professional license (the license status of all New York licensees can be ascertained [here](#)), and clinicians should be aware of the potential for patient misrepresentation.

Avatars & Virtual Environments (VE)

Avatars and virtual environments (VE) are increasingly being researched for clinical application possibilities. Applications being investigated include treatment of depression, eating disorders, social anxiety and other phobias, autism spectrum disorders, PTSD and schizophrenia.

Avatars are used to create a virtual representation of the client, the practitioner (agent) or both; however, it may be unclear whether the "agent" is an actual trained clinician or a computer programmer. *Professional services must be rendered only by those authorized to do so.* VEs are used to create planned and controlled environments that allow the client to be exposed to a situation or to explore an environment that relates to the issues of focus.

The potential benefits of avatars and VEs include some empirical support for the effectiveness of these techniques, reduction of costs to both client and practitioner, and greater accessibility to environments for exposure therapies.

Concerns regarding avatars and VEs include determining who the virtual therapeutic agents are, ensuring that they are authorized to provide professional services, ; defining the roles and training of virtual therapeutic agents; and determining whether these techniques are safe and effective, whether the technologies used are secure, and whether each client knows how to exit the program if under duress (e.g., during an immersion).

Effective & Legal Telepractice

Telepractice should be considered a modality and applied only as appropriate to address the client's needs. In order to engage in telepractice in an effective, safe and legal manner, licensed mental health professionals should:

- Develop procedures for and obtain informed consent prior to providing remote services.
- Ensure that informed consent includes both benefits and risks.
- Conduct an initial assessment of each client to determine whether the telepractice modality is appropriate, given the client's treatment needs. If not, determine available alternatives and consider referrals.
- Learn relevant telepractice laws across all jurisdictions in which they will be providing online services before such services are provided.
- Not practice outside the scope of their license and training.
- Attend to issues of danger to self or others in duty to warn and protect situations, and to mandated reporting requirements in accordance with law.
- Make arrangements, as appropriate, in the consumer's local area to address emergency and crisis situations that may arise, and be knowledgeable of community resources that may be accessed in such situations.
- Ensure the accuracy of advertising and public statements about telephone and online services offered without making statements that imply a level of treatment or effectiveness that is beyond what is actually provided.
- Remain aware of the limitations of the online services provided and the technology used to offer these services.
- Evaluate online services offered to ensure their effectiveness and to modify them, as needed, on the basis of outcome data to most effectively meet client needs.
- Stay within one's scope of practice and limits of competence. As with all emerging areas of practice, one should use caution to ensure competence of the practitioner and the protection of clients.
- Attend to cultural, ethnic, language and other differences that may impact on their ability to effectively communicate with and treat clients.
- Employ professional standards of practice that include adequate documentation and record keeping, adherence to termination and abandonment guidelines, and appropriate practices for fees and financial arrangements.

- Verify the client's state of residence prior to providing telepractice services, as this may dictate those states in which a practitioner must be licensed.
- Possess the technological competence and clinical competence necessary to provide services via the online modality offered.
- Consult knowledgeable colleagues, relevant statutes, applicable ethical codes and available professional standards when unsure of any of the above.
- Consult with an attorney specifically experienced in these matters when legal questions arise.

Acceptable Experience Requirements to obtain the LCSW (June 2023)

The following information can be found on this website:

<https://www.op.nysed.gov/professions/licensed-clinical-social-worker/license-requirements>

Experience Requirements

To meet the experience requirement for licensure as an LCSW, you must have completed at least 36 months (three years) of supervised experience in diagnosis, psychotherapy and assessment-based treatment planning, as defined in [Section 7704](#) of the Education Law after receipt of the Master of Social Work Degree.

While an applicant for licensure as an LCSW may provide a range of services that are defined in the Education Law, the only acceptable experience is in diagnosis, psychotherapy and assessment-based treatment planning. The applicant may submit a Plan for Supervised Experience ([Form 6](#)) to the State Board for approval prior to starting the supervised experience for licensure in New York.

Experience obtained in New York must be obtained as a licensed master social worker (LMSW) or limited permit holder, except the Department may, in limited circumstances, accept other experience where an applicant demonstrates that such experience was obtained in an authorized setting under the supervision of a qualified supervisor.

Experience obtained in another jurisdiction must be obtained after the applicant completes the master's degree program in social work required for licensure in licensed clinical social work, as prescribed in [Section 74.1 \(c\)](#) of the Commissioner's Regulations, and such experience must be obtained in a setting authorized in such jurisdiction to provide such services and be under the supervision of a qualified supervisor acceptable to the Department.

