



## Notice of Intent to Adopt Rules

A copy of the proposed rules may be obtained at <https://rules.wyo.gov>

Revised June 2020

### 1. General Information

a. Agency/Board Name*			Mental Health Professions Board		
b. Agency/Board Address		c. City		d. Zip Code	
2001 Capitol Ave, Rm 127		Cheyenne		82009	
e. Name of Agency Liaison		f. Agency Liaison Telephone Number			
Greg Searls		307-777-7788			
g. Agency Liaison Email Address					
greg.searls@wyo.gov					
h. Date of Public Notice			i. Comment Period End Date		
8/5/2021			September 19, 2021		
j. Public Comment URL or Email Address:					
greg.searls@wyo.gov					

k. Program

Mental Health Professions Licensing Board

Amended Program Name (if applicable):

\* ☐ By checking this box, the agency is indicating it is exempt from certain sections of the Administrative Procedure Act including public comment period requirements. Please contact the agency for details regarding these rules.

**2. Legislative Enactment** For purposes of this Section 2, "new" only applies to regular non-emergency rules promulgated in response to a Wyoming legislative enactment not previously addressed in whole or in part by prior rulemaking and does not include rules adopted in response to a federal mandate.

a. Are these non-emergency regular rules new as per the above description and the definition of "new" in Chapter 1 of the Rules on Rules?

☐ No.

☒ Yes. If the rules are new, please provide the Legislative Chapter Numbers and Years Enacted (e.g. 2015 Session Laws Chapter 154):

2021 Session Laws Chapter 37

**3. Rule Type and Information** For purposes of this Section 3, "New" means an emergency or regular rule that has never been previously created.

a. Provide the Chapter Number, Title and Proposed Action for Each Chapter. Please use the "Additional Rule Information" form to identify additional rule chapters.

Chapter Number: 1	Chapter Name: General Provisions	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed
Amended Chapter Name (if applicable):		
Chapter Number: 3	Chapter Name: Certified Addictions Practitioner	<input checked="" type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed
Amended Chapter Name (if applicable):		
Chapter Number: 4	Chapter Name: Certified Addictions Practitioner Assistant	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed
Amended Chapter Name (if applicable):		
Chapter Number: 5	Chapter Name: Certified Mental Health Worker	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed
Amended Chapter Name (if applicable):		
Chapter Number: 6	Chapter Name: Certified Social Worker	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed
Amended Chapter Name (if applicable):		
Chapter Number: 7	Chapter Name: Provisional	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed
Amended Chapter Name (if applicable): Provisional License		



## Additional Rule Information

Revised June 2020

Include this page only if needed.

<b><u>1. General Information</u></b>			
a. Agency/Board Name* <b>Mental Health Professions Board</b>			
b. Agency/Board Address <b>2001 Capitol Ave, Rm 127</b>		c. City <b>Cheyenne</b>	d. Zip Code <b>82009</b>
e. Name of Agency Liaison <b>Greg Searls</b>		f. Agency Liaison Telephone Number <b>307-777-7788</b>	
g. Agency Liaison Email Address <b>greg.searls@wyo.gov</b>			
h. Program <b>Mental Health Professions Licensing Board</b>			
Amended Program Name (if applicable):			
<b><u>2. Rule Type and Information, Cont.</u></b>			
a. Provide the Chapter Number, Title, and Proposed Action for Each Chapter.			
Chapter Number: <b>8</b>	Chapter Name: <b>Licensed Addictions Therapist</b>	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed	
Amended Chapter Name (if applicable):			
Chapter Number: <b>9</b>	Chapter Name: <b>Licensed Clinical Social Worker</b>	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed	
Amended Chapter Name (if applicable):			
Chapter Number: <b>10</b>	Chapter Name: <b>Licensed Marriage and Family Therapist</b>	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed	
Amended Chapter Name (if applicable):			
Chapter Number: <b>11</b>	Chapter Name: <b>Licensed Professional Counselor</b>	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed	
Amended Chapter Name (if applicable):			
Chapter Number: <b>12</b>	Chapter Name: <b>Application Procedure</b>	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed	
Amended Chapter Name (if applicable):			
Chapter Number: <b>13</b>	Chapter Name: <b>Fees</b>	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed	
Amended Chapter Name (if applicable):			
Chapter Number: <b>14</b>	Chapter Name: <b>Renewal</b>	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed	
Amended Chapter Name (if applicable):			
Chapter Number: <b>15</b>	Chapter Name: <b>Professional Responsibility</b>	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed	
Amended Chapter Name (if applicable):			
Chapter Number: <b>16</b>	Chapter Name: <b>Adverse Action</b>	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed	
Amended Chapter Name (if applicable):			

If Needed



## Additional Rule Information

Revised June 2020

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g. Agency Liaison Email Address <b>greg.searls@wyo.gov</b>		
h. Program <b>Mental Health Professions Licensing Board</b>		
Amended Program Name (if applicable):		

### **2. Rule Type and Information, Cont.**

a. Provide the Chapter Number, Title, and Proposed Action for Each Chapter.

Chapter Number: <b>18</b>	Chapter Name: <b>Supervision</b>	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Repealed
Amended Chapter Name (if applicable):		
Chapter Number:	Chapter Name:	<input type="checkbox"/> New <input type="checkbox"/> Amended <input type="checkbox"/> Repealed
Amended Chapter Name (if applicable):		
Chapter Number:	Chapter Name:	<input type="checkbox"/> New <input type="checkbox"/> Amended <input type="checkbox"/> Repealed
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Amended Chapter Name (if applicable):		
Chapter Number:	Chapter Name:	<input type="checkbox"/> New <input type="checkbox"/> Amended <input type="checkbox"/> Repealed
Amended Chapter Name (if applicable):		

If Needed

#### **4. Public Comments and Hearing Information**

a. A public hearing on the proposed rules has been scheduled. ☒ No. ☐ Yes. Please complete the boxes below.

Date:	Time:	City:	Location:

b. What is the manner in which interested persons may present their views on the rulemaking action?

☒ By submitting written comments to the Agency at the physical and/or email address listed in Section 1 above.

☐ At the following URL: \_\_\_\_\_

A public hearing will be held if requested by 25 persons, a government subdivision, or by an association having not less than 25 members. Requests for a public hearing may be submitted:

☒ To the Agency at the physical and/or email address listed in Section 1 above.

☐ At the following URL: \_\_\_\_\_

c. Any person may urge the Agency not to adopt the rules and request the Agency to state its reasons for overruling the consideration urged against adoption. Requests for an agency response must be made prior to, or within thirty (30) days after adoption, of the rule, addressed to the Agency and Agency Liaison listed in Section 1 above.

#### **5. Federal Law Requirements**

a. These rules are created/amended/repealed to comply with federal law or regulatory requirements. ☒ No. ☐ Yes. Please complete the boxes below.

Applicable Federal Law or Regulation Citation:

Indicate one (1):

☐ The proposed rules meet, but do not exceed, minimum federal requirements.

☐ The proposed rules exceed minimum federal requirements.

Any person wishing to object to the accuracy of any information provided by the Agency under this item should submit their objections prior to final adoption to:

☐ To the Agency at the physical and/or email address listed in Section 1 above.

☐ At the following URL: \_\_\_\_\_

#### **6. State Statutory Requirements**

a. Indicate one (1):

☒ The proposed rule change *MEETS* minimum substantive statutory requirements.

☐ The proposed rule change *EXCEEDS* minimum substantive statutory requirements. Please attach a statement explaining the reason that the rules exceed the requirements.

b. ☒ The Agency has completed a takings assessment as required by W.S. 9-5-304. A copy of the assessment used to evaluate the proposed rules may be obtained:

☒ By contacting the Agency at the physical and/or email address listed in Section 1 above.

☐ At the following URL: \_\_\_\_\_

## **7. Additional APA Provisions**

a. Complete all that apply in regards to uniform rules:

☒ These rules are not impacted by the uniform rules identified in the Administrative Procedure Act, W.S. 16-3-103(j).

☐ The following chapters do not differ from the uniform rules identified in the Administrative Procedure Act, W.S. 16-3-103(j):

\_\_\_\_\_  
(Provide chapter numbers)

☐ These chapters differ from the uniform rules identified in the Administrative Procedure Act, W.S. 16-3-103(j) (see Statement of Principal Reasons).

\_\_\_\_\_  
(Provide chapter numbers)

b. Checklist

☒ The Statement of Principal Reasons is attached to this Notice and, in compliance with *Tri-State Generation and Transmission Association, Inc. v. Environmental Quality Council*, 590 P.2d 1324 (Wyo. 1979), includes a brief statement of the substance or terms of the rule and the basis and purpose of the rule.

☐ If applicable: In consultation with the Attorney General's Office, the Agency's Attorney General representative concurs that strike and underscore is not required as the proposed amendments are pervasive (Chapter 3, *Types of Rules Filings*, Section 1, Proposed Rules, of the Rules on Rules).

## **8. Authorization**

a. I certify that the foregoing information is correct.

<i>Printed Name of Authorized Individual</i>	Greg Searls
<i>Title of Authorized Individual</i>	Executive Director
<i>Date of Authorization</i>	8/3/2021

## **STATEMENT OF REASONS**

### **FOR AMENDMENTS TO RULES**

Pursuant to authority granted under the Mental Health Professions Practice Act, W.S. 33-38105(a), the Mental Health Professions Licensing Board proposes to amend Chapters 1, 3, 4, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 17, and 18 of its rules.

The Board is proposing the changes to meet the requirements of legislative changes including the new terminology from human resource discipline to human behavioral discipline, the creation of the Certified Mental Health Worker as a full time certification, the establishment of a new pathway to certification as a Certified Addictions Practitioner, and the requirement to obtain background information as part of the application and renewal process. Background information will be obtained through both a fingerprint background check and continuous query of the National Practitioners Data Base so that if any state reports discipline on a license holder, the Board would be notified as well.

The Board has also included language in the certification and licensure chapters to include that the exam requirement must have been met within the previous five (5) years for initial licensure. This requirement is to ensure that the exam is still relevant to the current practice of the ever changing profession and the current standards established by the exam organizations through their review of the examination materials.

The language in Chapter 5 for the Certified Mental Health Worker is to establish a new standard to allow those with a bachelor's degree to assist in providing services to the people of Wyoming. This level of practice is not regulated most states and are establishing a new level of service based upon using similar standard as the other certification levels already established by the Statutes and Rules.

The Board, by policy, has previously accepted hours completed outside of the Wyoming for completion of a provisional license. The policy is now being put into Rule in Chapter 7 so that the policy and the requirements for hours completed elsewhere are clearly articulated.

The changes in Chapter 9 are to clarify that direct client contact hours must be clinical in nature as established by Wyoming Statute. The Board felt this change was necessary as there are various types of social work and not all of them are clinical in nature as defined in Wyoming.

Chapter 10 includes changes to keep the standards of equivalency in Wyoming to include areas of educational importance as defined by the accredited programs. It also includes a reduction of hours in the practicum and internship to mirror the requirements in an accredited program.

The Board has also added additional ethical requirements and reasons to take action against a licensee or certificate holder as part of the Professional Responsibility and Adverse Action chapters. The changes were driven by recent complaints received by the Board and issues brought forth by constituents.

Typographical and editing errors and fixes are proposed as necessary in all Chapters including the removal of “and/or” and the proper use of acronyms for defined terms.

Specific changes in each Chapter are outline below.

#### **Chapter 1 (General Provisions):**

- Section 1. Added Contact Hour definition to this Chapter from Chapter 14 as it is used in multiple chapters.
- Section 1. Renumbered the sections as appropriate.
- Section 1. Removed “Degree in Human Resource Discipline” to reflect the changes in HB0004.

#### **Chapter 3 (CAP):**

- Section 4. Added language that the exam must be taken within 5 years of the application unless applying for licensure by reciprocity.
- Section 5. Added language outlining the requirements for Certification by experience created by HEA 0019 of the 2021 Session. The language outlines what must be done as part of the 2,000 hours created in the legislation.
- Section 2 and 6. Changed human resource discipline language to human behavioral discipline.

#### **Chapter 4 (CAPA):**

- Section 4. Added language that the exam must be taken within 5 years of the application unless applying for licensure by reciprocity.
- Section 5. Changed human resource discipline language to human behavioral discipline.

#### **Chapter 5 (CMHW)**

- Section 1. Added language to define Certified Mental Health Worker.
- Sections 2, 3, 4, 5. Added language to establish general requirements, education requirements, experience requirements, and examination requirements for certification.
- Section 6. Added language for certification by reciprocity similar to the language of

existing chapters.

- Section 7. Added language to clarify when the term Certified Mental Health Worker can be used.

#### **Chapter 6 (CSW):**

- Section 4. Added language that the exam must be taken within 5 years of the application unless applying for licensure by reciprocity.

#### **Chapter 7 (Provisional):**

- Section 1. Added language limiting the number of provisional licenses an applicant can have in each of the disciplines licensed by the Board.
- Section 4. Added language to provide requirements for experience, clinical, and supervision hours that may be completed in a jurisdiction other than Wyoming.
- Section 5. Added language, similar to the licensing chapters, on the delivery of services and the means a provisional licensee may use to provide services to clients.

#### **Chapter 8 (LAT):**

- Section 5. Added language that the exam must be taken within 5 years of the application unless applying for licensure by reciprocity or by completing the provisional license.
- Section 7. Changed human resource discipline language to human behavioral discipline

#### **Chapter 9 (LCSW):**

- Section 4. Added language to clarify that direct client contact hours are clinical in nature as defined in the Statute.
- Section 5. Added language that the exam must be taken within 5 years of the application unless applying for licensure by reciprocity or by completing the provisional license.

#### **Chapter 10 (LMFT):**

- Section 3. Added the new area of study required by the national accreditation body for instruction in teletherapy.
- Section 3. Updated the language for the practicum and internship requirements to reflect the decrease in hours required similar to the national accreditation body.
- Section 5. Added language that the exam must be taken within 5 years of the application unless applying for licensure by reciprocity or by completing the provisional license.



## **Chapter 11 (LPC):**

- Section 5. Added language that the exam must be taken within 5 years of the application unless applying for licensure by reciprocity or by completing the provisional license.

## **Chapter 12 (Application Procedure):**

- Section 2. Added language to clarify that a course cannot be used to meet the requirements of more than one area of education when an applicant must fill out the transcript evaluation form to show their education is equivalent to the requirements in Rule.
- Section 2. Added language requiring fingerprints for licensure as required by Statute.
- Section 2. Added language to allow the Board to track discipline in other states through the National Practitioners Data Base.

## **Chapter 13 (Fees):**

- Section 1. Added the fees for background checks and queries through the National Practitioners Data Base.
- Section 3. Changed the language to include all fees be paid before the Board considers the application for issuance of a certificate or license.

## **Chapter 14 (Renewal):**

- Section 2. Removed the definition of “Contact Hour” that will now appear in Chapter 1.
- Section 3. Added language requiring fingerprints for licensure as required by Statute.
- Section 3. Added language to allow the Board to track discipline in other states through the National Practitioners Data Base.
- Section 4. Removed outdated language for the start of requiring suicide assessment and intervention continuing education.
- Section 5. Added language requiring fingerprints for licensure as required by Statute.
- Section 5. Added language to allow the Board to track discipline in other states through the National Practitioners Data Base.
- Section 6. Added language requiring fingerprints for licensure as required by Statute.
- Section 6. Added language to allow the Board to track discipline in other states through the National Practitioners Data Base.

## **Chapter 15 (Professional Responsibility):**

- Renumbered the chapter as necessary due to changes.
- Section 1. Added language to clarify that proper consent shall be obtained prior to the

provision of services.

- Section 1. Added language to clarify what dual relationships are prohibited.
- Section 1. Added language to prohibit conflictual dual relationships in supervision.
- Section 1. Added language to prohibit self-employment when a licensee is required to be under administrative supervision.

#### **Chapter 16 (Adverse Action):**

- Section 2. Defined other conduct that is unprofessional or unethical in nature and therefore prohibited by the Board.

#### **Chapter 18 (Supervision):**

- Renumbered where appropriate due to typographical error in previous submissions.
- Section 2. Inserted the word “graduate” to clarify the type of course needed to meet the requirement.
- Section 3. Removed verbose wording and replaced with “shall.”

## Chapter 1

### General Provisions

**Section 1. Authority.** The Mental Health Professions Licensing Board is created by Wyoming Statutes 33-38-101 through -113, hereinafter referred to as the Act. The Board is authorized under the Act, specifically W.S. 33-38-105(a), the Wyoming Administrative Procedure Act (W.S. 16-3-101 through -115), specifically W.S. 16-3-104(j), and W.S. 33-1-302(a) to promulgate rules.

**Section 2. Terms Defined by Statute.** Terms defined in W.S. 33-38-101 through -113 shall have the same meanings when used in these rules unless the context or subject matter clearly requires a different interpretation.

**Section 3. Terms Defined Herein.** As used in these rules, the following terms shall have the following meanings unless the context or subject matter clearly requires a different interpretation.

(a) **Administrative Supervision-** Employment by a business, agency, organization, firm, etc. to work for wages or salary. The employer must have the authority to hire, discipline and dismiss the provisional licensee and certificate holder. The supervisee shall not have a financial interest in ownership of the business, agency, organization, or firm while working under administrative supervision. An independent contract for services does not meet the criteria of administrative supervision. Faculty supervision of a candidate in a doctoral program does meet this requirement.

(b) **Addiction-** The meaning of addiction includes “substance use disorders” as that term is used in the Diagnostic and Statistical Manual of Mental Health Disorders (DSM-5), published in 2013 by the American Psychiatric Association.

(c) **Case Management-** Non-clinical services that are provided to; assist the client in gaining access to needed medical, social, educational and other services; assist the client in making arrangements necessary to move from a residential, hospital, or institutional placement to the family or surrogate family home in the community; and foster a client’s rehabilitation from a diagnosed mental disorder by organizing needed services and supports into an integrated system of care until the client is able to assume this responsibility. Provision of these services is not restricted to persons who are licensed or certified under the Act. Case management services include linkage, monitoring/follow-up, referral, advocacy, and crisis intervention.

(i) **Linkage-** Working with clients ~~and/or~~ or service providers to secure access to services. Activities include making telephone calls to agencies to arrange for appointments or services following the initial referral process, and preparing clients for these appointments.

(ii) **Monitoring/follow-up-** Contacting the client or others to ensure that a client is following a prescribed service plan and monitoring the progress and impact of that plan.

(iii) Referral- Arranging initial appointments with service providers or informing clients of services available, addresses and telephone numbers of agencies providing services.

(iv) Advocacy- Advocacy on behalf of a specific client for the purpose of accessing needed services.

(v) Crisis Intervention- Intervention and stabilization provided in situations requiring immediate attention/resolution for a specific client. The case manager may provide the initial intervention in a crisis situation and would assist the client in gaining access to other needed clinical crisis intervention.

(d) Certified Addictions Practitioner (CAP)- A person certified under the Act to practice addictions therapy for which they are qualified by virtue of training and experience, under administrative supervision and under the supervision of a designated qualified clinical supervisor licensed in the state of Wyoming.

(e) Certified Addictions Practitioner Assistant (CAPA)- A person certified under the Act to assist a licensed mental health professional in those methods and techniques of addictions assessment and treatment for which they are qualified by virtue of training and experience under administrative supervision and under the supervision of a designated qualified clinical supervisor licensed in the state of Wyoming.

(i) Therapeutic interventions are limited to education and skill development activities.

(ii) The practice of a CAPA does not include assigning diagnosis, making treatment recommendation, or acting as a primary treatment provider,

(f) Certified Mental Health Worker (CMHW)- A person certified under the Act to perform mental health procedures for which they are qualified by virtue of training and experience and that are consistent with their level of competence and expertise, under administrative supervision and under the supervision of a designated qualified clinical supervisor licensed in the state of Wyoming.

(g) Certified Social Worker (CSW)- A person certified under the Act to engage in generalist social work for which they are qualified by virtue of training and experience, under administrative supervision and under the supervision of a designated qualified clinical supervisor licensed in the state of Wyoming.

(h) Client- An individual or entity for which a professional service is provided by a licensee or certificate holder who is acting in his/her professional capacity and who is performing any professional service governed by the Act or these Rules and Regulations.

(i) Clinical Crisis Intervention- A specific clinical service designed to assess a

person's mental status, suicide/homicide potential, diagnosis ~~and/or~~ or need for therapeutic services.

(j) "Contact hour" means the actual number of hours during which instruction was received. A contact hour shall consist of not less than fifty (50) minutes of actual instruction or presentation. For academic courses, one (1) semester credit equals fifteen (15) contact hours. One (1) quarter credit equals ten (10) contact hours.

(k) Designated Qualified Clinical Supervisor (DQCS)- A designated qualified clinical supervisor shall be licensed in Wyoming as a licensed professional counselor, licensed clinical social worker, licensed marriage and family therapist, licensed addictions therapist, licensed psychologist, licensed psychiatrist, or licensed advanced practitioner of nursing with psychiatric specialty. In addition, a licensed physician with specialty in addictionology shall qualify as a designated qualified clinical supervisor for a candidate seeking licensure as an Addictions Therapist. Precautions should be taken to avoid conflictual dual relationships in supervision.

(l) Conflictual Dual Relationship- An association which may potentially lead to conflict with the therapeutic alliance.

(i) Conflictual dual relationship includes but is not limited to:

(A) Blood ~~and/or~~ or other legal relatives;

(B) Spousal relationships or significant others, either current or former;

(C) Current or former therapists or clients; and

(D) Any other relationship which might compromise therapist/client, supervisor and supervisee relationship, whether or not there was remuneration for services.

(ii) Designated qualified clinical supervisors clearly define and maintain ethical, professional, personal and social relationships with their supervisees. If supervisors must assume other professional roles (e.g., clinical and administrative supervisor, instructor) with supervisees, they work to minimize potential conflicts and explain to supervisees the expectations and responsibilities associated with each role.

(iii) Any supervisor or supervisee claiming an exception to this section due to practice in a rural location, or accredited training institution of formal learning, or special needs of the clinical population being served shall show by preponderance of the evidence that:

(A) The client was fully informed of the dual relationship and the possibility for conflicts of interest;

(B) The client's access to quality care has not been compromised;

(C) The supervisor and supervisee have not benefited from the relationship over and above a reasonable fee for service (i.e., that the power in the therapeutic relationship has not been used to influence the therapeutic relationship for personal gain);

(D) The therapeutic and supervisory relationship has not been compromised and the best interests of the client are served by the relationship.

(m) Individual Distance Clinical Supervision- A direct tutorial relationship between a designated qualified clinical supervisor and a supervisee over the phone or by audiovisual electronic devices.

(n) Individual Face-to-face Clinical Supervision- A direct tutorial relationship between a designated qualified clinical supervisor and a supervisee. The designated qualified clinical supervisor monitors the quality of services being offered to clients, facilitates the supervisee's learning and skill development, and endeavors to enhance the professional growth of the supervisee within the discipline.

(o) Licensed Addictions Therapist (LAT)- A person licensed under the Act to practice addictions therapy independent of administrative or clinical supervision.

(p) Licensed Clinical Social Worker (LCSW)- A person licensed under the Act to practice clinical social work independent of administrative or clinical supervision.

(q) Licensed Marriage and Family Therapist (LMFT)- A person licensed under the Act to practice couples, marriage and family therapy independent of administrative or clinical supervision.

(r) Licensed Professional Counselor (LPC)- A person licensed under the Act to practice professional counseling independent of administrative or clinical supervision.

(s) Licensure Standards Sub-Committee- The Sub-Committee appointed or elected by the professional organization in Wyoming representing each discipline, which serves as monitor for licensure and certification standards for that discipline and as liaison between the Board and the professional organization.

(t) Provisional Addictions Therapist (PAT)- A person provisionally licensed under the Act to practice addictions therapy for which they are qualified by virtue of training and experience, under the supervision of a designated qualified clinical supervisor licensed in the state of Wyoming.

(u) Provisional Clinical Social Worker (PCSW)- A person provisionally licensed under the Act to practice clinical social work for which they are qualified by virtue of training and experience, under the supervision of a designated qualified clinical supervisor licensed in the state of Wyoming.

(v) Provisional Marriage and Family Therapist (PMFT)- A person provisionally

licensed under the Act to practice couples, marriage and family therapy for which they are qualified by virtue of training and experience, under the supervision of a designated qualified clinical supervisor licensed in the state of Wyoming.

(w) **Provisional Professional Counselor (PPC)-** A person provisionally licensed under the Act to practice professional counseling for which they are qualified by virtue of training and experience, under the supervision of a designated qualified clinical supervisor licensed in the state of Wyoming.

(x) **Supervisee-** A provisional licensee or certificate holder receiving clinical supervision.

(y) **Triadic Face-to-Face Clinical Supervision-** A direct tutorial relationship wherein a designated qualified clinical supervisor conducts clinical supervision with two (2) supervisees simultaneously. The supervision is provided in the same manner, content and quality as during Individual Face-to-Face Clinical Supervision.

**Section 4. Board Office.** The Board Office is located at 2001 Capitol Ave., Room 127, Cheyenne, Wyoming, 82002.

**Section 5. Annual Regular Board Meeting.** The Board shall set an annual regular meeting by resolution.

**Section 6. Officers.** Officers of the Board shall be elected annually, by a majority vote of the Board, and shall be comprised of a chairperson, a vice-chairperson, and a secretary-treasurer.

## Chapter 3

### Certified Addictions Practitioner

**Section 1. The Practice of a Certified Addictions Practitioner.** The practice of a Certified Addictions Practitioner (CAP) consists of addictions treatment, prevention, intervention, diagnosis, referral, and follow-up within the range of the professional's preparation under the supervision of a DQCS licensed in the state of Wyoming as well as the administrative supervision of an employer.

(a) The practice of a CAP may be either face-to-face that involves the synchronous interaction between an individual or groups of individuals using what is seen and heard in person to communicate, or

(b) Via methods of electronic delivery that involves the use of electronic or other means (e.g. telephone, computers, etc.) to provide the service.

(i) When using electronic delivery means, all use must be in compliance with all professional ethical standards and all other requirements in these rules;

(ii) Special care should be taken to ensure the confidentiality and security of the provision of services; and

(iii) The CAP shall provide only those services that are legal within the state that the recipient of services lives.

**Section 2. General Requirements for Certification.** Applicants shall have six (6) months from the date of employment to complete all of the requirements for certification. If the applicant fails to complete the requirements in that six (6) month time frame, the applicant shall immediately stop working as a CAP. Providing the services regulated by this Act prior to submitting an application to the Board may result in the denial of the application. The Board may, for good cause shown, grant an extension of this grace period. It is the sole responsibility of the applicant to ensure that the Board receives all documentation necessary to prove to the Board's satisfaction that the applicant meets all the requirements for certification herein. The applicant shall provide satisfactory evidence to the Board that they:

(a) are of majority age;

(b) have no felony convictions, and no misdemeanor convictions that relate adversely to the practice of addictions therapy or to the ability to practice addictions therapy, although exceptions to this requirement may be granted by the Board if consistent with the public interest;

(c) are legal inhabitants of the United States; and

(d) satisfy the requirements established in these rules.



**Section 3. Education Requirement for Certification.** The educational requirement for certification as an addictions practitioner may be met:

(a) By holding a current National Certified Addictions Counselor Level II (NCAC II) certification in good standing; or

(b) By receiving a baccalaureate degree in addiction therapy from an educational institution accredited by one of the regional or national institutional accrediting bodies recognized by the Council for Higher Education Accreditation (CHEA); or

(c) By receiving a baccalaureate degree in a human behavioral discipline from an educational institution accredited by one of the regional or national institutional accrediting bodies recognized by the Council for Higher Education Accreditation (CHEA) and by completing an addictions specific associates degree or higher from an educational institution accredited by the National Addictions Studies Accreditation Commission (NASAC); or

(d) By receiving a baccalaureate degree in a human behavioral discipline from an educational institution accredited by one of the regional or national institutional accrediting bodies recognized by the Council for Higher Education Accreditation (CHEA) and by completing course work (either graduate or undergraduate) in each of the core areas defined herein:

(i) Each of the following four (4) courses shall be completed:

(A) Counseling Theories- Three (3) Semester Credits. Theories and principles of counseling and psychotherapy.

(B) Counseling Skills- Three (3) Semester Credits. Methods and techniques of individual and group counseling.

(C) Practicum in Addictions/Chemical Dependency Counseling- Three (3) Semester Credits.

(D) Counseling Ethics- Two (2) Semester Credits.

(ii) Course work shall be completed in each of the following five (5) subject areas for a minimum of ten (10) semester hours:

(A) Alcoholism: To include biochemical, socio-cultural, and psychological factors.

(B) Drugs and Behavior: A survey of drugs with abuse potential in addition to alcohol that affect behavior including psychopharmacological information.

(C) Addictions and Special Populations: (i.e., adolescents, women,

ethnic groups, elderly, adult children of alcoholics, the impaired family, impaired professional, athletes, criminals, etc.).

(D) Addictive Behaviors: Gambling, eating disorders, sexual addictions, cults, compulsive behaviors of non-ingestive nature, etc.

(E) Addictions Assessment: Appraisal, assessment, testing, diagnosis/dual diagnosis. This category may also be satisfied by completing specialty training.

(iii) Six (6) contact hours of specialty training shall be completed in communicable diseases. This category may be satisfied by completing college course work or workshops.

(e) If an applicant chooses to meet the educational criteria outlined in Section 3(d), the following shall apply:

(i) The official transcripts, course prefixes, and course descriptions shall clearly identify the course work as preparing persons to be practitioners.

(ii) Course work shall be completed in an associates program, baccalaureate program or subsequent college level course work.

#### **Section 4. Examination Requirement for Certification.**

(a) The Board shall accept a passing score as established by the examination provider on one of the following examinations:

(i) The Association for Addictions Professionals (NAADAC), NCAC Level II exam;

(ii) International Certification and Reciprocity Consortium (IC&RC) Alcohol and Other Drug Abuse Counselor (AODA) exam; or

(iii) Other examination as may be approved by the Board.

(b) Applicants are allowed only three (3) attempts to pass the exam requirement. The Board may allow an applicant to make one (1) more attempt to pass the requirement upon approval of a remediation plan submitted by the applicant.

(c) The examination shall have been passed within the immediate five (5) years prior to submission of the application or after receiving board approval to sit for the examination. This requirement does not apply to those applying under Section 6 of this chapter.

**Section 5. Certification by Education and Experience.** An individual who has received a baccalaureate degree in a human behavioral discipline, other than a degree in addiction therapy, may be granted certification under this section after providing to the board

satisfactory proof of completion of two thousand (2,000) hours of supervised work experience as a certified addictions practitioner assistant or equivalent in the field of addiction therapy.

(a) The two thousand (2,000) hours of supervised work experience shall be completed as direct client contact hours.

(b) The hours shall be completed in no less than twenty-four (24) months and no more than sixty (60) months prior to application.

**Section 6. Certification by Reciprocity.** An individual who holds a baccalaureate degree in a human behavioral discipline, has passed the examination as required in Section 4 of this Chapter and holds a certification that is free from discipline and in good standing to engage in the practice of addictions therapy under the laws of another state may, upon approval of the Board, be issued a certification as a CAP in this state. If the individual has held a certification to practice addictions therapy in more than one state, the individual shall be required to provide verification that all certifications held within the last five (5) years have not had any discipline against the certification

**Section 7. Standards of Conduct.**

(a) The term “Certified Addictions Practitioner” shall be used only after the applicant is granted certification by the Board, and only in conjunction with activities and services that are part of the supervised employment.

(b) In the required professional disclosure statement, the CAP shall also provide full disclosure to every client of the supervised nature of their work, which shall include the name, address and telephone number of their DQCS.

(c) The supervisory relationship shall be indicated, and the DQCS’s name, address and telephone number shall appear on all documents relating to advertisement by the CAP.

(d) The CAP shall comply with the Association for Addictions Professionals (NAADAC) “Code of Ethics” incorporated into these rules in Chapter 15.

## Chapter 4

### Certified Addictions Practitioner Assistant

**Section 1. The Practice of a Certified Addictions Practitioner Assistant.** The practice of a Certified Addictions Practitioner Assistant (CAPA) consists of assisting in the practice of addictions treatment, prevention, intervention, referral and follow-up within the range of the professional's preparation under the supervision of a DQCS licensed in the state of Wyoming as well as the administrative supervision of an employer. The practice of a CAPA does not include assigning diagnosis, making treatment recommendations, or acting as a primary treatment provider. Therapeutic interventions are limited to education and skill development activities.

(a) The practice of a CAPA may be either face-to-face that involves the synchronous interaction between an individual or groups of individuals using what is seen and heard in person to communicate, or

(b) Via methods of electronic delivery that involves the use of electronic or other means (e.g. telephone, computers, etc.) to provide the service.

(i) When using electronic delivery means, all use must be in compliance with all professional ethical standards and all other requirements in these rules;

(ii) Special care should be taken to ensure the confidentiality and security of the provision of services; and

(iii) The CAPA shall provide only those services that are legal within the state that the recipient of services lives.

**Section 2. General Requirements for Certification.** Applicants shall have six (6) months from the date of employment to complete all of the requirements for certification. If the applicant fails to complete the requirements in that six (6) month time frame, the applicant shall immediately stop working as a CAPA. Providing the services regulated by this Act prior to submitting an application to the Board may result in the denial of the application. The Board may, for good cause shown, grant an extension of this grace period. It is the sole responsibility of the applicant to ensure that the Board receives all documentation necessary to prove to the Board's satisfaction that the applicant meets all the requirements for certification herein. The applicant shall provide satisfactory evidence to the Board that they:

(a) are of majority age;

(b) have no felony convictions, and no misdemeanor convictions that relate adversely to the practice of addictions therapy or to the ability to practice addictions therapy, although exceptions to this requirement may be granted by the Board if consistent with the public interest;

- (c) are legal inhabitants of the United States; and
- (d) satisfy the requirements established in these rules.

**Section 3. Education Requirement for Certification.** The educational requirement for certification as an addictions practitioner assistant may be met by:

(a) Holding a current National Certified Addictions Counselor Level I (NCAC I) certification in good standing from the Association for Addictions Professionals (NAADAC), or a current Alcohol and Other Drug Abuse Counselor (AODA) from the International Certification and Reciprocity Consortium (IC&RC), or

(b) Completion of an associate's degree program in addictionology, chemical dependency, substance use disorder counseling, or an equivalently termed degree program, from an educational institution accredited by the National Addictions Studies Accreditation Commission (NASAC) or accredited by one of the regional or national institutional accrediting bodies recognized by the Council for Higher Education Accreditation (CHEA), or

(c) Completion of two hundred seventy (270) hours of addictions specific course work and/or training as follows:

(i) A maximum of seventy (70) contact hours may be completed in general mental health discipline subjects which must include thirty (30) contact hours in counseling ethics.

(ii) A minimum of two hundred (200) contact hours shall be related specifically to addictions therapy. This shall include training/education in Addictions Assessment and six (6) contact hours of specialty training in communicable diseases. These categories may be satisfied by completing college course work or workshops.

**Section 4. Examination Requirement for Certification.**

(a) The Board shall accept a passing score as established by the examination provider on one of the following examinations:

(i) The Association for Addictions Professionals (NAADAC), NCAC Level I exam; or

(ii) Other examination as may be approved by the Board.

(b) Applicants are allowed only three (3) attempts to pass the exam requirement. The Board may allow an applicant to make one (1) more attempt to pass the requirement upon approval of a remediation plan submitted by the applicant.

(c) The examination shall have been passed within the immediate five (5) years prior to submission of the application or after receiving board approval to sit for the examination.

This requirement does not apply to those applying under Section 5 of this chapter.

**Section 5. Certification by Reciprocity.** An individual who holds an associate's degree in a human behavioral discipline, has passed the examination as required in Section 4 of this Chapter and holds a certification that is free from discipline and in good standing to engage in the practice of addictions therapy under the laws of another state may, upon approval of the Board, be issued a certification as a CAPA in this state. If the individual has held a certification to practice addictions therapy in more than one state, the individual shall be required to provide verification that all certifications held within the last five (5) years have not had any discipline against the certification

**Section 6. Standards of Conduct.**

(a) The term "Certified Addictions Practitioner Assistant" shall be used only after the applicant is granted certification by the Board, and only in conjunction with activities and services that are part of the supervised employment.

(b) In the required professional disclosure statement, the CAPA shall also provide full disclosure to every client of the supervised nature of their work, which shall include the name, address and telephone number of their DQCS.

(c) The supervisory relationship shall be indicated, and the DQCS's name, address and telephone number shall appear on all documents relating to advertisement by the CAPA.

(d) The CAPA shall comply with the Association for Addictions Professionals (NAADAC) "Code of Ethics" incorporated into these rules in Chapter 15.

## Chapter 5

### Certified Mental Health Worker

**Section 1. The Practice of a Certified Mental Health Worker.** The practice of a Certified Mental Health Worker is the application of human services or psychological theory and methods to the assessment, treatment or prevention of psychosocial dysfunction, disability, or impairment, including emotional or mental disorders, under administrative supervision and the supervision of a DQCS licensed in the state of Wyoming. The practice of a CMHW does not include assigning a diagnosis or acting as a primary treatment provider.

**Section 2. General Requirements for Certification.** Applicants shall have six (6) months from the date of employment to complete all of the requirements for certification. If the applicant fails to complete the requirements in that six (6) month time frame, the applicant shall immediately stop working as a Certified Mental Health Worker. Providing the services regulated by this Act prior to submitting an application to the Board may result in the denial of the application. The Board may, for good cause shown, grant an extension of this grace period. It is the sole responsibility of the applicant to ensure that the Board receives all documentation necessary to prove to the Board's satisfaction that the applicant meets all the requirements for certification herein. The applicant shall provide satisfactory evidence to the Board that they:

- (a) are of majority age;
- (b) have no felony convictions, and no misdemeanor convictions that relate adversely to the practice as a mental health worker or to the ability to practice as a mental health worker, although exceptions to this requirement may be granted by the Board if consistent with the public interest;
- (c) are legal inhabitants of the United States; and
- (d) satisfy the requirements established in these rules.

**Section 3. Education Requirement for Certification.** Applicants may meet the educational criteria by the completion of a baccalaureate degree program in a human behavioral discipline from an educational institution accredited by one of the regional or national institutional accrediting bodies recognized by the Council for Higher Education Accreditation (CHEA), with:

- (a) Course work completed in each of the following five (5) content areas:
  - (i) Human Services/Psychological Theories - Three (3) Semester Credits. A theoretical foundation in psychology, health, or human services, with a focus on mental health;

(ii) Communication Skills - Three (3) Semester Credits. Methods and techniques of individual and/or group communication in a mental health, addictions, or counseling related field;

(iii) Human Development - Three (3) Semester Credits. Development of humans, to include social, cognitive, and/or developmental issues; may also include an in-depth focus on one or more developmental areas or populations;

(iv) Cognitive Psychology - Three (3) Semester Credits. A focus on the development of cognition and resulting behavior; and

(v) Abnormal Psychology – Three (3) Semester Credits. A focus on the major types of abnormal behavior, including anxiety, affective, schizophrenic, brain, substance and the disorders of childhood origin

(b) Additional course work must be completed in each of the following five (5) subject areas for a minimum of twenty-four (24) combined semester hours:

(i) Human Services/Psychological Theory or Practice: A theoretical foundation or practical implications/experience in psychology, health, or human services, with a focus on mental health, as well as social situations;

(ii) Drugs and Behavior: To include biochemical, socio-cultural, and psychological factors of alcohol/drug/behavior addiction; psychopharmacological information;

(iii) Special Populations or Subjects: A focus on adolescents, women, elderly, addiction, family or marriage, impaired professionals, athletes, criminals, abnormal populations, developmentally disabled, gambling, eating disorders, diverse populations, program development, etc.;

(iv) Research & Statistics/Assessment: Research methods and statistical analysis, appraisal, and/or testing to include training in provision of assessment instruments; or

(v) Ethical & Professional Issues: The study of applied professional ethics, due process, dual relationships, client advocacy, value clarification and professional standards in the profession.

(c) Six (6) additional contact hours of specialty training shall be completed in communicable diseases that must include content on HIV/AIDS. This category may be satisfied by completing college course work or workshops that may include online options.

**Section 4. Experience Requirement for Certification.** One hundred (100) hours of direct contact with identified clients under the direct supervision of a DQCS and four hundred (400) of indirect experience in a psychological/human services environment must be satisfied prior to certification. This category must be satisfied through paid work experience after completion of the baccalaureate degree.



## **Section 5. Examination Requirement for Certification.**

- (a) The Board shall accept the passing score as established by the examination provider approved by the Board.
- (b) The Board shall accept a passing score on the following examinations:
  - (i) The Human Services-Board Certified Practitioner Examination (HS-BCPE)
  - (ii) Other examinations as may be approved by the Board.
- (c) Applicants are allowed three (3) attempts to pass the exam. The Board may allow an applicant to make one (1) more attempt to pass the examination upon approval of a remediation plan submitted by the applicant.
- (d) The examination shall have been passed within the immediate five (5) years prior to submission of the application or after receiving board approval to sit for the examination. This requirement does not apply to those applying under Section 6 of this chapter.

**Section 6. Certification by Reciprocity.** An individual who holds a baccalaureate degree in a human behavioral discipline, has passed the examination as required in Section 4 of this Chapter and holds a certification that is free from discipline and in good standing to engage in the practice as a mental health worker under the laws of another state may, upon approval of the Board, be issued a certification as a CMHW in this state. If the individual has held a certification to practice addictions therapy in more than one state, the individual shall be required to provide verification that all certifications held within the last five (5) years have not had any discipline against the certification.

## **Section 7. Standards of Conduct.**

- (a) The terms “Certified Mental Health Worker” shall be used only after the applicant is granted certification by the Board, and only in conjunction with activities and services that are part of the supervised employment.
- (b) In the required professional disclosure statement, the Certified Mental Health Worker shall also provide full disclosure to every client of the supervised nature of their work, which shall include the name, address and telephone number of their DQCS.
- (c) The supervisory relationship shall be indicated, and the DQCS’s name, address and telephone number shall appear on all documents relating to advertisement by the Certified Mental Health Worker.
- (d) The Certified Mental Health Worker shall comply with the American Counseling Association "Code of Ethics" incorporated into these rules in Chapter 15.

## **Chapter 6**

### **Certified Social Worker**

#### **Section 1. The Practice of a Certified Social Worker.**

(a) A Certified Social Worker may perform the duties listed in Wyoming Statute § 33-38-102(a)(xi) under the clinical supervision of a DQCS licensed in the state of Wyoming and the administrative supervision of a supervisor.

(b) As used in Wyoming Statute § 33-38-102(a)(xi), “social work treatment” means the application of social work theory, knowledge, methods, ethics, and the professional use of self to restore or enhance social, psychosocial, or biopsychosocial functioning of individuals, couples, families, groups, organizations, and communities, but does not include psychotherapy or diagnosis.

(c) Certified social workers may not serve as DQCS.

(d) The practice of a certified social worker may be either:

(i) face-to-face, involving the synchronous interaction between an individual or groups of individuals using what is seen and heard in person to communicate, or

(ii) via methods of electronic delivery that involves the use of electronic or other means (e.g. telephone, computers, etc.) to provide the service.

(A) When delivering services electronically, the certified social worker must comply with all professional ethical standards and all other requirements in these rules;

(B) The certified social worker must take special care to ensure the confidentiality and security of the provision of services; and

(C) The certified social worker shall provide only those services that are legal within the state in which the person receiving the services lives.

**Section 2. General Requirements for Certification.** Applicants shall have six (6) months from the date of employment to complete all of the requirements for certification. If the applicant fails to complete the requirements in that six (6) month time frame, the applicant shall immediately stop working as a Certified Social Worker. Providing the services regulated by this Act prior to submitting an application to the Board may result in the denial of the application. The Board may, for good cause shown, grant an extension of this grace period. It is the sole responsibility of the applicant to ensure that the Board receives all documentation necessary to prove to the Board’s satisfaction that the applicant meets all the requirements for certification herein. The applicant shall provide satisfactory evidence to the Board that they:

- (a) are of majority age;
- (b) have no felony convictions, and no misdemeanor convictions that relate adversely to the practice of social work or to the ability to practice clinical social work, although exceptions to this requirement may be granted by the Board if consistent with the public interest;
- (c) are legal inhabitants of the United States; and
- (d) satisfy the requirements established in these rules.

**Section 3. Education Requirement for Certification.** All educational requirements for certification shall be met through the completion of a Council on Social Work Education accredited baccalaureate degree program in social work.

**Section 4. Examination Requirement for Certification.**

(a) The Board shall accept a passing score as established by the examination provider on one of the following examinations:

(i) The Association of Social Work Boards (ASWB) examination at the Bachelor's Level; or

(ii) Other examination as may be approved by the Board.

(b) Applicants are allowed only three (3) attempts to pass the exam requirement. The Board may allow an applicant to make one (1) more attempt to pass the exam requirement upon approval of a remediation plan submitted by the applicant.

(c) The examination shall have been passed within the immediate five (5) years prior to submission of the application or after receiving board approval to sit for the examination. This requirement does not apply to those applying under Section 5 of this chapter.

**Section 5. Certification by Reciprocity.**

(a) An individual who holds a baccalaureate degree in social work, has passed the examination as required in Section 4 of this Chapter and holds a certification that is free from discipline and in good standing to engage in the practice of social work under the laws of another state may, upon approval of the Board, be issued a certification as a Social Worker in this state. If the individual has held a certification to practice social work in more than one state, the individual shall be required to provide verification that all certifications held within the last five (5) years have not had any discipline against the certification.