All experience that is completed in New York State must be in a setting that is legally authorized to provide psychotherapy and clinical social work services.

An acceptable setting is:

- A professional corporation, professional limited liability partnership or professional limited liability corporation that is authorized to provide services that include psychotherapy;
- A professional service corporation, registered limited liability partnership, or professional service limited liability company authorized to provide services that are within the scope of practice of licensed clinical social work;
- A sole proprietorship owned by a licensee who provides services that are within the scope of his or her profession and services that are within the scope of licensed clinical social work;
- A professional partnership owned by licensees who provide services that are within the scope of practice of licensed clinical social work;

- A program or service operated, regulated, funded, or approved by the Department of Mental Hygiene, the Office of Children and Family Services, the Department of Corrections and Community Supervision, the Office of Temporary and Disability Assistance, the State Office for the Aging and the Department of Health or a local governmental unit as that term is defined in section 41.03 of the Mental Hygiene Law or a social services district as defined in section 61 of the Social Services Law to provide services that are within the scope of practice of licensed clinical social work;
- An entity holding a waiver issued by the Department pursuant to section 6503-a or 6503-b of the Education Law to provide services that are within the scope of practice of licensed clinical social work;
- A program or facility authorized under federal law to provide services that are within the scope of practice of licensed clinical social work;
- A public elementary, middle or high school authorized by the Education Department to provide school social work services as defined in Part 80-2.3 of the Commissioner's Regulations, including clinical social work;
- An entity authorized under New York Law or the laws of the jurisdiction in which the entity is located to provide services that are within the scope of practice of licensed clinical social work, including psychotherapy.

The supervisor who submits Form 4B to verify experience is responsible for including the certificate of incorporation for the professional entity, the operating certificate or other authorization for an authorized program or service, a waiver issued by the Department, or other documentation, acceptable to the Department, to demonstrate the setting's authority to provide professional social work services in New York. For experience completed outside New York, the applicant and supervisor must provide appropriate documentation for the setting in that jurisdiction.

In New York State, a general business corporation or not-for-profit corporation may **not** provide professional services or employ licensed professionals unless authorized under law. The certificate of incorporation should clarify the purpose of the entity and whether licensed professionals may be employed to provide services that are restricted under Title VIII of the Education Law.

It is your responsibility to practice only under a qualified supervisor and in an authorized setting. You should review the supervisor qualifications and acceptable experience with an employer before you accept a position practicing clinical social work.

*Note: The exemption is defined in [Section 8 of Part Y of Chapter 57 of the Laws of 2018](#).

Definition of Terms

Licensed Clinical Social Worker: The practice of licensed clinical social work encompasses the scope of practice of licensed master social work and, in addition, includes the diagnosis of mental, emotional, behavioral, addictive and developmental disorders and disabilities and of the psychosocial aspects of illness, injury, disability and

impairment undertaken within a psychosocial framework; administration and interpretation of tests and measures of psychosocial functioning; development and implementation of appropriate assessment-based treatment plans; and the provision of crisis oriented psychotherapy and brief, short-term and long-term psychotherapy and psychotherapeutic treatment to individuals, couples, families and groups, habilitation, psychoanalysis and behavior therapy; all undertaken for the purpose of preventing, assessing, treating, ameliorating and resolving psychosocial dysfunction with the goal of maintaining and enhancing the mental, emotional, behavioral and social functioning and well-being of individuals, couples, families, small groups, organizations, communities and society.

Diagnosis: Diagnosis in the context of licensed clinical social work practice is the process of distinguishing, beyond general social work assessment, between similar mental, emotional, behavioral, developmental and addictive disorders, impairments and disabilities within a psychosocial framework on the basis of their similar and unique characteristics consistent with accepted classification systems.

Psychotherapy: Psychotherapy in the context of licensed clinical social work practice is the use of verbal methods in interpersonal relationships with the intent of assisting a person or persons to modify attitudes and behavior which are intellectually, socially, or emotionally maladaptive.

Assessment-based treatment plans: Development of assessment-based treatment plans in the context of licensed clinical social work practice refers to the development of an integrated plan of prioritized interventions, that is based on the diagnosis and psychosocial assessment of the client, to address mental, emotional, behavioral, developmental and addictive disorders, impairments and disabilities, reactions to illnesses, injuries, disabilities and impairments, and social problems.

Additional information may be found listed below and on the following website:
<https://www.op.nysed.gov/professions/licensed-clinical-social-worker/faq-licensure-practice>

14. What is acceptable clinical social work experience for licensure as an LCSW?

The Education Law requires an applicant for licensure as an LCSW to complete three years of full-time (or the part-time equivalent in no more than six years) supervised, post-degree experience in diagnosis, psychotherapy, and assessment-based treatment plans, acceptable to the Department.