(b) Certification by reciprocity does not permit a certified social worker to practice without both clinical supervision of a DQCS and administrative supervision.

**Section 6. Standards of Conduct.**

(a) The terms “Certified Social Worker” or “Social Worker” shall be used only after the applicant is granted certification by the Board, and only in conjunction with activities and services that are part of the supervised employment.

(b) In the required professional disclosure statement, the Certified Social Worker shall also provide full disclosure to every client of the supervised nature of their work, which shall include the name, address and telephone number of their DQCS.

(c) The supervisory relationship shall be indicated, and the DQCS’s name, address and telephone number shall appear on all documents relating to advertisement by the Certified Social Worker.

(d) The Certified Social Worker shall comply with the National Association of Social Workers “Code of Ethics” incorporated into these rules in Chapter 15.

## **Chapter 7**

### **Provisional License**

**Section 1. General Requirements.** Provisional licensure is a means by which an individual may continue progress, under the supervision of a DQCS and under the administrative supervision of an employer, towards satisfactory completion of the education, experience and examination requirements established in these rules. A provisional license shall not be issued until the applicant has provided satisfactory evidence to the Board that they:

- (a) are of majority age;
- (b) have no felony convictions, and no misdemeanor convictions that relate adversely to the practice of counseling, marriage and family therapy, clinical social work or addictions therapy or to the ability to practice counseling, marriage and family therapy, clinical social work or addictions therapy, although exceptions to this requirement may be granted by the Board if consistent with the public interest;
- (c) are legal inhabitants of the United States;
- (d) satisfy the educational requirements for the requested discipline established in these rules;
  - (i) Applicants who do not satisfy the educational requirements may be granted a provisional license provided they are deficient no more than six (6) semester hours and have met the requirement for course work in professional orientation or ethics, and practicum and internship.
- (e) have someone prepared to act as their DQCS. Applicants must submit and receive approval of a supervision agreement prior to the issuance of their license. Applications that do not include a supervision agreement shall be reviewed by the application review committee and the applicant shall be notified of the recommendation of the application review committee pending the receipt and approval of the supervision agreement.
- (f) An applicant shall not be issued more than two provisional licenses in any individual discipline.

### **Section 2. Standards of Conduct.**

- (a) The terms “Provisional Professional Counselor,” “Provisional Clinical Social Worker,” “Provisional Marriage and Family Therapist” or “Provisional Addictions Therapist” shall be used only after the applicant is granted a provisional license by the Board, and only in conjunction with activities and services that are part of the supervised clinical experience.
- (b) In the required professional disclosure statement, the provisional licensee shall

also provide to every client full disclosure of the supervised nature of their work, which shall include the name, address and telephone number of their DQCS.

(c) The supervisory relationship shall be indicated, and DQCS's name, address and telephone number shall appear on all documents relating to advertisement by the provisional licensee.

(d) The provisional licensee shall comply with the applicable code of ethics and standards of practice for their discipline as incorporated into these rules in Chapter 15.

**Section 3. Extensions.** Provisional licenses are not renewable; however, the license may be extended upon a showing of good cause as follows:

(a) One (1) extension for up to six (6) months may be granted to a provisional licensee in order to continue sitting for the required exam, provided they have completed the required hours of clinical experience and supervision.

(b) One (1) extension for up to three (3) years may be granted to a provisional licensee needing to complete the required hours of clinical experience and supervision, provided they have passed the required exam during the initial three (3) year period of the provisional license.

(c) Requests for extensions shall be in writing and include a detailed explanation justifying the extension.

**Section 4. Progression Towards Licensure for Independent Clinical Practice.** When a provisional licensee believes they have satisfactorily completed the education, experience, supervision and examination requirements established herein, they shall submit an application for an independent clinical practice license.

(a) The following documents must be received by the Board in order for the provisional licensee's record to be presented to the Application Review Committee for consideration:

(i) A complete official application form accompanied by the application fee.

(ii) Verification and Evaluation of Supervised Experience report forms.

(A) Report forms shall contain an original signature.

(B) Report forms shall be submitted directly to the office of the Board from the applicant's DQCS.

(C) Report forms must be submitted verifying clinical experience and individual face-to-face supervision from each Board approved DQCS beginning from the date

the provisional license was issued up to the date the provisional licensee applies for the independent clinical practice license.

(D) Hours completed outside of Wyoming may be approved by the ARC to meet the requirements for licensure.

(I) Hours shall be completed under supervision that meets substantially similar requirements of supervision as outlined in Chapter 18 of the Rules;

(II) Hours shall be completed within the twenty-four (24) months prior to application for a provisional license in Wyoming; and

(III) The Board shall count the time to complete the hours towards the minimum requirement of holding a provisional license for eighteen (18) months before applying for full licensure in Wyoming.

(iii) An official report of having received a passing score on the required examination submitted directly to the office of the Board from the examination provider.

(A) Applicants are allowed only three (3) attempts to pass the exam requirement. The Board may allow an applicant to make one (1) more attempt to pass the exam requirement upon approval of a remediation plan submitted by the applicant.

(b) The provisional licensee shall continue to receive administrative and clinical supervision until such time as the license for independent clinical practice is issued by the Board.

(c) The provisional licensee shall surrender the provisional license identification card and submit a revised disclosure statement prior to being presented with the independent clinical practice license wall certificate and pocket identification cards.

## **Section 5. Delivery of Services**

(a) Provisional licensees services may be either face-to-face that involves the synchronous interaction between an individual or groups of individuals using what is seen and heard in person to communicate, or

(b) Via methods of electronic delivery that involves the use of electronic or other means (e.g. telephone, computers, etc.) to provide the service.

(i) When using electronic delivery means, all use must be in compliance with all professional ethical standards and all other requirements in these rules;

(ii) Special care should be taken to ensure the confidentiality and security of the provision of services; and

(iii) The Provisional Licensee shall provide only those services that are legal

within the state that the recipient of services lives.



## Chapter 8

### Licensed Addictions Therapist

**Section 1. The Practice of a Licensed Addictions Therapist.** The practice of a Licensed Addictions Therapist consists of providing services based on theory and methods of counseling, psychotherapy, and addictionology to persons who are experiencing cognitive, affective or behavioral psychosocial dysfunction as a direct or indirect result of addiction, chemical dependency, abuse of chemical substances or related disorders. The practice of addictions therapy includes, but is not limited to, performing mental health procedures, addiction prevention, crisis intervention, assessment, diagnosis, referral, direct treatment, and follow-up treatment which is rendered to individuals, families, groups, organizations, schools, and communities who are adversely affected by addictions or related disorders within the range of the professional's preparation.

(a) The practice of addictions therapy may be either face-to-face that involves the synchronous interaction between an individual or groups of individuals using what is seen and heard in person to communicate, or

(b) Via methods of electronic delivery that involves the use of electronic or other means (e.g. telephone, computers, etc.) to provide the service.

(i) When using electronic delivery means, all use must be in compliance with all professional ethical standards and all other requirements in these rules;

(ii) Special care should be taken to ensure the confidentiality and security of the provision of services; and

(iii) The Licensed Addictions Therapist shall provide only those services that are legal within the state that the recipient of services lives.

**Section 2. General Requirements for Licensure.** It is the sole responsibility of the applicant to ensure that the Board receives all documentation necessary to prove to the Board's satisfaction that the applicant meets all the requirements for licensure herein. The applicant shall provide satisfactory evidence to the Board that they:

(a) are of majority age;

(b) have no felony convictions, and no misdemeanor convictions that relate adversely to the practice of addictions therapy or to the ability to practice addictions therapy, although exceptions to this requirement may be granted by the Board if consistent with the public interest;

(c) are legal inhabitants of the United States and

(d) satisfy the requirements established in these rules.

### **Section 3. Education Requirement for Licensure.**

(a) All educational requirements for licensure shall be met through the completion of a graduate degree program with a concentration in addictionology, chemical dependency, or substance abuse, healing arts or related field from an educational institution accredited by one of the regional or national institutional accrediting bodies recognized by the Council for Higher Education Accreditation (CHEA). Applicants with graduate degrees in other mental health disciplines from a regionally accredited college or university shall generally be accepted with the listed twenty-two (22) semester hours of coursework (either graduate or undergraduate) as follows:

(i) Each of the following four (4) courses shall be completed:

(A) Counseling Theories- Three (3) semester credits. Theories and principles of counseling and psychotherapy;

(B) Counseling Skills- Three (3) semester credits. Methods and techniques of individual and group counseling;

(C) Practicum in Addictions/Chemical Dependency Counseling- Three (3) semester credits; and

(D) Counseling Ethics- Three (3) semester credits.

(ii) Course work shall be completed in each of the following five (5) subject areas for a minimum of ten (10) semester credits:

(A) Alcoholism: To include biochemical, socio-cultural, and psychological factors;

(B) Drugs and Behavior: A survey of drugs with abuse potential other than alcohol that affect behavior including psychopharmacological information;

(C) Addictions and Special Populations: (i.e., adolescents, women, ethnic groups, elderly, adult children of alcoholics, the impaired family, impaired professional, etc.);

(D) Addictive Behaviors: Gambling, eating disorders, sexual addictions, cults, compulsive behaviors of non-ingestive nature, etc.; and

(E) Addictions Assessment: Appraisal, assessment, testing, diagnosis/dual diagnosis. This category may also be satisfied by completing specialty training.

(iii) Six (6) contact hours of specialty training shall be completed in

communicable diseases. This category may be satisfied by completing college course work or workshops.

- (iv) Three (3) semester credits is equivalent to four (4) quarter credits.

#### **Section 4. Supervised Training/Work Experience Requirement for Licensure.**

(a) A minimum of three thousand (3,000) hours of supervised clinical training/work experience in addictions therapy under the direct supervision of a DQCS is required for all applicants. This experience shall meet the requirements set forth in these rules. The hours must be completed over a period of not less than eighteen (18) months or more than thirty-six (36) months unless granted an extension by the Board.

(i) All three thousand (3,000) hours of supervised clinical training/work experience required shall be completed after the award of the graduate degree;

(ii) Of the three thousand (3,000) hours required, at least one thousand two hundred (1,200) hours shall be direct client contact hours; and

(iii) The balance of the remaining indirect hours shall consist of work experience that supports the direct client contact hours, e.g. charting, preparation, meetings, trainings, or the other duties of addictions therapy.

(b) An applicant shall have a minimum of one hundred (100) post graduate hours of clinical supervision with a DQCS as described in Chapter 18.

#### **Section 5. Examination Requirement for Licensure.**

(a) The Board shall accept a passing score as established by the examination provider on one of the following examinations:

(i) The Association for Addictions Professionals (NAADAC), NCAC Master Addiction Counselor (MAC) exam;

(ii) National Board for Certified Counselors (NBCC) Master Addiction Counselor (MAC) exam;

(iii) International Certification & Reciprocity Consortium (IC&RC) Advanced Alcohol and Drug Counselor (AADC) exam; or

(iv) Other examination as may be approved by the Board.

(b) The examination shall have been passed within the immediate five (5) years prior to submission of the application. This requirement does not apply to:

(i) those applying under Section 7 of these Rules; or

- (ii) those applying for licensure by completing provisional.

**Section 6. LAT as a Second License.** Professionals who currently hold a license as an LPC, LMFT or LCSW in good standing in the State of Wyoming may obtain a license as an Addictions Therapist as follows:

- (a) Education. The applicant shall satisfy the educational criteria in the following manner.

- (i) Complete one hundred and fifty (150) contact hours of diverse addictions specific training within five (5) years of applying for the LAT, including Addictions Assessment, from four (4) of the five (5) following areas:

- (A) Alcoholism: To include biochemical, socio-cultural, and psychological factors;

- (B) Drugs and Behavior: A survey of drugs with abuse potential other than alcohol that affect behavior including psychopharmacological information;

- (C) Addictions and Special Populations (i.e., adolescents, women, ethnic groups, elderly, adult children of alcoholics, the impaired family, impaired professional, etc.);

- (D) Addictive Behaviors: Gambling, eating disorders, sexual addictions, cults, compulsive behaviors of non-ingestive nature, etc; or

- (E) Addictions Assessment: Appraisal, assessment, testing, diagnosis/dual diagnosis. This category may also be satisfied by completing specialty training.

- (ii) These contact hours may also be reported as continuing education for license renewal.

- (b) Practicum.

- (i) The applicant shall satisfy the practicum criteria by completing a practicum, to include addictions specific clients, in a master's program, or by

- (ii) Completing one hundred and fifty (150) face-to-face clinical contact hours with addictions specific clients within five (5) years of applying for licensure, which is supervised by an LAT. These hours shall be completed after the award of the initial license as an LPC, LCSW, or an LMFT, or by

- (iii) Providing written proof, in a manner approved by the Board, of a minimum of five (5) years of full-time experience in the addictions field, gained within the ten (10) years immediately preceding the date of application, and after completion of the master's

degree by which they received their LPC, LCSW, or LMFT.

- (c) Examination. The examination requirements are the same as defined in Section 5.

**Section 7. License by Reciprocity.** An individual who holds a master's degree or higher in a human behavioral discipline, has passed the examination as required in Section 5 of this Chapter and holds a license that is free from discipline and in good standing to engage in the practice of addictions therapy under the laws of another state may, upon approval of the Board, be issued a license as an Addictions Therapist in this state. If the individual has held a license to addictions therapy in more than one state, the individual shall be required to provide verification that all licenses held within the last five (5) years have not had any discipline against the license.

**Section 8. Standards of Conduct.**

- (a) The terms "Licensed Addictions Therapist" or "Addictions Therapist" shall be used only after the applicant is granted licensure by the Board.

- (b) The Licensed Addictions Therapist shall comply with the Association for Addictions Professionals (NAADAC) "Code of Ethics" incorporated into these rules in Chapter 15.

## Chapter 9

### Licensed Clinical Social Worker

**Section 1. The Practice of a Licensed Clinical Social Worker.** The practice of a Licensed Clinical Social Worker is the application of social work theory, knowledge, methods, ethics, and the professional use of self to restore or enhance social, psychosocial, or biopsychosocial functioning of individuals, couples, families, groups, organizations, and communities. The practice of Clinical Social Work requires application of specialized clinical knowledge and advanced clinical skills in the areas of assessment, diagnosis, and treatment of mental, emotional, and behavioral disorders, conditions, and addictions. Treatment methods include the provision of individual, marital, couple, family, and group counseling and psychotherapy within the range of the professional's preparation. The practice of Clinical Social Work may include private practice and the provision of clinical supervision.

(a) The practice of social work may be either face-to-face that involves the synchronous interaction between an individual or groups of individuals using what is seen and heard in person to communicate, or

(b) Via methods of electronic delivery that involves the use of electronic or other means (e.g. telephone, computers, etc.) to provide the service.

(i) When using electronic delivery means, all use must be in compliance with all professional ethical standards and all other requirements in these rules;

(ii) Special care should be taken to ensure the confidentiality and security of the provision of services; and

(iii) The Licensed Clinical Social Worker shall provide only those services that are legal within the state that the recipient of services lives.

**Section 2. General Requirements for Licensure.** It is the sole responsibility of the applicant to ensure that the Board receives all documentation necessary to prove to the Board's satisfaction that the applicant meets all the requirements for licensure herein. The applicant shall provide satisfactory evidence to the Board that they:

(a) are of majority age;

(b) have no felony convictions, and no misdemeanor convictions that relate adversely to the practice of clinical social work or to the ability to practice clinical social work, although exceptions to this requirement may be granted by the Board if consistent with the public interest;

(c) are legal inhabitants of the United States; and

(d) satisfy the requirements established in these rules.

**Section 3. Education Requirement for Licensure.** All educational requirements for licensure shall be met through the completion of a Council on Social Work Education (CSWE) accredited master's degree program in social work.

**Section 4. Supervised Training/Work Experience Requirement for Licensure.**

(a) A minimum of three thousand (3,000) hours of supervised clinical training/work experience in clinical social work under the direct supervision of a DQCS is required for all applicants. This experience shall meet the requirements set forth in these rules. The hours must be completed over a period of not less than eighteen (18) months or more than thirty-six (36) months unless granted an extension by the Board.

(i) All three thousand (3,000) hours of supervised clinical training/work experience required shall be completed after the award of the graduate degree.

(ii) Of the three thousand (3,000) hours required, at least one thousand two hundred (1,200) hours shall be direct client contact hours providing clinical social work as defined in Wyoming Statute 33-38-102 (a) (v).

(iii) The balance of the remaining indirect hours shall consist of work experience that supports the direct client contact hours, e.g. charting, preparation, meetings, trainings, or the other duties of clinical social work.

(b) An applicant shall have a minimum of one hundred (100) post graduate hours of clinical supervision with a DQCS as described in Chapter 18.

**Section 5. Examination Requirement for Licensure.**

(a) The Board shall accept a passing score as established by the examination provider of the following examination:

(i) The Association of Social Work Boards (ASWB) examination at the Clinical Level; or

(ii) Other examination as may be approved by the Board.

(b) The examination shall have been passed within the immediate five (5) years prior to submission of the application. This requirement does not apply to:

(i) those applying under Section 6 of these Rules; or

(ii) those applying for licensure by completing provisional.

**Section 6. License by Reciprocity.** An individual who holds a master's degree or higher in social work, has passed the examination as required in Section 5 of this Chapter and

holds a license that is free from discipline and in good standing to engage in the practice of social work under the laws of another state may, upon approval of the Board, be issued a license as a Clinical Social Worker in this state. If the individual has held a license to practice social work in more than one state, the individual shall be required to provide verification that all licenses held within the last five (5) years have not had any discipline against the license.

**Section 7. Standards of Conduct.**

(a) The terms “Licensed Clinical Social Worker” or “Clinical Social Worker” shall be used only after the applicant is granted licensure by the Board.

(b) The Licensed Clinical Social Worker shall comply with the National Association of Social Workers “Code of Ethics” incorporated into these rules in Chapter 15.



## Chapter 10

### Licensed Marriage and Family Therapist

**Section 1. The Practice of a Marriage and Family Therapist.** The practice of a Licensed Marriage and Family Therapist is the rendering of professional couples, marital and family therapy services and treatment to individuals, family groups, organizations, couples, marital pairs, singly or in groups. Couples, marital and family therapy includes, but is not limited to, performing mental health procedures, the assessment, diagnosis and treatment, including psychotherapy, of nervous, emotional, and mental disorders, whether cognitive, affective or behavioral, within the context of couples, marital and family systems within the range of the professional's preparation. Couples, marital and family therapy involves the professional application of psychotherapeutic and family systems theories and techniques in the delivery of services to individuals, couples, marital pairs and families for the purpose of treating such diagnosed nervous and mental disorders.

(a) The practice of marriage and family therapy may be either face-to-face that involves the synchronous interaction between an individual or groups of individuals using what is seen and heard in person to communicate, or

(b) Via methods of electronic delivery that involves the use of electronic or other means (e.g. telephone, computers, etc.) to provide the service.

(i) When using electronic delivery means, all use must be in compliance with all professional ethical standards and all other requirements in these rules;

(ii) Special care should be taken to ensure the confidentiality and security of the provision of services; and

(iii) The Licensed Marriage and Family Therapist shall provide only those services that are legal within the state that the recipient of services lives.

**Section 2. General Requirements for Licensure.** It is the sole responsibility of the applicant to ensure that the Board receives all documentation necessary to prove to the Board's satisfaction that the applicant meets all the requirements for licensure herein. The applicant shall provide satisfactory evidence to the Board that they:

(a) are of majority age;

(b) have no felony convictions, and no misdemeanor convictions that relate adversely to the practice of marriage and family therapy or to the ability to practice marriage and family therapy, although exceptions to this requirement may be granted by the Board if consistent with the public interest;

(c) are legal inhabitants of the United States; and

- (d) satisfy the requirements established in these rules.

### **Section 3. Education Requirement for Licensure.**

(a) All educational requirements for licensure shall be met through the completion of a master's degree program in marriage and family therapy from a Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) or Council for Accreditation of Counseling and Related Educational Programs- Marriage and Family Counseling (CACREP-MCFC) accredited program. The Board will only accept the education from a CACREP-MCFC program if the applicant was enrolled in the program prior to January 1, 2020.

(b) Applicants who have completed couple, marriage and family therapy programs not accredited by COAMFTE or CACREP-MCFC may be deemed to have met the educational requirement provided they meet the following criteria:

(i) The graduate degree program, and any applicable additional graduate level course work, was completed at an educational institution accredited by one of the regional or national institutional accrediting bodies recognized by the Council for Higher Education Accreditation (CHEA).

(ii) The program was substantially similar in content as required by COAMFTE or CACREP-MCFC including instructor qualifications, clinical supervision, practicum and internship requirements and course work.

(iii) The official transcripts, course prefixes, and course descriptions clearly identify the educational program as preparing persons to be couples, marriage and family therapists.

(iv) Course work shall be completed in a master's or doctoral program or subsequent graduate level coursework.

(v) The applicant has completed a minimum of seventy-two (72) quarter hours or forty-eight (48) semester hours of graduate level coursework.

(vi) Course work for those graduating from programs prior to January 1, 2020 was completed in each of the core areas defined herein:

(A) Individual and Family Development (9 semester credits)- Courses in this area include content on individual and family development across the lifespan. Content should provide knowledge of individual personality development and its normal and abnormal manifestations. The applicant should have relevant coursework in human development across the life span which includes special issues that affect an individual's development. This material should be integrated with systems concepts. Topic areas may include human development, child/adolescent development, psychopathology, personality theory, human sexuality, and other psychosocial development including career development, or other courses related directly to

human development. Test and measurement courses are not acceptable in this area.

(B) Theoretical Knowledge of Couples, Marital and Family Therapy (9 semester credits)- Courses in this area address the historical development, theoretical and empirical foundations, and contemporary conceptual directions of the field of couples, marriage and family therapy. Content enables students to conceptualize and distinguish the critical epistemological issues in the profession of couples, marriage and family therapy and provide a comprehensive survey and substantive understanding of the major models of marriage, couples, and family therapy. All courses in this area must have a major focus from a systems theory orientation. Topic areas may include systems theory, family subsystems, blended family, gender issues in families, cultural issues in families, or other courses directly related to couples, marital and family theory. Survey or overview courses in which systems is one of several theories covered are not appropriate. Courses in which systems theory is the major focus and other theories are studied in relation to systems theory are appropriate.

(C) Clinical Knowledge of Couples, Marital and Family Therapy (9 semester credits)- Courses in this area address, from a relational/systemic perspective, psychopharmacology, physical health and illness, traditional psychodiagnostic categories, and the assessment, diagnosis and treatment of major mental health issues. Content addresses contemporary issues, which include but are not limited to gender, sexual functioning, sexual orientation, sex therapy, violence, addictions, and abuse, in the treatment of individuals, couples, and families from a relational/systemic perspective. Material addresses a wide variety of presenting clinical problems. Courses in this area should have a major focus on advanced family systems theories and systemic therapeutic interventions. This area is intended to provide a substantive understanding of the major theories of systems change and the applied practices evolving from each theoretical orientation. Major theoretical approaches may include strategic, structural, object relations family therapy, behavioral family therapy, communications family therapy, intergenerational family therapy, systemic sex therapy, or other courses directly related to couples, marital and family therapy. Survey or overview courses in which family therapy is one of several types of theories covered is not acceptable.

(D) Research (3 semester credits)- Courses in this area include significant material on research in couple and family therapy. Content focuses on research methodology, data analysis and the evaluation of research including quantitative and qualitative research and its methods. Individual personality, test and measurement, and library research courses are not acceptable toward this area.

(E) Professional Identify & Ethics (3 semester credits)- Courses in this area are intended to contribute to the professional development of the therapist. Content includes professional identity, including professional socialization, scope of practice, professional organizations, licensure, and certification. Coursework focuses on ethical issues related to the profession of individual, couples, marriage and family therapy. Other areas that need to be addressed include the AAMFT Code of Ethics, confidentiality issues, the legal responsibilities and liabilities of clinical practice and research, family law, record keeping, reimbursement, the business aspects of practice, and familiarity with regional and federal laws as they relate to the practice of individual, couple and family therapy. Religious ethics courses and moral theology

are not accepted towards this area.

(F) Clinical Practicum/Internship (9 semester credits)- Applicants shall complete a supervised clinical practicum/internship with individuals, couples, and families.

(vii) Course work for those graduating from programs after January 1, 2020 was completed in each of the core areas defined herein:

(A) Foundations of Relational/Systemic Practice, Theories & Models (Minimum of 6 semester credits/8 quarter credits/90 clock hours) This area facilitates students developing competencies in the foundations and critical epistemological issues of MFTs. It includes the historical development of the relational/systemic perspective and contemporary conceptual foundations of MFTs, and early and contemporary models of MFT, including evidence-based practice and the biopsychosocial perspective.

(B) Clinical Treatment with Individuals, Couples and Families (Minimum of 6 Credits/8 quarter credits/90 clock hours) This area facilitates students developing competencies in treatment approaches specifically designed for use with a wide range of diverse individuals, couples, and families, including sex therapy, same-sex couples, working with young children, adolescents and elderly, interfaith couples, and includes a focus on evidence-based practice. Programs must include content on crisis intervention.

(C) Diverse, Multicultural and/or Underserved Communities (Minimum of 3 Credits/4 quarter credits/45 clock hours). This area facilitates students developing competencies in understanding and applying knowledge of diversity, power, privilege and oppression as these relate to race, age, gender, ethnicity, sexual orientation, gender identity, socioeconomic status, disability, health status, religious, spiritual and/or beliefs, nation of origin or other relevant social categories throughout the curriculum. It includes practice with diverse, international, multicultural, marginalized, and/or underserved communities, including developing competencies in working with sexual and gender minorities and their families as well as anti-racist practices.

(D) Research & Evaluation (Minimum of 3 Credits/4 quarter credits/45 clock hours). This area facilitates students developing competencies in MFT research and evaluation methods, and in evidence-based practice, including becoming an informed consumer of couple, marriage, and family therapy research. If the program's mission, goals, and outcomes include preparing students for doctoral degree programs, the program must include an increased emphasis on research.

(E) Professional Identity, Law, Ethics & Social Responsibility (Minimum of 3 Credits/4 quarter credits/45 clock hours). This area addresses the development of a MFT Identity and socialization, and facilitates students developing competencies in ethics in MFT practice, including understanding and applying the AAMFT Code of Ethics and understanding legal responsibilities.

(F) Biopsychosocial Health & Development Across the Life Span

(Minimum of 3 Credits/4 quarter credits/45 clock hours). This area addresses individual and family development, human sexuality, and biopsychosocial health across the lifespan.

(G) Systemic/Relational Assessment & Mental Health Diagnosis and Treatment (Minimum of 3 Credits/4 quarter credits/45 clock hours). This area facilitates students developing competencies in traditional psycho-diagnostic categories, psychopharmacology, the assessment, diagnosis, and treatment of major mental health issues as well as a wide variety of common presenting problems including addiction, suicide, trauma, abuse, intra-familial violence, and therapy for individuals, couples, and families managing acute chronic medical conditions, utilizing a relational/systemic philosophy.

(H) The following areas must be covered in the curriculum in some way, though there are no minimum credit requirements:

(I) Contemporary Issues. This area facilitates students developing competencies in emerging and evolving contemporary challenges, problems, and/or recent developments at the interface of Couple or Marriage and Family Therapy knowledge and practice, and the broader local, regional, and global context. This includes such issues as immigration, technology, same-sex marriage, violence in schools, etc. These issues are to reflect the context of the program and the program's mission, goals, and outcomes.

(II) Community Intersections & Collaboration. This area facilitates students developing competencies in practice within defined contexts (e.g., healthcare settings, schools, military settings, private practice) or nontraditional MFT professional practice using therapeutic competencies congruent with the program's mission, goals, and outcomes (e.g., community advocacy, psycho-educational groups). It also addresses developing competency in multidisciplinary collaboration.

(III): Preparation for Teletherapy Practice This area facilitates the development of competencies in teletherapy. This may include such issues as emerging legal and ethical requirements, documentation, response to crises, awareness of the therapeutic space, joining, appropriate individual and systemic interventions (e.g., couples, play therapy), or other topics of importance to the context of the program and with diverse populations.

(I) Practicum or internship. Includes a minimum of 300 clinical contact hours with individuals, couples, families and other systems physically present, at least 100 of which must be relational. The 300 hours must occur over a minimum of twelve months of clinical practice. Students must receive at least 100 hours of supervision. Supervision can be individual or group and must include a minimum of 50 hours of supervision utilizing observable data. Supervision may utilize digital technology in which participants are not in the same location as long as the majority of supervision is with supervisor and supervisee physically present in the same location and appropriate mechanisms/precautions are in place to ensure the confidentiality and security of the means of technology delivery.

(viii) Three (3) semester credits is equivalent to four (4) quarter credits.

#### **Section 4. Supervised Training/Work Experience Requirement for Licensure.**

(a) A minimum of three thousand (3,000) hours of supervised clinical training/work experience in individual, couple, marriage and family therapy under the direct supervision of a DQCS is required for all applicants. This experience shall meet the requirements set forth in these rules. The hours must be completed over a period of not less than eighteen (18) months or more than thirty-six (36) months unless granted an extension by the Board.

(i) All three thousand (3,000) hours of supervised clinical training/work experience required shall be completed after the award of the graduate degree.

(ii) Of the three thousand (3,000) hours required, at least one thousand two hundred (1,200) hours shall be direct client contact hours.

(A) Of the one thousand two hundred (1,200) direct client contact hours at least five hundred (500) hours must be direct clinical services to couples and families.

(iii) The balance of the remaining indirect hours shall consist of work experience that supports the direct client contact hours, e.g. charting, preparation, meetings, trainings, or the other duties of marriage and family counseling.

(b) An applicant shall have a minimum of one hundred (100) post graduate hours of clinical supervision with a DQCS as described in Chapter 18.

#### **Section 5. Examination Requirement for Licensure.**

(a) The Board shall accept a passing score as established by the examination provider on one of the following examinations:

(i) The Association of Marital and Family Therapists Regulatory Boards (AMFTRB) examination; or

(ii) Other examination as may be approved by the Board.

(b) The examination shall have been passed within the immediate five (5) years prior to submission of the application. This requirement does not apply to:

(i) those applying under Section 6 of these Rules; or

(ii) those applying for licensure by completing provisional.

**Section 6. License by Reciprocity.** An individual who has a master's degree or higher in marriage family therapy, has passed the examination as required in Section 5 of this Chapter, and holds a license that is free from discipline and in good standing to engage in the practice of marriage and family therapy under the laws of another state may, upon approval of the board, be issued a license as a Marriage and Family Therapist in this state. If the individual

has held a license to practice marriage and family therapy in more than one state, the individual shall be required to provide verification that all licenses held within the last five (5) years have not had any discipline against the license.

**Section 7. Standards of Conduct.**

(a) The terms “Licensed Marriage and Family Therapist” or “Marriage and Family Therapist” shall be used only after the applicant is granted licensure by the Board.

(b) The Licensed Marriage and Family Therapist shall comply with the American Association for Marriage and Family Therapy “Code of Ethics” incorporated into these rules in Chapter 15.

## Chapter 11

### Licensed Professional Counselor

**Section 1. The Practice of a Licensed Professional Counselor.** The practice of a Licensed Professional Counselor is the rendering to individuals, couples, families, groups, organizations, corporations, institutions, government agencies or the general public a service that integrates a wellness, pathology and multicultural model of human behavior. This model applies a combination of mental health, psychotherapeutic, and human development principles and procedures to help clients achieve effective mental, emotional, physical, social, moral, educational, spiritual or career development and adjustment throughout the life span, and includes performing mental health procedures, the assessment, diagnostic description and treatment of mental disorders or disabilities within the range of the professional's preparation.

(a) The practice of counseling may be either face-to-face that involves the synchronous interaction between an individual or groups of individuals using what is seen and heard in person to communicate, or

(b) Via methods of electronic delivery that involves the use of electronic or other means (e.g. telephone, computers, etc.) to provide the service.

(i) When using electronic delivery means, all use must be in compliance with all professional ethical standards and all other requirements in these rules;

(ii) Special care should be taken to ensure the confidentiality and security of the provision of services; and

(iii) The Licensed Professional Counselor shall provide only those services that are legal within the state that the recipient of services lives.

**Section 2. General Requirements for Licensure.** It is the sole responsibility of the applicant to ensure that the Board receives all documentation necessary to prove to the Board's satisfaction that the applicant meets all the requirements for licensure herein. The applicant shall provide satisfactory evidence to the Board that they:

(a) are of majority age;

(b) have no felony convictions, and no misdemeanor convictions that relate adversely to the practice of counseling or to the ability to practice counseling, although exceptions to this requirement may be granted by the Board if consistent with the public interest;

(c) are legal inhabitants of the United States; and

(d) satisfy the requirements established in these rules.



### **Section 3. Education Requirement for Licensure.**

(a) The applicant shall have received a master's or doctorate degree in counseling from a Council for Accreditation of Counseling and Related Educational Programs (CACREP) or Council on Rehabilitation Education (CORE) accredited program in counseling.

(b) Applicants who have completed graduate counselor programs not accredited by CACREP or CORE may be deemed to have met the educational requirement provided they meet the following criteria:

(i) The graduate degree program, and any applicable additional graduate level course work, was completed at an educational institution accredited by one of the regional or national institutional accrediting bodies recognized by the Council for Higher Education Accreditation (CHEA).

(ii) The program was substantially similar in content as required by CACREP including instructor qualifications, clinical supervision and course work.

(iii) The applicant must have completed a minimum of seventy-two (72) quarter hours or forty-eight (48) semester hours of graduate level course work. Applicants who graduated after July 1, 2013, must have completed a minimum of ninety (90) quarter hours or sixty (60) semester hours of graduate level course work.

(iv) The official transcripts, course prefixes, and course descriptions clearly identify the educational program as preparing persons to be professional counselors.

(v) Course work shall be completed in a master's or doctoral program or subsequent graduate level course work.

(vi) Course work was completed in each of the core areas defined herein:

(A) Practicums, Internships or Field Experience under clinical supervision.

(I) Students must complete supervised practicum experiences that total a minimum of 100 clock hours over a minimum 10-week academic term.

(II) The program requires completion of a supervised internship in the student's designated program area of 600 clock hours, begun after successful completion of the practicum. The internship is intended to reflect the comprehensive work experience of a professional counselor appropriate to the designated program area. Each student's internship includes all of the following:

(1.) At least 240 clock hours of direct service, including experience leading groups;

(2.) Weekly interaction that averages one hour per week of individual or triadic supervision throughout the internship, usually performed by the onsite supervisor; and

(3.) An average of 1 1/2 hours per week of group supervision provided on a regular schedule throughout the internship and performed by a program faculty member.

(B) Human Growth and Development- studies that provide an understanding of the nature and needs of individuals at all developmental levels, including all of the following:

(I) Theories of individual and family development and transitions across the life-span;

(II) Theories of learning and normal and abnormal personality development;

(III) Effects of crises, disasters, and other trauma-causing events on diverse individuals across the lifespan;

(IV) Individual, biological, neurological, physiological, systemic, spiritual, and environmental factors that affect human development, functioning, and behavior;

(V) A general framework for understanding differing abilities and strategies for differentiated interventions;

(VII) Theories and etiology of addictions and addictive behaviors; and

(VIII) Ethical and culturally relevant strategies for promoting resilience and optimum development and wellness across the life span

(C) Social and Cultural Diversity- studies that provide an understanding of the cultural context of relationships, issues and trends in a multicultural society including all of the following:

(I) Research addressing multicultural and pluralistic characteristics within and among diverse groups nationally and internationally;

(II) Learning activities to foster student's self understanding of the impact of their heritage, attitudes, beliefs, understandings, and acculturative experiences on their views of others;

(III) Theories and models of multicultural counseling, identity development, and social justice and advocacy;

(IV) Strategies for identifying and eliminating barriers, prejudices, and processes of intentional and unintentional oppression and discrimination;

(V) Learning activities that foster understandings of the help-seeking behaviors of diverse clients;

(VI) Learning activities that foster understanding of the impact of spiritual beliefs on clients' and counselors' worldviews; and

(VII) Multicultural competencies and strategies for working with and advocating optimum wellness for diverse populations;

(D) Helping Relationships- studies that provide an understanding of counseling process in a multicultural society, including all of the following:

(I) Theories and models of effective counseling and wellness programs;

(II) Counselor characteristics and behaviors that influence the helping process;

(III) Essential interviewing, case conceptualization and counseling skills;

(IV) A systems approach that provides an understanding of family, social, community, and political networks;

(V) Theories, models, and strategies for understanding and practicing consultation; and

(VI) Ethical and culturally relevant strategies for developing helping relationships:

(VII) Developmentally relevant counseling treatment or intervention plans;

(VIII) Development of measurable outcomes for clients;

(IX) Empirically-based counseling strategies and techniques for prevention, intervention, and advocacy;

(X) Strategies to promote client understanding of and access to a variety of community-based resources;

- (XI) Suicide prevention models and strategies;
  - (XII) Crisis intervention and psychological first aid strategies;
- and
- (XIII) Processes for aiding students in developing a personal model of counseling.
- (E) Group Work- studies that provide theoretical foundations of group work and dynamics associated with group process including all of the following:
- (I) Therapeutic factors and how they contribute to group effectiveness;
  - (II) Characteristics and functions of effective group leaders;
  - (III) Approaches to group formation, including recruiting, screening, and selecting members;
  - (IV) Types of groups and other considerations that affect conducting groups in varied settings;
  - (V) Ethical and culturally relevant strategies for designing and facilitating groups; and
  - (VI) Direct experiences in which students participate as group members in a small group activity, approved by the program, for a minimum of 10 clock hours over the course of one academic term.
- (F) Career Development- studies that provide an understanding of career development and related life factors, including all of the following:
- (I) Theories and models of career development, counseling, and decision-making;
  - (II) Process for identifying and utilizing career, avocational, educational, occupational and labor market information resources, technology and information systems;
  - (III) Approaches for assessing the conditions of the work environment on clients' overall life experiences;
  - (IV) Strategies for assessing abilities, interests, values, personality, and other factors that contribute to career development;

(V) Strategies for career development program planning, organization, implementation, administration, and evaluation;

(VI) Strategies for advocating for diverse clients' career and educational development and employment opportunities in a global economy;

(VII) Strategies for facilitating client skills development for career, educational, and life-work planning and management;

(VIII) Approaches for conceptualizing the interrelationships among and between work, family, and other life roles and factors;

(IX) Methods of identifying and utilizing assessment tools and techniques relevant to career planning and decision making; and

(X) Ethical and culturally relevant strategies for addressing career development.

(G) Assessment- studies that provide an understanding of individual and group approaches to assessment and evaluation in a multicultural society, including all of the following:

(I) Historical perspectives concerning the nature and meaning of assessment;

(II) Basic concepts of standardized and non-standardized testing, norm-referenced and criterion-referenced assessment and group and individual assessments;

(III) Statistical concepts, including scales of measurement, measures of central tendency, indices of variability, shapes and types of distributions, and correlations;

(IV) Reliability and validity in the use of assessments;

(V) Methods of effectively preparing for and conducting initial assessment meetings;

(VI) Procedures for assessing risk of aggression or danger to others, self-inflicted harm or suicide;

(VII) Procedures for identifying and reporting abuse:

(VIII) Use of assessments for diagnostic and intervention planning purposes;

(IX) Use of assessments relevant to academic/educational, career, personal, and social development;

(X) Use of environmental assessments and systematic behavioral observations;

(XI) Use of symptom checklists, personality and psychological testing;

(XII) Use of assessment results to diagnose developmental, behavioral, and mental disorders; and

(XIII) Ethical and culturally and developmentally relevant strategies for selecting, administering, and interpreting assessment and test results.

(H) Research and Program Evaluation- studies that provide an understanding of research methods, statistical analysis, needs assessment, and program evaluation, including all of the following:

(I) The importance of research in advancing the counseling profession, including its use to inform evidence based practice;

(II) Qualitative, quantitative, and mixed research methods;

(III) Statistical methods used in conducting research and program evaluation;

(IV) Evaluation of counseling interventions and programs;

(V) Development of outcome measures for counseling programs;

(VI) Analysis and use of data in counseling; and

(VII) Ethical and culturally relevant strategies for conducting, interpreting and reporting the results of research and/or program evaluation studies.

(I) Professional Counseling Orientation and Ethical Practice- studies that provide an understanding of all of the following aspects of professional functioning:

(I) History and philosophy of the counseling profession and the origins of the counseling specialty areas;

(II) The multiple professional roles and functions of counselors across specialty areas and their relationships with other human service providers, including interagency and interorganizational collaboration and consultation;

- (III) Counselors' roles and responsibilities as members of interdisciplinary community outreach and emergency management response teams;
- (IV) Self-care strategies appropriate to the counselor role;
- (V) Technology's impact on the counseling profession;
- (VI) Strategies for personal and professional self-evaluation and implications for practice;
- (VII) Counseling supervision models, practices, and processes;
- (VIII) Professional organizations, including membership benefits, activities, services to members, and current issues;
- (IX) Professional credentialing, including certification, licensure, and accreditation practices and standards, and the effects of public policy on these issues;
- (X) The role and process of the professional counselor advocating on behalf of the profession;
- (XI) Advocacy processes needed to address institutional and social barriers that impede access, equity, and success for clients; and
- (XII) Ethical standards of professional organizations and credentialing bodies, and applications of ethical and legal considerations in professional counseling.

#### **Section 4. Supervised Training/Work Experience Requirement for Licensure.**

- (a) A minimum of three thousand (3,000) hours of supervised clinical training/work experience in professional counseling under the direct supervision of a DQCS is required for all applicants. This experience shall meet the requirements set forth in these rules. The hours must be completed over a period of not less than eighteen (18) months or more than thirty-six (36) months unless granted an extension by the Board.
  - (i) All three thousand (3,000) hours of supervised clinical training/work experience required shall be completed after the award of the graduate degree;
  - (ii) Of the three thousand (3,000) hours required, at least one thousand two hundred (1,200) hours shall be direct client contact hours.
  - (iii) The balance of the remaining indirect hours shall consist of work experience that supports the direct client contact hours, e.g. charting, preparation, meetings,

trainings, or the other duties of counseling.

(b) An applicant shall have a minimum of one hundred (100) post graduate degree hours of clinical supervision with a DQCS as described in Chapter 18.

#### **Section 5. Examination Requirement for Licensure.**

(a) The Board shall accept a passing score as established by the examination provider on the following examinations:

(i) The National Board for Certified Counselor's (NBCC) National Counselor Examination (NCE) or the National Clinical Mental Health Examination (NCMH).

(ii) The Certification Examination administered by the Commission on Rehabilitation Counselor Certification (CRCC).

(iii) Other examinations as may be approved by the Board.

(b) The examination shall have been passed within the immediate five (5) years prior to submission of the application. This requirement does not apply to:

(i) those applying under Section 6 of these Rules; or

(ii) those applying for licensure by completing provisional.

**Section 6. License by Reciprocity.** An individual who has a master's degree or higher in professional counseling, has passed the examination as required in Section 5 of this Chapter, and holds a license that is free from discipline and in good standing to engage in the practice of professional counseling under the laws of another state may, upon approval of the board, be issued a license as a Professional Counselor in this state. If the individual has held a license to practice professional counseling in more than one state, the individual shall be required to provide verification that all licenses held within the last five (5) years have not had any discipline against the license.

#### **Section 7. Standards of Conduct.**

(a) The terms "Licensed Professional Counselor" or "Professional Counselor" shall be used only after the applicant is granted licensure by the Board.

(b) The Licensed Professional Counselor shall comply with the American Counseling Association "Code of Ethics" incorporated into these rules in Chapter 15.



## **Chapter 12**

### **Application Procedure**

#### **Section 1. Class of License and Certification.**

(a) A separate and distinct license or certification shall be issued for each of the following disciplines:

- (i) Certified Addictions Practitioner (CAP)
- (ii) Certified Addictions Practitioner Assistant (CAPA)
- (iii) Certified Mental Health Worker (CMHW)
- (iv) Certified Social Worker (CSW)
- (v) Licensed Addictions Therapist (LAT)
- (vi) Licensed Clinical Social Worker (LCSW)
- (vii) Licensed Marriage and Family Therapist (LMFT)
- (viii) Licensed Professional Counselor (LPC)
- (ix) Provisional Addictions Therapist (PAT)
- (x) Provisional Clinical Social Worker (PCSW)
- (xi) Provisional Marriage and Family Therapist (PMFT)
- (xii) Provisional Professional Counselor (PPC)

(b) Initial licenses and certifications shall expire on the licensee's or certificate holder's birth date immediately following the second anniversary of the issue date. Thereafter, upon renewal, the license or certification shall be valid for two (2) years.

(c) Additional licenses and certifications issued to the same individual shall expire on the same date as the initial license or certification held by that individual. Thereafter, upon renewal, the license or certification shall be valid for two (2) years.

(d) An applicant shall clearly indicate the specific license or certification desired. An applicant who seeks licensure or certification in more than one discipline shall submit separate applications, appropriate fees and documentation for each license or certification sought.

(e) The Board shall not make any determination regarding an applicant's eligibility for license or certification status prior to receiving a completed application, fee, and all supporting documents.

**Section 2. General Application Procedures.** An individual is considered an applicant once he or she has submitted the following:

(a) A complete official application form accompanied by the application fee and appropriate proof of legal presence in the U.S.