Acceptable full-time experience in diagnosis, psychotherapy and assessment-based treatment planning is defined as at least 2,000 client contact hours over a continuous period of not less than 36 months and not more than 72 months. An applicant must complete the 2,000 client contact hours under a qualified supervisor in a setting acceptable to the Department. The practice of psychotherapy is defined in law as verbal

methods in interpersonal relationships to assist a person or persons to modify attitudes and behavior which are intellectually, socially, or emotionally maladaptive.

15. If I provide case management, school social work, discharge planning, counseling, and client advocacy can I qualify for licensure as an LCSW?

No. These services constitute direct clinical social work practice with clients but do not meet the experience requirements for the LCSW. Only experience in diagnosis, psychotherapy, and assessment-based planning are acceptable under the Education Law. Typically, diagnosis, psychotherapy and assessment based treatment planning are performed in mental health settings, substance abuse programs and similar settings, including a professional practice.

16. What is acceptable supervision in the practice of clinical social work?

The Education Law defines qualified supervisors as licensed clinical social workers, licensed psychologists and psychiatrists; no other professions are allowed to supervise. The supervisor must have been licensed before starting to supervise you. The supervising psychologist must be qualified in psychotherapy as determined by the State Board; the psychologist must submit Form 4Q to verify experience and training.

The supervisor must provide 100 hours of individual or group supervision in diagnosis, psychotherapy and assessment-based treatment planning, distributed over a period of at least 36 months and not more than 72 months. The supervisor is responsible for the diagnosis and treatment of each client, must discuss the applicant's cases, provide the applicant with oversight and guidance in diagnosing and treating clients, and regularly review and evaluate the applicant's professional work.

If the LMSW is practicing clinical social work but is not seeking licensure, the LMSW must receive at least two hours per month of in-person, individual or group supervision when providing clinical social work services.

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OFFICIAL COMPILATION OF CODES, RULES AND REGULATIONS OF THE STATE
OF NEW YORK
TITLE 8. EDUCATION DEPARTMENT
CHAPTER II. REGULATIONS OF THE COMMISSIONER
SUBCHAPTER C. TEACHERS
PART 80. REQUIREMENTS FOR TEACHERS' CERTIFICATES AND TEACHING
PRACTICE
SUBPART 80-2. REQUIREMENTS FOR CERTIFICATES IN THE CLASSROOM
TEACHING SERVICE APPLIED AND QUALIFIED FOR ON OR BEFORE FEBRUARY
1, 2004, THE ADMINISTRATIVE AND SUPERVISORY SERVICE APPLIED FOR ON
OR BEFORE SEPTEMBER 1, 2006, AND THE PUPIL PERSONNEL SERVICE
(EXCEPT FOR CERTIFICATES FOR SCHOOL COUNSELING APPLIED AND
QUALIFIED FOR ON OR AFTER FEBRUARY 2, 2023)

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80-2.3 Certificates valid for pupil personnel service (school attendance teacher, school counselor, school dental hygiene teacher, school nurse-teacher, school psychologist and school social worker).

Preparation: to obtain a certificate in a pupil personnel service, a candidate shall meet the requirements set forth in this section.

(a) School attendance teacher.

(1) Provisional certificate.

(i) The candidate shall hold a baccalaureate degree from a regionally accredited institution of higher education or from an institution approved by the department and shall have completed in addition/or including six semester hours of professional education appropriate to the function of the school attendance teacher.

(ii) Time validity. The provisional certificate shall be valid for five years from date of issuance.

(2) Permanent certificate. The candidate shall have completed, in addition to the requirements for the provisional certificate, two years of school experience in the field of pupil personnel services and a master's degree in the field of pupil personnel service.

(b) School counselor.

(1) Provisional certificate.

(i) The candidate shall hold a baccalaureate degree from a regionally accredited institution of higher education or from an institution approved by the department, and in addition shall have completed 30 semester hours of approved graduate study in the field of school counseling, including supervised practice in guidance.

(ii) Time validity. The provisional certificate shall be valid for five years from date of issuance.

(2) Permanent certificate. The candidate shall have completed, in addition to the requirements for the provisional certificate, two years of school experience in the field of pupil personnel services and 30 semester hours of graduate study in the field of school

counseling. Within the total program of preparation, the candidate shall have been awarded a master's degree.

(c) School dental hygiene teacher.

(1) Provisional certificate.