(b) Official transcripts from all colleges and universities attended.

(i) Applicants required to complete transcript evaluation forms shall not use the same class to meet the requirements for more than one required area of study.

(c) A certificate of professional qualification in the discipline from a national credentials bank, approved by the Board, may be accepted by the Board for license by reciprocity. The Board may require the applicant to submit such supplemental information as it deems necessary to assure that the applicant meets the qualifications for licensure.

(d) All documents submitted in support of the application shall contain signature and be submitted directly to the office of the Board from the respondent and not forwarded through the applicant.

(e) Fingerprints and other information necessary for a criminal history record background check as required by Wyoming Statute 33-38-105 (j).

(f) The applicant acknowledges through submission of an application and fee the Board may perform an ongoing query of their licensure through the National Practitioners Data Base.

(g) Completion of all requirements for licensure or certification shall be documented within one (1) year of the date the application is received by the Board, otherwise the application will be deemed expired. If an application expires, an applicant shall be required to submit a new application including the payment of the required fees.

**Section 3. Application for Licensure by Examination.** In addition to the documents required in Section 2 of this chapter, the DQCS(s) of the applicant shall submit complete Verification and Evaluation of Supervised Experience forms within thirty (30) days of the conclusion of supervision.

**Section 4. Application for Licensure by Reciprocity.** The applicant shall request verification of licensure in good standing from jurisdictions where the applicant holds or has held a license in any mental health discipline. Additionally, the applicant shall submit official transcripts from all colleges and universities required by the application as well as verification that the applicant has achieved a passing score on an accepted examination for the license. The

Board may rely upon the documentation and verified data gathered and stored by not for profit organizations which share in the public protection mission of this Board including, but not limited, to Association of Social Work Boards.

**Section 5. Application for Certification by Examination.** In addition to the documents required in section 2 of this chapter, the DQCS of the applicant shall submit a complete supervision agreement.

**Section 6. Application for Certification by Reciprocity.** The applicant shall request verification of certification in good standing from jurisdictions where the applicant holds or has held a certification in any mental health discipline. Additionally, the applicant shall submit official transcripts from all colleges and universities required by the application as well as verification that the applicant has achieved a passing score on an accepted examination for the certification. The board may rely upon the documentation and verified data gathered and stored by not for profit organizations which share in the public protection mission of this board including, but not limited, to Association of Social Work Boards.

**Section 7. Issuance of License or Certification.** The Board shall issue a wall certificate to the successful applicant bearing the full name of the holder, discipline designation, license or certification number, date of issuance, expiration date, and appropriate seal. The board may rely upon the documentation and verified data gathered and stored by not for profit organizations which share in the public protection mission of this board including, but not limited, to Association of Social Work Boards.

**Section 8. Change of Name, Address or Telephone Number.**

(a) Licensees and certificate holders shall register with the Board any change in their legal name, shall submit documentation demonstrating the change of name, appropriate fee and shall surrender the old wall certificate and a new wall certificate shall be issued by the Board.

(b) Each applicant, licensee and certificate holders shall file with the Board their current home and professional mailing addresses and telephone numbers and shall report to the Board in writing any change of addresses or telephone numbers, giving both old and new addresses and telephone numbers. A change in employment requires a revised disclosure statement.

(c) All changes shall be reported to the Board office within thirty (30) days of the change.

**Section 9. Correction and Amendment.** Any applicant, licensee or certificate holder may clarify erroneous, inaccurate or misleading information in their file by submitting a written statement to the Board which will be placed in their file.

## Chapter 13

### Fees

**Section 1. Fees.** This fee schedule is adopted by the Board pursuant to W.S. 33-1-201.

(a) Application Fees:

- (i) Licensure by reciprocity \$350.00 per discipline
- (ii) Licensure by examination \$350.00 per discipline
- (iii) Licensure by completing provisional \$200.00 per discipline
- (iv) Certification by reciprocity \$300.00 per discipline
- (v) Certification by examination \$300.00 per discipline
- (vi) Provisional License \$150.00 per discipline

(b) Renewal Fees:

(i) License \$125.00 for the initial discipline and \$75.00 for every additional discipline.

- (ii) Certification \$100.00 per discipline

(c) Re-Licensure Fee \$350.00 per discipline

(d) Re-Certification Fee \$300.00 per discipline

(e) Re-Instatement of license or certificate \$200.00 per discipline

(f) Non-sufficient Funds Fee: in accordance with W.S. 1-1-115

(g) Verification Fee: \$30.00 payable by cashier's check or money order only.

(h) Background Check Fee \$39.00 - required with initial application and renewal every 4 years.

(i) NPDB Fee \$4.00 - required with initial application and each renewal.

**Section 2. Refunds.** All fees collected by the Board are non-refundable.

**Section 3. Applications Unaccompanied by Fees.** No application shall be considered by the Board unless accompanied by all fees.

**Section 4. Duplicate or Replacement Certificate and Pocket Card.** Duplicate or replacement wall certificates and pocket cards may be issued by the Board. All requests for duplicate or replacement certificates shall be in writing and shall be accompanied by a \$20.00 fee for each duplicate or replacement. All requests for duplicate or replacement pocket cards shall be in writing and shall be accompanied by a \$10.00 fee for each duplicate or replacement.

**Section 5. Requests for Roster of Licensees and Certificate Holders.** The roster of current licensees and certificate holders shall be updated at least annually and made available electronically at no charge.

## **Chapter 14**

### **Renewal**

**Section 1. Statement of Purpose.** These Board rules are adopted to implement the Board's authority to establish and enforce the requirements for applications for renewal, relicensure, and reinstatement of licenses.

**Section 2. Definitions.** Terms used in this section are defined as follows:

- (a) "Applicant" means a licensee or former licensee.
- (b) "ARC" means Application Review Committee which shall be comprised of one (1) or two (2) Board members or other individuals with assistance from a representative of the Attorney General's Office.
- (c) "CE" means continuing education contact hours used to complete coursework or classes that have significant intellectual or practical content, and the primary objective shall be to increase the participant's competence within each licensed or certified discipline. The scope of practice for each discipline in these rules and regulations shall be used as a basis of what knowledge and skills are acceptable to the Board as continuing education activities.
- (d) "License" means a license or certificate.

**Section 3. Renewal of License.**

- (a) Initial Licensure. An initial license shall be valid for a minimum of two (2) years and shall expire on the licensee's birthday immediately following that two (2) year period. If the licensee desires to continue to practice, the licensee shall seek renewal of their license.
- (b) Renewal Period and Expiration Date. A renewed license shall be valid for two (2) years. A license shall expire on a licensee's birthday at the end of that renewal period.
- (c) Renewal Procedure. A licensee shall seek renewal every two (2) years on or before their birthday. A licensee seeking renewal shall submit:
  - (i) A completed renewal application and payment of fee; and
  - (ii) Evidence of completion of forty-five (45) contact hours of CE that comply with Section 4.
- (d) Renewal applications shall not be accepted if:
  - (i) Submitted more than one hundred twenty (120) days prior to the expiration date;

(ii) Received by the Board office which are postmarked after the expiration date or after the next business day in cases when the expiration date falls on a weekend or holiday; or

(iii) Electronically submitted after 11:59 p.m. on the expiration date.

(e) Fingerprints. Beginning July 1, 2021 applicants shall submit fingerprints and other information necessary for a criminal history record background check as required by Wyoming Statute 33-38-105(j) (2).

(f) The applicant acknowledges through submission of an application and fee the Board may perform an ongoing query of their licensure through the National Practitioners Data Base.

(g) Failure to Timely Renew. If a licensee fails to timely renew their license, then the license shall expire and the licensee shall not practice until appropriately licensed.

#### **Section 4. Continuing Education Requirements.**

(a) Renewal Period. CE shall be obtained during the current renewal period.

(b) Specific CE Requirements.

(i) Licensees shall complete at least three (3) contact hours of CE activities in each of the following:

(A) Professional ethics; and

(B) Suicide assessment or intervention.

(c) A licensee holding a LAT, CAP, or CAPA license shall complete at least fifteen (15) contact hours of CE in additions specific topics.

(d) Earning CE. CE may be earned as follows:

(i) Successful completion of college courses;

(ii) Successful completion of continuing education classes or online courses;

(iii) CE credit will be allowed for presenting at venues designed to increase other mental health professionals' knowledge base.

(A) One (1) hour of credit shall be allowed for each hour of presentation, up to a maximum of six (6) hours during each renewal period. Credit may be received only once for a particular presentation topic;

(B) Licensees employed by universities and colleges may not claim credit units for conducting courses that are a part of the regular course offering of those institutions, even if those courses are offered in the evening or summer, or for individuals enrolled in a degree program or vocational or technical schools; and

(iv) Attending a meeting of the Board. One (1) hour of credit will be allowed for each hour of attendance, up to a maximum of three (3) contact hours of CE during the renewal period.

(e) Record Keeping. Licensees and certificate holders shall be responsible for maintaining records used to support continuing education claimed on an application for two (2) years from the date of submitted for renewal. Copies shall be requested by the Board if the licensee is randomly selected for audit.

(i) Licensees shall maintain records used to support CE claimed on a renewal application for two (2) years. A licensee shall provide documentation upon request of the Board.

(ii) Proof of attendance shall contain the activity title, dates, contact hours attended, presenter, the name of the licensee, and shall be signed by the sponsor or the presenter.

(f) Compliance and Application Review Committee Review of Continuing Education.

(i) Every application shall be subject to audit verification for CE compliance. The ARC shall review an applicant's claimed CE and documentation.

(ii) The ARC shall send a Notice of Deficiency to an applicant if:

(A) An applicant is unable to provide satisfactory documentary evidence of compliance with this section, or

(B) ARC does not approve CE units or credits claimed by the applicant.

(iii) Within thirty (30) days from the date of the Notice of Deficiency, the applicant shall submit:

(A) Satisfactory documentary evidence of CE to correct the deficiency;  
or

(B) A written request for the Board to review the ARC's denial of claimed CE units or credits.

(iv) If the applicant does not provide satisfactory documentary evidence or request Board review, the application shall be dismissed.



(v) CE earned and submitted in response to the Notice of Deficiency shall not be used to demonstrate competency in the next renewal.

(g) Exemptions. An applicant may seek an exemption from all or part of the CE requirements. The applicant shall submit a petition to the Board demonstrating just cause for exemption. Just cause may include:

(i) Being called to active duty in the armed forces of the United States for a period of time exceeding one hundred and eighty (180) or more consecutive days in any calendar year; or

(ii) Experiencing a physical disability, illness or other disabling situation exceeding one hundred and eighty (180) or more consecutive days in any calendar year.

(iii) The number of hours exempted shall be in proportion to the length of deployment, disability or situation.

## **Section 5. Retired Status.**

(a) Eligibility. A licensee may seek retired status if they are no longer receiving any remuneration from providing any of the services regulated by this Act.

(b) Application Procedure. A licensee seeking retired status shall submit a completed retirement application and pay for a replacement wall certificate.

(c) CE Exemption. While a license is retired, the licensee shall be exempt from the CE requirement for renewal of the license.

(d) Wall Certificate. A replacement wall certificate shall be issued identifying the licensee as retired. The licensee shall return the original wall certificate to the Board Office.

(e) Fingerprints. Beginning July 1, 2021 applicants shall submit fingerprints and other information necessary for a criminal history record background check as required by W.S. 33-38-105(j) (2).

(f) The applicant acknowledges through submission of an application and fee the Board may perform an ongoing query of their licensure through the National Practitioners Data Base.

(g) Reactivation. A retired licensee may return to active practice by completing forty-five (45) contact hours of CE within the two (2) years immediately preceding re-application, submitting a professional disclosure statement, and paying the full renewal fee for the remainder of the current license period.

## **Section 6. Relicensure.**

(a) Eligibility. An applicant may seek relicensure if the application failed to timely renew their license or allowed the license to expire and has not held an active license in another jurisdiction.

(b) Relicensure Procedure. An applicant seeking relicensure shall submit:

(i) Completed relicensure application and payment of fees; and

(ii) Evidence of completion of forty-five (45) contact hours of CE that comply with Section 4 within the two (2) years immediately preceding the application for relicensure; or

(iii) If the license has been expired for more than five (5) years, then applicant shall retake and successfully pass the proper examination.

(iv) Fingerprints and other information necessary for a criminal history record background check as required by W.S. 7-19-201(a)(xxx).

(v) The applicant acknowledges through submission of an application and fee the Board may perform an ongoing query of their licensure through the National Practitioners Data Base.

## **Section 7. Reinstatement.**

(a) Eligibility. An applicant may seek reinstatement if the license has been revoked, surrendered, suspended, conditioned, or restricted.

(b) Reinstatement Procedure. An applicant seeking reinstatement shall submit:

(i) A completed reinstatement application and payment of fees;

(ii) Evidence of meeting requirements of the previous Board's order or correcting the conduct underlying the Board's order that demonstrates the applicant's ability to safely, skillfully, and competently practice; and

(iii) Evidence of completion of twenty (20) contact hours of CE that comply with Section 4 for each year since the applicant's last renewal, if applicable.

## Chapter 15

### Professional Responsibility

**Section 1. Ethical Standards.** The Board hereby incorporates into these rules by reference the following ethical standards of the professional organization representing each discipline:

(a) The Association for Addiction Professionals (National Association for Alcoholism and Drug Abuse Counselors (NAADAC)) “Code of Ethics”, adopted by the Association for Addiction Professionals and effective on January 1, 2021, found at: [mentalhealth.wyo.gov](http://mentalhealth.wyo.gov)

(b) National Association of Social Workers (NASW) “Code of Ethics”, adopted by the NASW Delegate Assembly and effective August 4, 2017, found at: [mentalhealth.wyo.gov](http://mentalhealth.wyo.gov)

(c) American Association of Marriage and Family Therapy (AAMFT) “Code of Ethics”, adopted by the American Association of Marriage and Family Therapy and effective on January 1, 2015, found at: [mentalhealth.wyo.gov](http://mentalhealth.wyo.gov)

(d) American Counseling Association (ACA) “Code of Ethics”, adopted by the ACA Governing Council and effective on March 26, 2014, found at: [mentalhealth.wyo.gov](http://mentalhealth.wyo.gov)

(e) For these rules incorporated by reference:

(i) The Board has determined that incorporation of the full text in these rules would be cumbersome or inefficient given the length or nature of the rules;

(ii) The incorporation by reference does not include any later amendments or editions of the incorporated matter beyond the applicable date identified in subsection (a), (b), (c), and (d) of this section; and

(iii) The incorporated rules are maintained at the Board’s office and are available for public inspection at the same location.

(f) Where the Codes of Ethics and Professional Standards of the professional organizations conflict with the Act and/or these rules, the Act and rules shall control.

(g) Persons licensed or certified by the Board shall:

(i) Practice in a manner that is in the best interest of the public and does not endanger the public health, safety or welfare.

(ii) Be able to justify all services rendered to clients as necessary for diagnostic or therapeutic purposes.

(iii) Practice only within the competency areas for which they are trained and experienced. The licensee or certificate holder must be able to demonstrate to the Board competency, training, and/or expertise should their ability to practice in a specialty area be called into question.

(iv) Report to the Board known or suspected violations of the laws and regulations governing the practice of licensed or certified professionals.

(v) Treat colleagues with respect and should represent accurately and fairly the qualifications, views and obligations of colleagues.

(vi) Avoid unwarranted criticism of colleagues in communications with clients or with other professionals. Unwarranted negative criticism may include demeaning comments that refer to colleagues' level of competency or to individuals attributes such as race, ethnicity, national origin, color, sex, sexual or gender orientation, age, marital status, political belief, religion, and mental or physical disability.

(vii) Not take advantage of a dispute between a colleague and an employer to obtain a position or otherwise advance their own interest.

(viii) Use only those educational credentials in association with their licensure or certification and practice as a professional that have been earned at an educational institution accredited by one of the regional or national institutional accrediting bodies recognized by the Council for Higher Education Accreditation (CHEA), and that are directly related to their licensed or certified discipline, and that are professional in nature, including, but not limited to M.Ed., M.A., M.S., M.S.S.W., M.S.W., D.S.W., Ph.D., and Ed.D., and shall include the designation of licensure as an LAT, LCSW, LMFT, LPC PPC, PMFT, PCSW, PAT, CSW, CAP, CAPA or CMHW.

(ix) Use only indicators of current discipline-related credentials earned such as Certified Rehabilitation Counselor and Certified Mental Health Counselor or such indicators as awarded by independent credentialing agencies such as the American Association for Marriage and Family Therapy, the National Board for Certified Counselors, Inc., the National Association of Alcohol and Drug Abuse Counselors, and the National Association of Social Workers in association with their licensure or certification and practice.

(x) Ensure that clients are aware of fees and billing arrangements before rendering services. Bartering is not an acceptable fee arrangement.

(xi) Provide clients with accurate and complete information regarding the extent and nature of services available to them.

(xii) Respect the privacy of clients and hold in confidence all information obtained in the course of professional service.

(xiii) Keep confidential their professional relationships with clients.

(xiv) Inform clients fully about the limits of confidentiality in a given situation, the purposes for which information is obtained and how it may be used.

(xv) Obtain proper consent prior to the provision of services.

(xvi) Disclose the information contained in a client's record to the client or designated recipient within no more than thirty (30) days of receipt of an appropriate request for release of such information signed by the client, or an individual who is authorized to consent to treatment for the client. The paper, microfilm or data storage unit upon which the client's information is maintained belongs to the licensee or certificate holder or facility in which he/she practices. Clients do not have a right to possess the means by which the information is stored.

(A) Licensees or certificate holders may provide the client record or any portion in an accurate, detailed, comprehensive summary of the factual information contained in the complete record.

(B) The client record does not include a licensee's or certificate holder's personal office notes or personal communications between referring and consulting treatment providers relating to the client. A licensee or certificate holder may, however, include such notes and communications if appropriate.

(C) A licensee or certificate holder may refuse disclosure of client records in accord with W.S. 33-38-113 or as otherwise provided by law.

(D) If the licensee or certificate holder disclosing the client record believes, in good faith, that releasing any portion of the record would injure the health or well being of the client, a licensee or certificate holder may refuse disclosure of that portion of the record. In such instances, a licensee or certificate holder shall document the factual basis and rationale used in deciding against disclosure. A licensee or certificate holder may also deny access to client records if he/she reasonably concludes that access to the information requested is otherwise prohibited by law.

(E) A licensee or certificate holder may establish reasonable charges for the actual costs incurred in responding to a client's request for copies of any portion of a client's record. Such costs may include the cost of copies, clerical staff time and the licensee's or certificate holder's time in reviewing and summarizing the records and/or diagnostic records, if necessary. The client requesting records is responsible for payment of all such charges, however, a client shall not be denied a summary or a copy of requested client records because of inability to pay.

(F) A licensee or certificate holder may not withhold client records solely because payment has not been received for past services.

(xvii) Maintain accurate documentation of all professional services rendered to a

client in confidential files for each client and ensure that client records are kept in a secure, safe, retrievable and legible condition.

(A) Each client record must be retained for a minimum of seven (7) years from the date of the last session.

(B) Records of treatment provided to minor clients must be retained for a minimum of seven (7) years from the date of the last session, or until the client reaches twenty-five (25) years of age, whichever is longer.

(C) A licensee in private practice shall make necessary arrangements for the maintenance of and access to client records to ensure clients' right to confidentiality in the event of the death or incapacity of the licensee.

(D) The licensee shall name a qualified person who will retain the client records and properly release the client records upon request.

(xviii) Ensure that the welfare of clients is in no way compromised in any experimentation or research involving those clients which would include but not be limited to informed consent of the client.

(xix) Refrain from conflictual dual relationships with clients and their family members that might compromise the client's well-being or impair the licensee's or certificate holder's objectivity and professional judgment including, but not limited to, familial, social, financial, business, or close personal relationships.

(xx) Refrain from conflictual dual relationships in supervision including, but not limited to, employing or supervising your DQCS.

(xxi) Refrain from self-employment when administrative supervision is required.

(xxii) Refrain from engaging in romantic or sexual intimacies with a client or former client. Refrain from engaging in a therapeutic relationship with persons with whom they have had sexual or romantic intimacies.

(xxiii) When advertising their services to the public, ensure that such advertising is neither fraudulent or misleading.

(xxiv) Not practice discrimination on the basis of race, sex, age, religion, nation origin, marital status, sexual or gender orientation, or mental or physical handicap.

(xxv) Clearly state the person's licensure or certification status by the use of a title or initials such as "licensed professional counselor" (LPC) or a statement such as "licensed by the Wyoming Mental Health Professions Licensing Board" in any advertising, public directory or solicitation, including telephone directory listings.

(xxvi) Terminate services when such services are no longer required and no longer serve the client's needs. Services are not withdrawn precipitously except in unusual circumstances and with care to minimize possible adverse effects. This includes providing referral and transfer of services as appropriate.

(xxvii) Avoid using relationships with clients to promote, for personal gain or the profit of an agency, commercial enterprises of any kind.

(xxviii) Seek advice and counsel of colleagues and supervisors when such consultation is in the best interest of the client while taking care to protect the client's confidentiality.

(xxix) Respond to all requests for information and all other correspondence from the Board.

(xxx) Conspicuously display a professional disclosure statement wherever their services are performed and provide a copy of the statement to each client before or during the first session and upon request. The professional disclosure statement shall contain the licensee's or certificate holder's name, title, business address and telephone number; listing of formal professional education with the name of the institution(s) attended and the specific degree(s) received; licensure or certification status; the DQCS's name, phone number and address; statement of confidentiality; a statement that sexual intimacy with a client is never appropriate; a statement that the professional will adhere to the professions' Code of Ethics; and a statement that the disclosure statement is required by the Mental Health Professions Licensing Act. It is recommended that the disclosure statement also contain areas of specialization, state of licensure or certification, license number, and address and phone number of the Mental Health Professions Licensing Board.

(xxxi) Display their license or certification at all times in a conspicuous location readily accessible to all clients at the licensee's or certificate holder's place of business.

(xxxii) Ensure that they do not provide clinical supervision to persons holding a provisional license who have no intention of becoming fully licensed, or aid persons in obtaining a provisional license who have no intention of becoming fully licensed.

(xxxiii) Ensure that they do not provide clinical supervision to persons seeking certification or licensure who have not submitted an application to the Board.

(xxxiv) Ensure that they do not supervise a provisional licensee or a certificate holder without a board approved supervision agreement.

(xxxv) Not permit, condone or facilitate unlicensed practice or any activity which is a violation of the Act or these rules and regulations.

## **Chapter 16**

### **Adverse Action**

**Section 1. Board Authorization.** The Board is authorized to refuse to renew, or may deny, suspend, revoke or otherwise restrict the license or certification of any person violating provisions of the Act pursuant to W.S. 33-38-110.

**Section 2. Grounds.** The Board may take action for unprofessional or unethical conduct.

- (a) Unprofessional conduct shall include, but is not limited to:
  - (i) Willful violation of any provision of these Rules.
  - (ii) Suspension, revocation, denial, or other disciplinary action imposed upon a license or certification held in any jurisdiction. A certified copy of the disciplinary order shall be conclusive evidence.
  - (iii) Representation of oneself as legally authorized to engage in the practice of any profession regulated by the Act without a license or certification issued by this Board.
  - (iv) Conviction of a felony. A certified copy of the conviction shall be conclusive evidence.
  - (v) Conviction of a misdemeanor involving moral turpitude. A certified copy of the conviction shall be conclusive evidence.
  - (vi) Renting or lending the license or certification issued pursuant to this act to any person planning to use that license or certification;
  - (vii) Soliciting clients by any form of false or misleading communication.
  - (viii) Gross incompetence or malpractice.
  - (ix) Mental incompetency.
  - (x) Knowingly submitting false information to the Board.
  - (xi) Addiction or habitual intemperate use of alcohol, drugs and/or a controlled substance.



(xii) Violation and conviction of a charge under W.S. 35-7-1001 et. Seq, the Wyoming Controlled Substance Act.

(xiii) Sexual exploitation of a client, defined as:

(A) Offering professional services for some form of sexual gratification; or

(B) Sexual contact with a client.

(xiv) Willful violation of any provisions of this Act, W.S. 33-38-101, et. seq.

(xv) Violation of a Board Order.

(xvi) Practicing after the expiration of a license or certification.

(xvii) Failing to meet supervisory requirements.

(b) Unethical conduct shall be a violation of any provision of the adopted Professional Standards as set forth in these Rules.

## **Chapter 18**

### **Supervision**

#### **Section 1. The Practice of a Designated Qualified Clinical Supervisor (DQCS).**

The DQCS assumes professional and ethical responsibility and may be sanctioned by the Board for all acts and omissions of the supervisee within the scope of the supervision.

**Section 2. General Requirements for DQCS.** A DQCS shall meet the following requirements:

(a) The DQCS shall have been licensed for independent practice for a minimum of two (2) years prior to becoming a supervisor.

(b) The DQCS shall have had four (4) years of post-graduate professional experience in their discipline prior to providing supervision.

(c) The DQCS must be free from any disciplinary action brought against them by any jurisdiction, although exceptions to this requirement may be granted by the Board if consistent with the public interest.

(d) The DQCS shall have taken a graduate level course in clinical supervision or have at least 3 contact hours of CE in clinical supervision. If already approved as a supervisor by the Board, this educational requirement shall be fulfilled no later than during the current renewal period.

#### **Section 3. Role of a DQCS for all supervisee license types**

(a) The DQCS shall allow the supervisee to perform independently only those functions for which the supervisee has training and experience.

(b) The DQCS shall keep records verifying supervision, including the types of supervision provided and number of hours.

(c) The DQCS shall be identified on all reports and correspondence of a professional nature, excluding disciplinary correspondence with the Board.

(d) The DQCS shall avoid conflictual dual relationships in supervision.

(e) The DQCS is readily available to give aid, direction, and instruction to any supervisee rendering clinical services pursuant to the Act.

**Section 4. Elements of Supervision.** The DQCS monitors the quality of services being offered to clients, facilitates the supervisee's learning and skill development, and endeavors to enhance the professional growth of the supervisee within the discipline. In order to meet these

objectives the content of supervision shall include:

- (a) A review of the supervisee's permissible scope of practice, as defined by the Act.
- (b) Discussion of case notes, charts, records and services provided. The review and discussion should evaluate the appropriateness of the services to clients and the supervisee's therapeutic skill.
- (c) Review and skill development of appropriate therapeutic interventions, treatment approaches, treatment planning and evidence based practices, within the supervisee's scope of practice.
- (d) Discussion on the standards of practice and ethical conduct, with particular emphasis given to the supervisee's role and appropriate responsibilities, professional boundaries, power dynamics; and termination of clinical relationships.

**Section 5. Requirement for Supervision.** Clinical practice shall not be permitted, until documentation of a DQCS has been provided to, and approved by, the Board and only under the clinical supervision of an approved DQCS.

(a) Certified Addictions Practitioners, Certified Addictions Practitioner Assistants, Certified Mental Health Workers, Certified Social Workers and all provisionally licensed professionals may only provide services under the clinical supervision of a DQCS and under the administrative supervision of their employer.

(b) Individual, triadic face-to-face clinical supervision or individual distance clinical supervision by a DQCS shall be provided monthly at a ratio of at least one (1) hour for every twenty (20) hours of direct clinical provision of services defined in this act.

(c) In the event of a change of the DQCS, the certificate holder shall notify the Board within ten (10) days in writing. The certificate holder shall not provide services until documentation of a DQCS has been provided to, and approved by, the Board. A change in supervision requires a revised disclosure statement. The DQCS shall submit the Verification and Evaluation of Supervised Experience (VESE) form directly to the Board within thirty (30) days of the termination of supervision.

## **Section 6. Types of Supervision**

- (a) Individual Face-to-Face Clinical Supervision.
- (b) Triadic Face-to-Face Clinical Supervision.
- (c) Individual Distance Clinical Supervision.
- (i) Supervision must be adequate to ensure the quality and competence of the activities supervised and must comply with all other supervision requirements.

- (d) Type of supervision must be documented in the supervisor verification process.
- (e) Supervision of more than 2 supervisees simultaneously is not permitted to count towards the face-to-face supervision requirement.

**Section 7. Limits of Supervision.** DQCS must:

- (a) Not provide clinical supervision to persons seeking certification or licensure who have not submitted an application to the Board;
- (b) Not supervise a provisional licensee or a certificate holder without a board approved supervision agreement;
- (c) Not provide supervision to more than (5) supervisees at one time, unless granted an exception in writing from the Board;
- (d) Understand the Board may require an evaluation of the qualifications and roles of any designated qualified clinical supervisor and may approve or disapprove supervision at its discretion; and
- (e) Understand that if they act as a DQCS without meeting the requirements of this chapter they are subject to discipline for unprofessional conduct.

## Chapter 1

### General Provisions

**Section 1. Authority.** The Mental Health Professions Licensing Board is created by Wyoming Statutes 33-38-101 through -113, hereinafter referred to as the Act. The Board is authorized under the Act, specifically W.S. 33-38-105(a), the Wyoming Administrative Procedure Act (W.S. 16-3-101 through -115), specifically W.S. 16-3-104(j), and W.S. 33-1-302(a) to promulgate rules.

**Section 2. Terms Defined by Statute.** Terms defined in W.S. 33-38-101 through -113 shall have the same meanings when used in these rules unless the context or subject matter clearly requires a different interpretation.

**Section 3. Terms Defined Herein.** As used in these rules, the following terms shall have the following meanings unless the context or subject matter clearly requires a different interpretation.

(a) **Administrative Supervision-** Employment by a business, agency, organization, firm, etc. to work for wages or salary. The employer must have the authority to hire, discipline and dismiss the provisional licensee and certificate holder. The supervisee shall not have a financial interest in ownership of the business, agency, organization, or firm while working under administrative supervision. An independent contract for services does not meet the criteria of administrative supervision. Faculty supervision of a candidate in a doctoral program does meet this requirement.

(b) **Addiction-** The meaning of addiction includes “substance use disorders” as that term is used in the Diagnostic and Statistical Manual of Mental Health Disorders (DSM-5), published in 2013 by the American Psychiatric Association.

(c) **Case Management-** Non-clinical services that are provided to; assist the client in gaining access to needed medical, social, educational and other services; assist the client in making arrangements necessary to move from a residential, hospital, or institutional placement to the family or surrogate family home in the community; and foster a client’s rehabilitation from a diagnosed mental disorder by organizing needed services and supports into an integrated system of care until the client is able to assume this responsibility. Provision of these services is not restricted to persons who are licensed or certified under the Act. Case management services include linkage, monitoring/follow-up, referral, advocacy, and crisis intervention.

(i) **Linkage-** Working with clients ~~and/or~~ or service providers to secure access to services. Activities include making telephone calls to agencies to arrange for appointments or services following the initial referral process, and preparing clients for these appointments.

(ii) **Monitoring/follow-up-** Contacting the client or others to ensure that a client is following a prescribed service plan and monitoring the progress and impact of that plan.

(iii) Referral- Arranging initial appointments with service providers or informing clients of services available, addresses and telephone numbers of agencies providing services.

(iv) Advocacy- Advocacy on behalf of a specific client for the purpose of accessing needed services.

(v) Crisis Intervention- Intervention and stabilization provided in situations requiring immediate attention/resolution for a specific client. The case manager may provide the initial intervention in a crisis situation and would assist the client in gaining access to other needed clinical crisis intervention.

(d) Certified Addictions Practitioner (CAP)- A person certified under the Act to practice addictions therapy for which they are qualified by virtue of training and experience, under administrative supervision and under the supervision of a designated qualified clinical supervisor licensed in the state of Wyoming.

(e) Certified Addictions Practitioner Assistant (CAPA)- A person certified under the Act to assist a licensed mental health professional in those methods and techniques of addictions assessment and treatment for which they are qualified by virtue of training and experience under administrative supervision and under the supervision of a designated qualified clinical supervisor licensed in the state of Wyoming.

(i) Therapeutic interventions are limited to education and skill development activities.

(ii) The practice of a CAPA does not include assigning diagnosis, making treatment recommendation, or acting as a primary treatment provider,

(f) Certified Mental Health Worker (CMHW)- A person certified under the Act to perform mental health procedures for which they are qualified by virtue of training and experience and that are consistent with their level of competence and expertise, under administrative supervision and under the supervision of a designated qualified clinical supervisor licensed in the state of Wyoming.

(g) Certified Social Worker (CSW)- A person certified under the Act to engage in generalist social work for which they are qualified by virtue of training and experience, under administrative supervision and under the supervision of a designated qualified clinical supervisor licensed in the state of Wyoming.

(h) Client- An individual or entity for which a professional service is provided by a licensee or certificate holder who is acting in his/her professional capacity and who is performing any professional service governed by the Act or these Rules and Regulations.

(i) Clinical Crisis Intervention- A specific clinical service designed to assess a

person's mental status, suicide/homicide potential, diagnosis ~~and/or~~ or need for therapeutic services.

(j) "Contact hour" means the actual number of hours during which instruction was received. A contact hour shall consist of not less than fifty (50) minutes of actual instruction or presentation. For academic courses, one (1) semester credit equals fifteen (15) contact hours. One (1) quarter credit equals ten (10) contact hours.

(k) Designated Qualified Clinical Supervisor (DQCS)- A designated qualified clinical supervisor shall be licensed in Wyoming as a licensed professional counselor, licensed clinical social worker, licensed marriage and family therapist, licensed addictions therapist, licensed psychologist, licensed psychiatrist, or licensed advanced practitioner of nursing with psychiatric specialty. In addition, a licensed physician with specialty in addictionology shall qualify as a designated qualified clinical supervisor for a candidate seeking licensure as an Addictions Therapist. Precautions should be taken to avoid conflictual dual relationships in supervision.

(l) Conflictual Dual Relationship- An association which may potentially lead to conflict with the therapeutic alliance.

(i) Conflictual dual relationship includes but is not limited to:

(A) Blood ~~and/or~~ or other legal relatives;

(B) Spousal relationships or significant others, either current or former;

(C) Current or former therapists or clients; and

(D) Any other relationship which might compromise therapist/client, supervisor and supervisee relationship, whether or not there was remuneration for services.

(ii) Designated qualified clinical supervisors clearly define and maintain ethical, professional, personal and social relationships with their supervisees. If supervisors must assume other professional roles (e.g., clinical and administrative supervisor, instructor) with supervisees, they work to minimize potential conflicts and explain to supervisees the expectations and responsibilities associated with each role.

(iii) Any supervisor or supervisee claiming an exception to this section due to practice in a rural location, or accredited training institution of formal learning, or special needs of the clinical population being served shall show by preponderance of the evidence that:

(A) The client was fully informed of the dual relationship and the possibility for conflicts of interest;

(B) The client's access to quality care has not been compromised;

(C) The supervisor and supervisee have not benefited from the relationship over and above a reasonable fee for service (i.e., that the power in the therapeutic relationship has not been used to influence the therapeutic relationship for personal gain);

(D) The therapeutic and supervisory relationship has not been compromised and the best interests of the client are served by the relationship.

~~(I) Degree in a Human Resource Discipline- A degree in addictionology, chemical dependency, substance abuse, substance use disorder, psychology, sociology, or a related field.~~

(m) Individual Distance Clinical Supervision- A direct tutorial relationship between a designated qualified clinical supervisor and a supervisee over the phone or by audiovisual electronic devices.

(n) Individual Face-to-face Clinical Supervision- A direct tutorial relationship between a designated qualified clinical supervisor and a supervisee. The designated qualified clinical supervisor monitors the quality of services being offered to clients, facilitates the supervisee's learning and skill development, and endeavors to enhance the professional growth of the supervisee within the discipline.

(o) Licensed Addictions Therapist (LAT)- A person licensed under the Act to practice addictions therapy independent of administrative or clinical supervision.

(p) Licensed Clinical Social Worker (LCSW)- A person licensed under the Act to practice clinical social work independent of administrative or clinical supervision.

(q) Licensed Marriage and Family Therapist (LMFT)- A person licensed under the Act to practice couples, marriage and family therapy independent of administrative or clinical supervision.

(r) Licensed Professional Counselor (LPC)- A person licensed under the Act to practice professional counseling independent of administrative or clinical supervision.

(s) Licensure Standards Sub-Committee- The Sub-Committee appointed or elected by the professional organization in Wyoming representing each discipline, which serves as monitor for licensure and certification standards for that discipline and as liaison between the Board and the professional organization.

(t) Provisional Addictions Therapist (PAT)- A person provisionally licensed under the Act to practice addictions therapy for which they are qualified by virtue of training and experience, under the supervision of a designated qualified clinical supervisor licensed in the state of Wyoming.

(u) Provisional Clinical Social Worker (PCSW)- A person provisionally licensed under the Act to practice clinical social work for which they are qualified by virtue of training and experience, under the supervision of a designated qualified clinical supervisor licensed in the



state of Wyoming.

(v) **Provisional Marriage and Family Therapist (PMFT)-** A person provisionally licensed under the Act to practice couples, marriage and family therapy for which they are qualified by virtue of training and experience, under the supervision of a designated qualified clinical supervisor licensed in the state of Wyoming.

(w) **Provisional Professional Counselor (PPC)-** A person provisionally licensed under the Act to practice professional counseling for which they are qualified by virtue of training and experience, under the supervision of a designated qualified clinical supervisor licensed in the state of Wyoming.

(x) **Supervisee-** A provisional licensee or certificate holder receiving clinical supervision.

(y) **Triadic Face-to-Face Clinical Supervision-** A direct tutorial relationship wherein a designated qualified clinical supervisor conducts clinical supervision with two (2) supervisees simultaneously. The supervision is provided in the same manner, content and quality as during Individual Face-to-Face Clinical Supervision.

**Section 4. Board Office.** The Board Office is located at 2001 Capitol Ave., Room 127, Cheyenne, Wyoming, 82002.

**Section 5. Annual Regular Board Meeting.** The Board shall set an annual regular meeting by resolution.

**Section 6. Officers.** Officers of the Board shall be elected annually, by a majority vote of the Board, and shall be comprised of a chairperson, a vice-chairperson, and a secretary-treasurer.

## Chapter 3

### Certified Addictions Practitioner

**Section 1. The Practice of a Certified Addictions Practitioner.** The practice of a Certified Addictions Practitioner (CAP) consists of addictions treatment, prevention, intervention, diagnosis, referral, and follow-up within the range of the professional's preparation under the supervision of a ~~designated-qualified clinical supervisor~~ DQCS licensed in the state of Wyoming as well as the administrative supervision of an employer.

(a) The practice of a CAP may be either face-to-face that involves the synchronous interaction between an individual or groups of individuals using what is seen and heard in person to communicate, or

(b) Via methods of electronic delivery that involves the use of electronic or other means (e.g. telephone, computers, etc.) to provide the service.

(i) When using electronic delivery means, all use must be in compliance with all professional ethical standards and all other requirements in these rules;

(ii) Special care should be taken to ensure the confidentiality and security of the provision of services; and

(iii) The CAP shall provide only those services that are legal within the state that the recipient of services lives.

**Section 2. General Requirements for Certification.** Applicants shall have six (6) months from the date of employment to complete all of the requirements for certification. If the applicant fails to complete the requirements in that six (6) month time frame, the applicant shall immediately stop working as a CAP. Providing the services regulated by this Act prior to submitting an application to the Board may result in the denial of the application. The Board may, for good cause shown, grant an extension of this grace period. It is the sole responsibility of the applicant to ensure that the Board receives all documentation necessary to prove to the Board's satisfaction that the applicant meets all the requirements for certification herein. The applicant shall provide satisfactory evidence to the Board that they:

(a) are of majority age;

(b) have no felony convictions, and no misdemeanor convictions that relate adversely to the practice of addictions therapy or to the ability to practice addictions therapy, although exceptions to this requirement may be granted by the Board if consistent with the public interest;

(c) are legal inhabitants of the United States; and

(d) satisfy the requirements established in these rules.

**Section 3. Education Requirement for Certification.** The educational requirement for certification as an addictions practitioner may be met:

(a) By holding a current National Certified Addictions Counselor Level II (NCAC II) certification in good standing; or

(b) By receiving a baccalaureate degree in addiction therapy from an educational institution accredited by one of the regional or national institutional accrediting bodies recognized by the Council for Higher Education Accreditation (CHEA); or

(c) By receiving a baccalaureate degree in a human ~~resource~~ behavioral discipline from an educational institution accredited by one of the regional or national institutional accrediting bodies recognized by the Council for Higher Education Accreditation (CHEA) and by completing an addictions specific associates degree or higher from an educational institution accredited by the National Addictions Studies Accreditation Commission (NASAC); or

(d) By receiving a baccalaureate degree in a human ~~resource~~ behavioral discipline from an educational institution accredited by one of the regional or national institutional accrediting bodies recognized by the Council for Higher Education Accreditation (CHEA) and by completing course work (either graduate or undergraduate) in each of the core areas defined herein:

(i) Each of the following four (4) courses shall be completed:

(A) Counseling Theories- Three (3) Semester Credits. Theories and principles of counseling and psychotherapy.

(B) Counseling Skills- Three (3) Semester Credits. Methods and techniques of individual and group counseling.

(C) Practicum in Addictions/Chemical Dependency Counseling- Three (3) Semester Credits.

(D) Counseling Ethics- Two (2) Semester Credits.

(ii) Course work shall be completed in each of the following five (5) subject areas for a minimum of ten (10) semester hours:

(A) Alcoholism: To include biochemical, socio-cultural, and psychological factors.

(B) Drugs and Behavior: A survey of drugs with abuse potential in addition to alcohol that affect behavior including psychopharmacological information.

(C) Addictions and Special Populations: (i.e., adolescents, women,

ethnic groups, elderly, adult children of alcoholics, the impaired family, impaired professional, athletes, criminals, etc.).

(D) Addictive Behaviors: Gambling, eating disorders, sexual addictions, cults, compulsive behaviors of non-ingestive nature, etc.

(E) Addictions Assessment: Appraisal, assessment, testing, diagnosis/dual diagnosis. This category may also be satisfied by completing specialty training.

(iii) Six (6) contact hours of specialty training shall be completed in communicable diseases. This category may be satisfied by completing college course work or workshops.

(e) If an applicant chooses to meet the educational criteria outlined in Section 3(d), the following shall apply:

(i) The official transcripts, course prefixes, and course descriptions shall clearly identify the course work as preparing persons to be practitioners.

(ii) Course work shall be completed in an associates program, baccalaureate program or subsequent college level course work.

#### **Section 4. Examination Requirement for Certification.**

(a) The Board shall accept a passing score as established by the examination provider on one of the following examinations:

(i) The Association for Addictions Professionals (NAADAC), NCAC Level II exam;

(ii) International Certification and Reciprocity Consortium (IC&RC) Alcohol and Other Drug Abuse Counselor (AODA) exam; or

(iii) Other examination as may be approved by the Board.

(b) Applicants are allowed only three (3) attempts to pass the exam requirement. The Board may allow an applicant to make one (1) more attempt to pass the requirement upon approval of a remediation plan submitted by the applicant.

(c) The examination shall have been passed within the immediate five (5) years prior to submission of the application or after receiving board approval to sit for the examination. This requirement does not apply to those applying under Section 6 of this chapter.

**Section 5. Certification by Education and Experience.** An individual who has received a baccalaureate degree in a human behavioral discipline, other than a degree in addiction therapy, may be granted certification under this section after providing to the board

satisfactory proof of completion of two thousand (2,000) hours of supervised work experience as a certified addictions practitioner assistant or equivalent in the field of addiction therapy.

(a) The two thousand (2,000) hours of supervised work experience shall be completed as direct client contact hours.

(b) The hours shall be completed in no less than twenty-four (24) months and no more than sixty (60) months prior to application.

**Section 65. Certification by Reciprocity.** An individual who holds a baccalaureate degree in a human ~~resource~~ behavioral discipline, has passed the examination as required in Section 4 of this Chapter and holds a certification that is free from discipline and in good standing to engage in the practice of addictions therapy under the laws of another state may, upon approval of the Board, be issued a certification as a CAP in this state. If the individual has held a certification to practice addictions therapy in more than one state, the individual shall be required to provide verification that all certifications held within the last five (5) years have not had any discipline against the certification

**Section 76. Standards of Conduct.**

(a) The term “Certified Addictions Practitioner” shall be used only after the applicant is granted certification by the Board, and only in conjunction with activities and services that are part of the supervised employment.

(b) In the required professional disclosure statement, the CAP shall also provide full disclosure to every client of the supervised nature of their work, which shall include the name, address and telephone number of their ~~designated-qualified-clinical-supervisor~~ DQCS.

(c) The supervisory relationship shall be indicated, and the ~~designated-qualified-clinical-supervisor’s~~ DQCS’s name, address and telephone number shall appear on all documents relating to advertisement by the CAP.

(d) The CAP shall comply with the Association for Addictions Professionals (NAADAC) “Code of Ethics” incorporated into these rules in Chapter 15.

## Chapter 4

### Certified Addictions Practitioner Assistant

**Section 1. The Practice of a Certified Addictions Practitioner Assistant.** The practice of a Certified Addictions Practitioner Assistant (CAPA) consists of assisting in the practice of addictions treatment, prevention, intervention, referral and follow-up within the range of the professional's preparation under the supervision of a ~~designated-qualified-clinical supervisor~~ DQCS licensed in the state of Wyoming as well as the administrative supervision of an employer. The practice of a CAPA does not include assigning diagnosis, making treatment recommendations, or acting as a primary treatment provider. Therapeutic interventions are limited to education and skill development activities.