(i) The candidate shall have completed, in addition to an associate degree at an institution approved for the preparation of dental hygienists, 30 semester hours of collegiate study toward meeting the requirements for a baccalaureate degree, including six semester hours of professional education appropriate to the function of the school dental hygiene teacher.

(ii) The candidate shall hold a valid New York State registration as a dental hygienist.

(iii) Time validity. This certificate will be valid for five years from date of issuance.

(2) Permanent certificate. The candidate shall have completed, in addition to the requirements for the provisional certificate, two years of school experience in the field of pupil personnel services and a four-year program of preparation culminating in a baccalaureate degree from a regionally accredited institution of higher education or from an institution approved by the department. Within the total program of preparation, the candidate shall have completed 18 semester hours of professional education appropriate to the function of the school dental hygienist.

(d) School nurse-teacher.

(1) Provisional certificate.

(i) The candidate shall hold a baccalaureate degree from a regionally accredited institution of higher education or from an institution approved by the department, including six semester hours of study in professional education appropriate to the function of the school nurse-teacher.

(ii) The candidate shall hold a valid New York State registration as a professional nurse.

(iii) Time validity. The certificate shall be valid for five years from date of issuance.

(2) Permanent certificate. The candidate shall have completed, in addition to the requirements for the provisional certificate, two years of school experience in the field of pupil personnel services and a master's degree in the field of pupil personnel service.

(e) School psychologist.

(1) Provisional certificate.

(i) The provisional certificate shall be valid for five years from the date of issuance.

(ii) The candidate shall hold a baccalaureate degree from a regionally accredited institution of higher education or from an institution approved by the department, and shall have completed in addition 60 semester hours of graduate study, including a college-supervised internship in the field of school psychology.

(iii) Exception for licensed psychologists with demonstrated bilingual skills.

(a) In lieu of meeting the education requirements prescribed in subparagraph (ii) of this paragraph, a candidate may meet the following requirements for a provisional certificate as a school psychologist:

(1) the candidate must request in writing an exception to stated preparation under this subparagraph;

(2) the candidate must submit an application for a provisional certificate to the department;

- (3) the candidate must be registered and hold a New York State license as a psychologist, pursuant to title VIII of the Education Law;
- (4) the candidate must document a commitment for employment as a school psychologist by a school district or other entity required by law to employ certified school psychologists in which the employer agrees to provide the candidate with mentoring by a certified school psychologist in the first year of employment under the provisional certificate; and
- (5) the candidate must meet all requirements for an interim bilingual education extension, as prescribed in section 80-2.9(a)(5) of this Subpart, except the requirement that the candidate hold a provisional or permanent certificate as a school psychologist.
- (b) A candidate who meets the requirements of clause (a) of this subparagraph shall be issued both a provisional certificate in school psychology and an interim bilingual education extension. The provisional certificate shall have the duration prescribed in subparagraph (i) of this paragraph. In accordance with the requirements of section 80-2.9(a)(5) of this Subpart, the interim bilingual education extension shall be valid for three years from its effective date and shall not be renewable.
- (c) No provisional certificate in school psychology with an effective date that begins after September 1, 2010 shall be issued under the requirements of this subparagraph, and no interim bilingual education extension with an effective date that begins after September 1, 2010 shall be issued under the requirements of this subparagraph.
- (2) Permanent certificate. The candidate shall have completed, in addition to the requirements for the provisional certificate, two years of school experience in the field of pupil personnel services. Within the total program of preparation, the candidate shall have been awarded a master's degree.
- (f) School social worker.**
- (1) Provisional certificate.
- (i) The candidate shall hold a baccalaureate degree from a regionally accredited institution of higher education or from an institution approved by the department, and in addition shall have completed 30 semester hours of graduate study, including a supervised internship, in the field of social work.
- (ii) Time validity. The provisional certificate shall be valid for five years from date of issuance.
- (2) Permanent certificate. The candidate shall have completed two years of school experience in the field of pupil personnel services, hold the degree of master of social work or an equivalent degree as determined by the department, and be licensed and registered by the department as a licensed master social worker or a licensed clinical social worker.
- (3) Scope of practice. The provisional or permanent certificate in school social work shall authorize the holder of the certificate to practice licensed master social work, as defined in sections 7701(1) and 7702 of the Education Law, in public schools of New York State or any other school for which the law requires certification as a school social worker pursuant to Part 80 of this Title. For such individual to practice licensed clinical social work, as defined in section 7701(2) of the Education Law, in the public schools or any other location in New York State, the individual must be licensed and registered by the department as a licensed clinical social worker when performing such services,

unless such individual is exempt from licensure in licensed clinical social work pursuant to section 7706 or other provision of article 154 of the Education Law.

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Current through July 15, 2022

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