(a) The practice of a CAPA may be either face-to-face that involves the synchronous interaction between an individual or groups of individuals using what is seen and heard in person to communicate, or

(b) Via methods of electronic delivery that involves the use of electronic or other means (e.g. telephone, computers, etc.) to provide the service.

(i) When using electronic delivery means, all use must be in compliance with all professional ethical standards and all other requirements in these rules;

(ii) Special care should be taken to ensure the confidentiality and security of the provision of services; and

(iii) The CAPA shall provide only those services that are legal within the state that the recipient of services lives.

**Section 2. General Requirements for Certification.** Applicants shall have six (6) months from the date of employment to complete all of the requirements for certification. If the applicant fails to complete the requirements in that six (6) month time frame, the applicant shall immediately stop working as a CAPA. Providing the services regulated by this Act prior to submitting an application to the Board may result in the denial of the application. The Board may, for good cause shown, grant an extension of this grace period. It is the sole responsibility of the applicant to ensure that the Board receives all documentation necessary to prove to the Board's satisfaction that the applicant meets all the requirements for certification herein. The applicant shall provide satisfactory evidence to the Board that they:

(a) are of majority age;

(b) have no felony convictions, and no misdemeanor convictions that relate adversely to the practice of addictions therapy or to the ability to practice addictions therapy, although exceptions to this requirement may be granted by the Board if consistent with the public interest;

- (c) are legal inhabitants of the United States; and
- (d) satisfy the requirements established in these rules.

**Section 3. Education Requirement for Certification.** The educational requirement for certification as an addictions practitioner assistant may be met by:

- (a) Holding a current National Certified Addictions Counselor Level I (NCAC I) certification in good standing from the Association for Addictions Professionals (NAADAC), or a current Alcohol and Other Drug Abuse Counselor (AODA) from the International Certification and Reciprocity Consortium (IC&RC), or
- (b) Completion of an associate's degree program in addictionology, chemical dependency, substance use disorder counseling, or an equivalently termed degree program, from an educational institution accredited by the National Addictions Studies Accreditation Commission (NASAC) or accredited by one of the regional or national institutional accrediting bodies recognized by the Council for Higher Education Accreditation (CHEA), or
- (c) Completion of two hundred seventy (270) hours of addictions specific course work and/or training as follows:
  - (i) A maximum of seventy (70) contact hours may be completed in general mental health discipline subjects which must include thirty (30) contact hours in counseling ethics.
  - (ii) A minimum of two hundred (200) contact hours shall be related specifically to addictions therapy. This shall include training/education in Addictions Assessment and six (6) contact hours of specialty training in communicable diseases. These categories may be satisfied by completing college course work or workshops.

**Section 4. Examination Requirement for Certification.**

- (a) The Board shall accept a passing score as established by the examination provider on one of the following examinations:
  - (i) The Association for Addictions Professionals (NAADAC), NCAC Level I exam; or
  - (ii) Other examination as may be approved by the Board.
- (b) Applicants are allowed only three (3) attempts to pass the exam requirement. The Board may allow an applicant to make one (1) more attempt to pass the requirement upon approval of a remediation plan submitted by the applicant.
- (c) The examination shall have been passed within the immediate five (5) years prior to submission of the application or after receiving board approval to sit for the examination.

This requirement does not apply to those applying under Section 5 of this chapter.

**Section 5. Certification by Reciprocity.** An individual who holds an associate's degree in a human ~~resource~~ behavioral discipline, has passed the examination as required in Section 4 of this Chapter and holds a certification that is free from discipline and in good standing to engage in the practice of addictions therapy under the laws of another state may, upon approval of the Board, be issued a certification as a CAPA in this state. If the individual has held a certification to practice addictions therapy in more than one state, the individual shall be required to provide verification that all certifications held within the last five (5) years have not had any discipline against the certification

**Section 6. Standards of Conduct.**

(a) The term "Certified Addictions Practitioner Assistant" shall be used only after the applicant is granted certification by the Board, and only in conjunction with activities and services that are part of the supervised employment.

(b) In the required professional disclosure statement, the CAPA shall also provide full disclosure to every client of the supervised nature of their work, which shall include the name, address and telephone number of their ~~designated-qualified-clinical-supervisor~~ DQCS.

(c) The supervisory relationship shall be indicated, and the ~~designated-qualified clinical-supervisor's~~ DQCS's name, address and telephone number shall appear on all documents relating to advertisement by the CAPA.

(d) The CAPA shall comply with the Association for Addictions Professionals (NAADAC) "Code of Ethics" incorporated into these rules in Chapter 15.



## Chapter 5

### Certified Mental Health Worker

**Section 1. The Practice of a Certified Mental Health Worker.** ~~The practice of a Certified Mental Health Worker consists of performing mental health procedures (not including diagnosis)~~ is the application of human services or psychological theory and methods to the assessment, treatment or prevention of psychosocial dysfunction, disability, or impairment, including emotional or mental disorders, under administrative supervision and the supervision of a designated qualified clinical supervisor DQCS licensed in the state of Wyoming. The practice of a CMHW does not include assigning a diagnosis or acting as a primary treatment provider.

**Section 2. General Requirements for Certification.** ~~Certification as a Mental Health Worker shall not be issued by the Board after July 1, 1998. A Certified Mental Health Worker shall not be granted re-certification if the certification is allowed to lapse. Applicants shall have six (6) months from the date of employment to complete all of the requirements for certification. If the applicant fails to complete the requirements in that six (6) month time frame, the applicant shall immediately stop working as a Certified Mental Health Worker. Providing the services regulated by this Act prior to submitting an application to the Board may result in the denial of the application. The Board may, for good cause shown, grant an extension of this grace period. It is the sole responsibility of the applicant to ensure that the Board receives all documentation necessary to prove to the Board's satisfaction that the applicant meets all the requirements for certification herein. The applicant shall provide satisfactory evidence to the Board that they:~~

- \_\_\_\_\_ (a) are of majority age;
- \_\_\_\_\_ (b) have no felony convictions, and no misdemeanor convictions that relate adversely to the practice as a mental health worker or to the ability to practice as a mental health worker, although exceptions to this requirement may be granted by the Board if consistent with the public interest;
- \_\_\_\_\_ (c) are legal inhabitants of the United States; and
- \_\_\_\_\_ (d) satisfy the requirements established in these rules.

**Section 3. Education Requirement for Certification.** Applicants may meet the educational criteria by the completion of a baccalaureate degree program in a human behavioral discipline from an educational institution accredited by one of the regional or national institutional accrediting bodies recognized by the Council for Higher Education Accreditation (CHEA), with:

- \_\_\_\_\_ (a) Course work completed in each of the following five (5) content areas:

(i) Human Services/Psychological Theories - Three (3) Semester Credits. A theoretical foundation in psychology, health, or human services, with a focus on mental health;

(ii) Communication Skills - Three (3) Semester Credits. Methods and techniques of individual and/or group communication in a mental health, addictions, or counseling related field;

(iii) Human Development - Three (3) Semester Credits. Development of humans, to include social, cognitive, and/or developmental issues; may also include an in-depth focus on one or more developmental areas or populations;

(iv) Cognitive Psychology - Three (3) Semester Credits. A focus on the development of cognition and resulting behavior; and

(v) Abnormal Psychology – Three (3) Semester Credits. A focus on the major types of abnormal behavior, including anxiety, affective, schizophrenic, brain, substance and the disorders of childhood origin

(b) Additional course work must be completed in each of the following five (5) subject areas for a minimum of twenty-four (24) combined semester hours:

(i) Human Services/Psychological Theory or Practice: A theoretical foundation or practical implications/experience in psychology, health, or human services, with a focus on mental health, as well as social situations;

(ii) Drugs and Behavior: To include biochemical, socio-cultural, and psychological factors of alcohol/drug/behavior addiction; psychopharmacological information;

(iii) Special Populations or Subjects: A focus on adolescents, women, elderly, addiction, family or marriage, impaired professionals, athletes, criminals, abnormal populations, developmentally disabled, gambling, eating disorders, diverse populations, program development, etc.;

(iv) Research & Statistics/Assessment: Research methods and statistical analysis, appraisal, and/or testing to include training in provision of assessment instruments; or

(v) Ethical & Professional Issues: The study of applied professional ethics, due process, dual relationships, client advocacy, value clarification and professional standards in the profession.

(c) Six (6) additional contact hours of specialty training shall be completed in communicable diseases that must include content on HIV/AIDS. This category may be satisfied by completing college course work or workshops that may include online options.

**Section 4. Experience Requirement for Certification.** One hundred (100) hours of direct contact with identified clients under the direct supervision of a DQCS and four hundred

(400) of indirect experience in a psychological/human services environment must be satisfied prior to certification. This category must be satisfied through paid work experience after completion of the baccalaureate degree.

#### **Section 5. Examination Requirement for Certification.**

(a) The Board shall accept the passing score as established by the examination provider approved by the Board.

(b) The Board shall accept a passing score on the following examinations:

(i) The Human Services-Board Certified Practitioner Examination (HS-BCPE)

(ii) Other examinations as may be approved by the Board.

(c) Applicants are allowed three (3) attempts to pass the exam. The Board may allow an applicant to make one (1) more attempt to pass the examination upon approval of a remediation plan submitted by the applicant.

(d) The examination shall have been passed within the immediate five (5) years prior to submission of the application or after receiving board approval to sit for the examination. This requirement does not apply to those applying under Section 6 of this chapter.

**Section 6. Certification by Reciprocity.** An individual who holds a baccalaureate degree in a human behavioral discipline, has passed the examination as required in Section 4 of this Chapter and holds a certification that is free from discipline and in good standing to engage in the practice as a mental health worker under the laws of another state may, upon approval of the Board, be issued a certification as a CMHW in this state. If the individual has held a certification to practice addictions therapy in more than one state, the individual shall be required to provide verification that all certifications held within the last five (5) years have not had any discipline against the certification.

#### **Section 3-7. Standards of Conduct.**

(a) The terms “Certified Mental Health Worker” shall be used only after the applicant is granted certification by the Board, and only in conjunction with activities and services that are part of the supervised employment.

(b) In the required professional disclosure statement, the Certified Mental Health Worker shall also provide full disclosure to every client of the supervised nature of their work, which shall include the name, address and telephone number of their DQCS.

(c) The supervisory relationship shall be indicated, and the DQCS’s name, address and telephone number shall appear on all documents relating to advertisement by the Certified Mental Health Worker.

(d) The Certified Mental Health Worker shall comply with the American Counseling Association "Code of Ethics" incorporated into these rules in Chapter 15.

## Chapter 6

### Certified Social Worker

#### Section 1. The Practice of a Certified Social Worker.

(a) A Certified Social Worker may perform the duties listed in Wyoming Statute § 33-38-102(a)(xi) under the clinical supervision of a ~~designated-qualified-clinical-supervisor~~ DQCS licensed in the state of Wyoming and the administrative supervision of a supervisor.

(b) As used in Wyoming Statute § 33-38-102(a)(xi), “social work treatment” means the application of social work theory, knowledge, methods, ethics, and the professional use of self to restore or enhance social, psychosocial, or biopsychosocial functioning of individuals, couples, families, groups, organizations, and communities, but does not include psychotherapy or diagnosis.

(c) Certified social workers may not serve as ~~designated-qualified-clinical-supervisor~~ DQCS.

(d) The practice of a certified social worker may be either:

(i) face-to-face, involving the synchronous interaction between an individual or groups of individuals using what is seen and heard in person to communicate, or

(ii) via methods of electronic delivery that involves the use of electronic or other means (e.g. telephone, computers, etc.) to provide the service.

(A) When delivering services electronically, the certified social worker must comply with all professional ethical standards and all other requirements in these rules;

(B) The certified social worker must take special care to ensure the confidentiality and security of the provision of services; and

(C) The certified social worker shall provide only those services that are legal within the state in which the person receiving the services lives.

**Section 2. General Requirements for Certification.** Applicants shall have six (6) months from the date of employment to complete all of the requirements for certification. If the applicant fails to complete the requirements in that six (6) month time frame, the applicant shall immediately stop working as a Certified Social Worker. Providing the services regulated by this Act prior to submitting an application to the Board may result in the denial of the application. The Board may, for good cause shown, grant an extension of this grace period. It is the sole responsibility of the applicant to ensure that the Board receives all documentation necessary to prove to the Board’s satisfaction that the applicant meets all the requirements for certification herein. The applicant shall provide satisfactory evidence to the Board that they:

- (a) are of majority age;
- (b) have no felony convictions, and no misdemeanor convictions that relate adversely to the practice of social work or to the ability to practice clinical social work, although exceptions to this requirement may be granted by the Board if consistent with the public interest;
- (c) are legal inhabitants of the United States; and
- (d) satisfy the requirements established in these rules.

**Section 3. Education Requirement for Certification.** All educational requirements for certification shall be met through the completion of a Council on Social Work Education accredited baccalaureate degree program in social work.

**Section 4. Examination Requirement for Certification.**

(a) The Board shall accept a passing score as established by the examination provider on one of the following examinations:

(i) The Association of Social Work Boards (ASWB) examination at the Bachelor's Level; or

(ii) Other examination as may be approved by the Board.

(b) Applicants are allowed only three (3) attempts to pass the exam requirement. The Board may allow an applicant to make one (1) more attempt to pass the exam requirement upon approval of a remediation plan submitted by the applicant.

(c) The examination shall have been passed within the immediate five (5) years prior to submission of the application or after receiving board approval to sit for the examination. This requirement does not apply to those applying under Section 5 of this chapter.

**Section 5. Certification by Reciprocity.**

(a) An individual who holds a baccalaureate degree in social work, has passed the examination as required in Section 4 of this Chapter and holds a certification that is free from discipline and in good standing to engage in the practice of social work under the laws of another state may, upon approval of the Board, be issued a certification as a Social Worker in this state. If the individual has held a certification to practice social work in more than one state, the individual shall be required to provide verification that all certifications held within the last five (5) years have not had any discipline against the certification.

(b) Certification by reciprocity does not permit a certified social worker to practice without both clinical supervision of a DQCS and administrative supervision.

## **Section 6. Standards of Conduct.**

(a) The terms “Certified Social Worker” or “Social Worker” shall be used only after the applicant is granted certification by the Board, and only in conjunction with activities and services that are part of the supervised employment.

(b) In the required professional disclosure statement, the Certified Social Worker shall also provide full disclosure to every client of the supervised nature of their work, which shall include the name, address and telephone number of their ~~designated qualified clinical supervisor~~ DQCS.

(c) The supervisory relationship shall be indicated, and the ~~designated qualified clinical supervisor’s~~ DQCS’s name, address and telephone number shall appear on all documents relating to advertisement by the Certified Social Worker.

(d) The Certified Social Worker shall comply with the National Association of Social Workers “Code of Ethics” incorporated into these rules in Chapter 15.

## Chapter 7

### Provisional License

**Section 1. General Requirements.** Provisional licensure is a means by which an individual may continue progress, under the supervision of a ~~designated qualified clinical supervisor~~ DQCS and under the administrative supervision of an employer, towards satisfactory completion of the education, experience and examination requirements established in these rules. A provisional license shall not be issued until the applicant has provided satisfactory evidence to the Board that they:

- (a) are of majority age;
- (b) have no felony convictions, and no misdemeanor convictions that relate adversely to the practice of counseling, marriage and family therapy, clinical social work or addictions therapy or to the ability to practice counseling, marriage and family therapy, clinical social work or addictions therapy, although exceptions to this requirement may be granted by the Board if consistent with the public interest;
- (c) are legal inhabitants of the United States;
- (d) satisfy the educational requirements for the requested discipline established in these rules;
  - (i) Applicants who do not satisfy the educational requirements may be granted a provisional license provided they are deficient no more than six (6) semester hours and have met the requirement for course work in professional orientation or ethics, and practicum and internship.
- (e) have someone prepared to act as their ~~designated qualified clinical supervisor~~ DQCS. Applicants must submit and receive approval of a supervision agreement prior to the issuance of their license. Applications that do not include a supervision agreement shall be reviewed by the application review committee and the applicant shall be notified of the recommendation of the application review committee pending the receipt and approval of the supervision agreement.
- (f) An applicant shall not be issued more than two provisional licenses in any individual discipline.

### Section 2. Standards of Conduct.

(a) The terms “Provisional Professional Counselor,” “Provisional Clinical Social Worker,” “Provisional Marriage and Family Therapist” or “Provisional Addictions Therapist” shall be used only after the applicant is granted a provisional license by the Board, and only in conjunction with activities and services that are part of the supervised clinical experience.



(b) In the required professional disclosure statement, the provisional licensee shall also provide to every client full disclosure of the supervised nature of their work, which shall include the name, address and telephone number of their ~~designated-qualified clinical supervisor~~ DQCS.

(c) The supervisory relationship shall be indicated, and ~~designated-qualified clinical supervisor's~~ DQCS's name, address and telephone number shall appear on all documents relating to advertisement by the provisional licensee.

(d) The provisional licensee shall comply with the applicable code of ethics and standards of practice for their discipline as incorporated into these rules in Chapter 15.

**Section 3. Extensions.** Provisional licenses are not renewable; however, the license may be extended upon a showing of good cause as follows:

(a) One (1) extension for up to six (6) months may be granted to a provisional licensee in order to continue sitting for the required exam, provided they have completed the required hours of clinical experience and supervision.

(b) One (1) extension for up to three (3) years may be granted to a provisional licensee needing to complete the required hours of clinical experience and supervision, provided they have passed the required exam during the initial three (3) year period of the provisional license.

(c) Requests for extensions shall be in writing and include a detailed explanation justifying the extension.

**Section 4. Progression Towards Licensure for Independent Clinical Practice.** When a provisional licensee believes they have satisfactorily completed the education, experience, supervision and examination requirements established herein, they shall submit an application for an independent clinical practice license.

(a) The following documents must be received by the Board in order for the provisional licensee's record to be presented to the Application Review Committee for consideration:

(i) A complete official application form accompanied by the application fee.

(ii) Verification and Evaluation of Supervised Experience report forms.

(A) Report forms shall contain an original signature.

(B) Report forms shall be submitted directly to the office of the Board from the applicant's ~~designated-qualified clinical supervisor(s)~~ DQCS.

(C) Report forms must be submitted verifying clinical experience and individual face-to-face supervision from each Board approved ~~designated clinical supervisor~~ DQCS beginning from the date the provisional license was issued up to the date the provisional licensee applies for the independent clinical practice license.

(D) Hours completed outside of Wyoming may be approved by the ARC to meet the requirements for licensure.

(I) Hours shall be completed under supervision that meets substantially similar requirements of supervision as outlined in Chapter 18 of the Rules;

(II) Hours shall be completed within the twenty-four (24) months prior to application for a provisional license in Wyoming; and

(III) The Board shall count the time to complete the hours towards the minimum requirement of holding a provisional license for eighteen (18) months before applying for full licensure in Wyoming.

(iii) An official report of having received a passing score on the required examination submitted directly to the office of the Board from the examination provider.

(A) Applicants are allowed only three (3) attempts to pass the exam requirement. The Board may allow an applicant to make one (1) more attempt to pass the exam requirement upon approval of a remediation plan submitted by the applicant.

(b) The provisional licensee shall continue to receive administrative and clinical supervision until such time as the license for independent clinical practice is issued by the Board.

(c) The provisional licensee shall surrender the provisional license identification card and submit a revised disclosure statement prior to being presented with the independent clinical practice license wall certificate and pocket identification cards.

## **Section 5. Delivery of Services**

(a) Provisional licensees services may be either face-to-face that involves the synchronous interaction between an individual or groups of individuals using what is seen and heard in person to communicate, or

(b) Via methods of electronic delivery that involves the use of electronic or other means (e.g. telephone, computers, etc.) to provide the service.

(i) When using electronic delivery means, all use must be in compliance with all professional ethical standards and all other requirements in these rules;

(ii) Special care should be taken to ensure the confidentiality and security of the provision of services; and

(iii) The Provisional Licensee shall provide only those services that are legal within the state that the recipient of services lives.

## Chapter 8

### Licensed Addictions Therapist

**Section 1. The Practice of a Licensed Addictions Therapist.** The practice of a Licensed Addictions Therapist consists of providing services based on theory and methods of counseling, psychotherapy, and addictionology to persons who are experiencing cognitive, affective or behavioral psychosocial dysfunction as a direct or indirect result of addiction, chemical dependency, abuse of chemical substances or related disorders. The practice of addictions therapy includes, but is not limited to, performing mental health procedures, addiction prevention, crisis intervention, assessment, diagnosis, referral, direct treatment, and follow-up treatment which is rendered to individuals, families, groups, organizations, schools, and communities who are adversely affected by addictions or related disorders within the range of the professional's preparation.

(a) The practice of addictions therapy may be either face-to-face that involves the synchronous interaction between an individual or groups of individuals using what is seen and heard in person to communicate, or

(b) Via methods of electronic delivery that involves the use of electronic or other means (e.g. telephone, computers, etc.) to provide the service.

(i) When using electronic delivery means, all use must be in compliance with all professional ethical standards and all other requirements in these rules;

(ii) Special care should be taken to ensure the confidentiality and security of the provision of services; and

(iii) The Licensed Addictions Therapist shall provide only those services that are legal within the state that the recipient of services lives.

**Section 2. General Requirements for Licensure.** It is the sole responsibility of the applicant to ensure that the Board receives all documentation necessary to prove to the Board's satisfaction that the applicant meets all the requirements for licensure herein. The applicant shall provide satisfactory evidence to the Board that they:

(a) are of majority age;

(b) have no felony convictions, and no misdemeanor convictions that relate adversely to the practice of addictions therapy or to the ability to practice addictions therapy, although exceptions to this requirement may be granted by the Board if consistent with the public interest;

(c) are legal inhabitants of the United States and

(d) satisfy the requirements established in these rules.

### **Section 3. Education Requirement for Licensure.**

(a) All educational requirements for licensure shall be met through the completion of a graduate degree program with a concentration in addictionology, chemical dependency, or substance abuse, healing arts or related field from an educational institution accredited by one of the regional or national institutional accrediting bodies recognized by the Council for Higher Education Accreditation (CHEA). Applicants with graduate degrees in other mental health disciplines from a regionally accredited college or university shall generally be accepted with the listed twenty-two (22) semester hours of coursework (either graduate or undergraduate) as follows:

(i) Each of the following four (4) courses shall be completed:

(A) Counseling Theories- Three (3) semester credits. Theories and principles of counseling and psychotherapy;

(B) Counseling Skills- Three (3) semester credits. Methods and techniques of individual and group counseling;

(C) Practicum in Addictions/Chemical Dependency Counseling- Three (3) semester credits; and

(D) Counseling Ethics- Three (3) semester credits.

(ii) Course work shall be completed in each of the following five (5) subject areas for a minimum of ten (10) semester credits:

(A) Alcoholism: To include biochemical, socio-cultural, and psychological factors;

(B) Drugs and Behavior: A survey of drugs with abuse potential other than alcohol that affect behavior including psychopharmacological information;

(C) Addictions and Special Populations: (i.e., adolescents, women, ethnic groups, elderly, adult children of alcoholics, the impaired family, impaired professional, etc.);

(D) Addictive Behaviors: Gambling, eating disorders, sexual addictions, cults, compulsive behaviors of non-ingestive nature, etc.; and

(E) Addictions Assessment: Appraisal, assessment, testing, diagnosis/dual diagnosis. This category may also be satisfied by completing specialty training.

(iii) Six (6) contact hours of specialty training shall be completed in

communicable diseases. This category may be satisfied by completing college course work or workshops.

- (iv) Three (3) semester credits is equivalent to four (4) quarter credits.

#### **Section 4. Supervised Training/Work Experience Requirement for Licensure.**

(a) A minimum of three thousand (3,000) hours of supervised clinical training/work experience in addictions therapy under the direct supervision of a ~~designated-qualified clinical supervisor~~ DQCS is required for all applicants. This experience shall meet the requirements set forth in these rules. The hours must be completed over a period of not less than eighteen (18) months or more than thirty-six (36) months unless granted an extension by the Board.

(i) All three thousand (3,000) hours of supervised clinical training/work experience required shall be completed after the award of the graduate degree;

(ii) Of the three thousand (3,000) hours required, at least one thousand two hundred (1,200) hours shall be direct client contact hours; and

(iii) The balance of the remaining indirect hours shall consist of work experience that supports the direct client contact hours, e.g. charting, preparation, meetings, trainings, ~~and/or~~ or the other duties of addictions therapy.

(b) An applicant shall have a minimum of one hundred (100) post graduate hours of clinical supervision with a DQCS as described in Chapter 18.

#### **Section 5. Examination Requirement for Licensure.**

(a) The Board shall accept a passing score as established by the examination provider on one of the following examinations:

(i) The Association for Addictions Professionals (NAADAC), NCAC Master Addiction Counselor (MAC) exam;

(ii) National Board for Certified Counselors (NBCC) Master Addiction Counselor (MAC) exam;

(iii) International Certification & Reciprocity Consortium (IC&RC) Advanced Alcohol and Drug Counselor (AADC) exam; or

(iv) Other examination as may be approved by the Board.

(b) The examination shall have been passed within the immediate five (5) years prior to submission of the application. This requirement does not apply to:

(i) those applying under Section 7 of these Rules; or

- 
- (ii) those applying for licensure by completing provisional.

**Section 6. LAT as a Second License.** Professionals who currently hold a license as an LPC, LMFT or LCSW in good standing in the State of Wyoming may obtain a license as an Addictions Therapist as follows:

(a) Education. The applicant shall satisfy the educational criteria in the following manner.

(i) Complete one hundred and fifty (150) contact hours of diverse addictions specific training within five (5) years of applying for the LAT, including Addictions Assessment, from four (4) of the five (5) following areas:

(A) Alcoholism: To include biochemical, socio-cultural, and psychological factors;

(B) Drugs and Behavior: A survey of drugs with abuse potential other than alcohol that affect behavior including psychopharmacological information;

(C) Addictions and Special Populations (i.e., adolescents, women, ethnic groups, elderly, adult children of alcoholics, the impaired family, impaired professional, etc.);

(D) Addictive Behaviors: Gambling, eating disorders, sexual addictions, cults, compulsive behaviors of non-ingestive nature, etc; or

(E) Addictions Assessment: Appraisal, assessment, testing, diagnosis/dual diagnosis. This category may also be satisfied by completing specialty training.

(ii) These contact hours may also be reported as continuing education for license renewal.

(b) Practicum.

(i) The applicant shall satisfy the practicum criteria by completing a practicum, to include addictions specific clients, in a master's program, or by

(ii) Completing one hundred and fifty (150) face-to-face clinical contact hours with addictions specific clients within five (5) years of applying for licensure, which is supervised by an LAT. These hours shall be completed after the award of the initial license as an LPC, LCSW, or an LMFT, or by

(iii) Providing written proof, in a manner approved by the Board, of a minimum of five (5) years of full-time experience in the addictions field, gained within the ten (10) years immediately preceding the date of application, and after completion of the master's

degree by which they received their LPC, LCSW, or LMFT.

- (c) Examination. The examination requirements are the same as defined in Section 5.

**Section 7. License by Reciprocity.** An individual who holds a master's degree or higher in a human resource behavioral discipline, has passed the examination as required in Section 5 of this Chapter and holds a license that is free from discipline and in good standing to engage in the practice of addictions therapy under the laws of another state may, upon approval of the Board, be issued a license as an Addictions Therapist in this state. If the individual has held a license to addictions therapy in more than one state, the individual shall be required to provide verification that all licenses held within the last five (5) years have not had any discipline against the license.

**Section 8. Standards of Conduct.**

(a) The terms "Licensed Addictions Therapist" or "Addictions Therapist" shall be used only after the applicant is granted licensure by the Board.

(b) The Licensed Addictions Therapist shall comply with the Association for Addictions Professionals (NAADAC) "Code of Ethics" incorporated into these rules in Chapter 15.



## Chapter 9

### Licensed Clinical Social Worker

**Section 1. The Practice of a Licensed Clinical Social Worker.** The practice of a Licensed Clinical Social Worker is the application of social work theory, knowledge, methods, ethics, and the professional use of self to restore or enhance social, psychosocial, or biopsychosocial functioning of individuals, couples, families, groups, organizations, and communities. The practice of Clinical Social Work requires application of specialized clinical knowledge and advanced clinical skills in the areas of assessment, diagnosis, and treatment of mental, emotional, and behavioral disorders, conditions, and addictions. Treatment methods include the provision of individual, marital, couple, family, and group counseling and psychotherapy within the range of the professional's preparation. The practice of Clinical Social Work may include private practice and the provision of clinical supervision.

(a) The practice of social work may be either face-to-face that involves the synchronous interaction between an individual or groups of individuals using what is seen and heard in person to communicate, or

(b) Via methods of electronic delivery that involves the use of electronic or other means (e.g. telephone, computers, etc.) to provide the service.

(i) When using electronic delivery means, all use must be in compliance with all professional ethical standards and all other requirements in these rules;

(ii) Special care should be taken to ensure the confidentiality and security of the provision of services; and

(iii) The Licensed Clinical Social Worker shall provide only those services that are legal within the state that the recipient of services lives.

**Section 2. General Requirements for Licensure.** It is the sole responsibility of the applicant to ensure that the Board receives all documentation necessary to prove to the Board's satisfaction that the applicant meets all the requirements for licensure herein. The applicant shall provide satisfactory evidence to the Board that they:

(a) are of majority age;

(b) have no felony convictions, and no misdemeanor convictions that relate adversely to the practice of clinical social work or to the ability to practice clinical social work, although exceptions to this requirement may be granted by the Board if consistent with the public interest;

(c) are legal inhabitants of the United States; and

(d) satisfy the requirements established in these rules.

**Section 3. Education Requirement for Licensure.** All educational requirements for licensure shall be met through the completion of a Council on Social Work Education (CSWE) accredited master's degree program in social work.

**Section 4. Supervised Training/Work Experience Requirement for Licensure.**

(a) A minimum of three thousand (3,000) hours of supervised clinical training/work experience in clinical social work under the direct supervision of a ~~designated-qualified clinical supervisor~~ DQCS is required for all applicants. This experience shall meet the requirements set forth in these rules. The hours must be completed over a period of not less than eighteen (18) months or more than thirty-six (36) months unless granted an extension by the Board.

(i) All three thousand (3,000) hours of supervised clinical training/work experience required shall be completed after the award of the graduate degree.

(ii) Of the three thousand (3,000) hours required, at least one thousand two hundred (1,200) hours shall be direct client contact hours providing clinical social work as defined in Wyoming Statute 33-38-102 (a) (v).

(iii) The balance of the remaining indirect hours shall consist of work experience that supports the direct client contact hours, e.g. charting, preparation, meetings, trainings, ~~and/or~~ or the other duties of clinical social work.

(b) An applicant shall have a minimum of one hundred (100) post graduate hours of clinical supervision with a DQCS as described in Chapter 18.

**Section 5. Examination Requirement for Licensure.**

(a) The Board shall accept a passing score as established by the examination provider of the following examination:

(i) The Association of Social Work Boards (ASWB) examination at the Clinical Level; or

(ii) Other examination as may be approved by the Board.

(b) The examination shall have been passed within the immediate five (5) years prior to submission of the application. This requirement does not apply to:

(i) those applying under Section 6 of these Rules; or

(ii) those applying for licensure by completing provisional.

**Section 6. License by Reciprocity.** An individual who holds a master's degree or higher in social work, has passed the examination as required in Section 5 of this Chapter and

holds a license that is free from discipline and in good standing to engage in the practice of social work under the laws of another state may, upon approval of the Board, be issued a license as a Clinical Social Worker in this state. If the individual has held a license to practice social work in more than one state, the individual shall be required to provide verification that all licenses held within the last five (5) years have not had any discipline against the license.

**Section 7. Standards of Conduct.**

(a) The terms “Licensed Clinical Social Worker” or “Clinical Social Worker” shall be used only after the applicant is granted licensure by the Board.

(b) The Licensed Clinical Social Worker shall comply with the National Association of Social Workers “Code of Ethics” incorporated into these rules in Chapter 15.

## Chapter 10

### Licensed Marriage and Family Therapist

**Section 1. The Practice of a Marriage and Family Therapist.** The practice of a Licensed Marriage and Family Therapist is the rendering of professional couples, marital and family therapy services and treatment to individuals, family groups, organizations, couples, marital pairs, singly or in groups. Couples, marital and family therapy includes, but is not limited to, performing mental health procedures, the assessment, diagnosis and treatment, including psychotherapy, of nervous, emotional, and mental disorders, whether cognitive, affective or behavioral, within the context of couples, marital and family systems within the range of the professional's preparation. Couples, marital and family therapy involves the professional application of psychotherapeutic and family systems theories and techniques in the delivery of services to individuals, couples, marital pairs and families for the purpose of treating such diagnosed nervous and mental disorders.

(a) The practice of marriage and family therapy may be either face-to-face that involves the synchronous interaction between an individual or groups of individuals using what is seen and heard in person to communicate, or

(b) Via methods of electronic delivery that involves the use of electronic or other means (e.g. telephone, computers, etc.) to provide the service.

(i) When using electronic delivery means, all use must be in compliance with all professional ethical standards and all other requirements in these rules;

(ii) Special care should be taken to ensure the confidentiality and security of the provision of services; and

(iii) The Licensed Marriage and Family Therapist shall provide only those services that are legal within the state that the recipient of services lives.

**Section 2. General Requirements for Licensure.** It is the sole responsibility of the applicant to ensure that the Board receives all documentation necessary to prove to the Board's satisfaction that the applicant meets all the requirements for licensure herein. The applicant shall provide satisfactory evidence to the Board that they:

(a) are of majority age;

(b) have no felony convictions, and no misdemeanor convictions that relate adversely to the practice of marriage and family therapy or to the ability to practice marriage and family therapy, although exceptions to this requirement may be granted by the Board if consistent with the public interest;

(c) are legal inhabitants of the United States; and

- (d) satisfy the requirements established in these rules.

### **Section 3. Education Requirement for Licensure.**

(a) All educational requirements for licensure shall be met through the completion of a master's degree program in marriage and family therapy from a Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) or Council for Accreditation of Counseling and Related Educational Programs- Marriage and Family Counseling (CACREP-MCFC) accredited program. The Board will only accept the education from a CACREP-MCFC program if the applicant was enrolled in the program prior to January 1, 2020.

(b) Applicants who have completed couple, marriage and family therapy programs not accredited by COAMFTE or CACREP-MCFC may be deemed to have met the educational requirement provided they meet the following criteria:

(i) The graduate degree program, and any applicable additional graduate level course work, was completed at an educational institution accredited by one of the regional or national institutional accrediting bodies recognized by the Council for Higher Education Accreditation (CHEA).

(ii) The program was substantially similar in content as required by COAMFTE or CACREP-MCFC including instructor qualifications, clinical supervision, practicum and internship requirements and course work.

(iii) The official transcripts, course prefixes, and course descriptions clearly identify the educational program as preparing persons to be couples, marriage and family therapists.

(iv) Course work shall be completed in a master's or doctoral program or subsequent graduate level coursework.

(v) The applicant has completed a minimum of seventy-two (72) quarter hours or forty-eight (48) semester hours of graduate level coursework.

(vi) Course work for those graduating from programs prior to January 1, 2020 was completed in each of the core areas defined herein:

(A) Individual and Family Development (9 semester credits)- Courses in this area include content on individual and family development across the lifespan. Content should provide knowledge of individual personality development and its normal and abnormal manifestations. The applicant should have relevant coursework in human development across the life span which includes special issues that affect an individual's development. This material should be integrated with systems concepts. Topic areas may include human development, child/adolescent development, psychopathology, personality theory, human sexuality, and other psychosocial development including career development, or other courses related directly to

human development. Test and measurement courses are not acceptable in this area.

(B) Theoretical Knowledge of Couples, Marital and Family Therapy (9 semester credits)- Courses in this area address the historical development, theoretical and empirical foundations, and contemporary conceptual directions of the field of couples, marriage and family therapy. Content enables students to conceptualize and distinguish the critical epistemological issues in the profession of couples, marriage and family therapy and provide a comprehensive survey and substantive understanding of the major models of marriage, couples, and family therapy. All courses in this area must have a major focus from a systems theory orientation. Topic areas may include systems theory, family subsystems, blended family, gender issues in families, cultural issues in families, or other courses directly related to couples, marital and family theory. Survey or overview courses in which systems is one of several theories covered are not appropriate. Courses in which systems theory is the major focus and other theories are studied in relation to systems theory are appropriate.

(C) Clinical Knowledge of Couples, Marital and Family Therapy (9 semester credits)- Courses in this area address, from a relational/systemic perspective, psychopharmacology, physical health and illness, traditional psychodiagnostic categories, and the assessment, diagnosis and treatment of major mental health issues. Content addresses contemporary issues, which include but are not limited to gender, sexual functioning, sexual orientation, sex therapy, violence, addictions, and abuse, in the treatment of individuals, couples, and families from a relational/systemic perspective. Material addresses a wide variety of presenting clinical problems. Courses in this area should have a major focus on advanced family systems theories and systemic therapeutic interventions. This area is intended to provide a substantive understanding of the major theories of systems change and the applied practices evolving from each theoretical orientation. Major theoretical approaches may include strategic, structural, object relations family therapy, behavioral family therapy, communications family therapy, intergenerational family therapy, systemic sex therapy, or other courses directly related to couples, marital and family therapy. Survey or overview courses in which family therapy is one of several types of theories covered is not acceptable.

(D) Research (3 semester credits)- Courses in this area include significant material on research in couple and family therapy. Content focuses on research methodology, data analysis and the evaluation of research including quantitative and qualitative research and its methods. Individual personality, test and measurement, and library research courses are not acceptable toward this area.

(E) Professional Identify & Ethics (3 semester credits)- Courses in this area are intended to contribute to the professional development of the therapist. Content includes professional identity, including professional socialization, scope of practice, professional organizations, licensure, and certification. Coursework focuses on ethical issues related to the profession of individual, couples, marriage and family therapy. Other areas that need to be addressed include the AAMFT Code of Ethics, confidentiality issues, the legal responsibilities and liabilities of clinical practice and research, family law, record keeping, reimbursement, the business aspects of practice, and familiarity with regional and federal laws as they relate to the practice of individual, couple and family therapy. Religious ethics courses and moral theology

are not accepted towards this area.

(F) Clinical Practicum/Internship (9 semester credits)- Applicants shall complete a supervised clinical practicum/internship with individuals, couples, and families.

(vii) Course work for those graduating from programs after January 1, 2020 was completed in each of the core areas defined herein:

(A) Foundations of Relational/Systemic Practice, Theories & Models (Minimum of 6 semester credits/8 quarter credits/90 clock hours) This area facilitates students developing competencies in the foundations and critical epistemological issues of MFTs. It includes the historical development of the relational/systemic perspective and contemporary conceptual foundations of MFTs, and early and contemporary models of MFT, including evidence-based practice and the biopsychosocial perspective.

(B) Clinical Treatment with Individuals, Couples and Families (Minimum of 6 Credits/8 quarter credits/90 clock hours) This area facilitates students developing competencies in treatment approaches specifically designed for use with a wide range of diverse individuals, couples, and families, including sex therapy, same-sex couples, working with young children, adolescents and elderly, interfaith couples, and includes a focus on evidence-based practice. Programs must include content on crisis intervention.

(C) Diverse, Multicultural and/or Underserved Communities (Minimum of 3 Credits/4 quarter credits/45 clock hours). This area facilitates students developing competencies in understanding and applying knowledge of diversity, power, privilege and oppression as these relate to race, age, gender, ethnicity, sexual orientation, gender identity, socioeconomic status, disability, health status, religious, spiritual and/or beliefs, nation of origin or other relevant social categories throughout the curriculum. It includes practice with diverse, international, multicultural, marginalized, and/or underserved communities, including developing competencies in working with sexual and gender minorities and their families as well as anti-racist practices.

(D) Research & Evaluation (Minimum of 3 Credits/4 quarter credits/45 clock hours). This area facilitates students developing competencies in MFT research and evaluation methods, and in evidence-based practice, including becoming an informed consumer of couple, marriage, and family therapy research. If the program's mission, goals, and outcomes include preparing students for doctoral degree programs, the program must include an increased emphasis on research.

(E) Professional Identity, Law, Ethics & Social Responsibility (Minimum of 3 Credits/4 quarter credits/45 clock hours). This area addresses the development of a MFT Identity and socialization, and facilitates students developing competencies in ethics in MFT practice, including understanding and applying the AAMFT Code of Ethics and understanding legal responsibilities.

(F) Biopsychosocial Health & Development Across the Life Span

(Minimum of 3 Credits/4 quarter credits/45 clock hours). This area addresses individual and family development, human sexuality, and biopsychosocial health across the lifespan.

(G) Systemic/Relational Assessment & Mental Health Diagnosis and Treatment (Minimum of 3 Credits/4 quarter credits/45 clock hours). This area facilitates students developing competencies in traditional psycho-diagnostic categories, psychopharmacology, the assessment, diagnosis, and treatment of major mental health issues as well as a wide variety of common presenting problems including addiction, suicide, trauma, abuse, intra-familial violence, and therapy for individuals, couples, and families managing acute chronic medical conditions, utilizing a relational/systemic philosophy.

(H) The following areas must be covered in the curriculum in some way, though there are no minimum credit requirements:

(I) Contemporary Issues. This area facilitates students developing competencies in emerging and evolving contemporary challenges, problems, and/or recent developments at the interface of Couple or Marriage and Family Therapy knowledge and practice, and the broader local, regional, and global context. This includes such issues as immigration, technology, same-sex marriage, violence in schools, etc. These issues are to reflect the context of the program and the program's mission, goals, and outcomes.

(II) Community Intersections & Collaboration. This area facilitates students developing competencies in practice within defined contexts (e.g., healthcare settings, schools, military settings, private practice) or nontraditional MFT professional practice using therapeutic competencies congruent with the program's mission, goals, and outcomes (e.g., community advocacy, psycho-educational groups). It also addresses developing competency in multidisciplinary collaboration.

(III): Preparation for Teletherapy Practice This area facilitates the development of competencies in teletherapy. This may include such issues as emerging legal and ethical requirements, documentation, response to crises, awareness of the therapeutic space, joining, appropriate individual and systemic interventions (e.g., couples, play therapy), or other topics of importance to the context of the program and with diverse populations.

(I) Practicum or internship. Includes a minimum of ~~500~~ 300 clinical contact hours with individuals, couples, families and other systems physically present, at least ~~40%~~ 100 of which must be relational. The ~~500~~ 300 hours must occur over a minimum of twelve months of clinical practice. ~~The 500 hours may include a maximum of 100 alternative hours or clinical activity (e.g., couple or family groups, live cases where reflecting teams are directly involved in working with clients, etc.) that is directly related to the program's mission, outcomes, and goals. Alternatively, the program may demonstrate that graduating students achieve a competency level equivalent to the 500 client contact hours. The program must define this competency level and document how students are evaluated and achieve the defined level. The program demonstrates a consistent set of evaluation criteria for achieving the defined level of competency across all students. In addition, programs that do not require 500 hours must document that students are informed about licensure portability issues that may result from not~~



~~having 500 hours. Those programs requiring less than 500 hours may not use alternative hours to count toward total client contact hours. The program demonstrates a commitment to relational/systemic-oriented supervision.~~ Students must receive at least 100 hours of supervision. Supervision can be individual or group and must include a minimum of 50 hours of supervision utilizing observable data. Supervision may utilize digital technology in which participants are not in the same location as long as the majority of supervision is with supervisor and supervisee physically present in the same location and appropriate mechanisms/precautions are in place to ensure the confidentiality and security of the means of technology delivery.

(viii) Three (3) semester credits is equivalent to four (4) quarter credits.

#### **Section 4. Supervised Training/Work Experience Requirement for Licensure.**

(a) A minimum of three thousand (3,000) hours of supervised clinical training/work experience in individual, couple, marriage and family therapy under the direct supervision of a ~~designated qualified clinical supervisor~~ DQCS is required for all applicants. This experience shall meet the requirements set forth in these rules. The hours must be completed over a period of not less than eighteen (18) months or more than thirty-six (36) months unless granted an extension by the Board.

(i) All three thousand (3,000) hours of supervised clinical training/work experience required shall be completed after the award of the graduate degree.

(ii) Of the three thousand (3,000) hours required, at least one thousand two hundred (1,200) hours shall be direct client contact hours.

(A) Of the one thousand two hundred (1,200) direct client contact hours at least five hundred (500) hours must be direct clinical services to couples and families.

(iii) The balance of the remaining indirect hours shall consist of work experience that supports the direct client contact hours, e.g. charting, preparation, meetings, trainings, ~~and/or~~ or the other duties of marriage and family counseling.

(b) An applicant shall have a minimum of one hundred (100) post graduate hours of clinical supervision with a DQCS as described in Chapter 18.

#### **Section 5. Examination Requirement for Licensure.**

(a) The Board shall accept a passing score as established by the examination provider on one of the following examinations:

(i) The Association of Marital and Family Therapists Regulatory Boards (AMFTRB) examination; or

(ii) Other examination as may be approved by the Board.

(b) The examination shall have been passed within the immediate five (5) years prior to submission of the application. This requirement does not apply to:

(i) those applying under Section 6 of these Rules; or

(ii) those applying for licensure by completing provisional.

**Section 6. License by Reciprocity.** An individual who has a master's degree or higher in marriage family therapy, has passed the examination as required in Section 5 of this Chapter, and holds a license that is free from discipline and in good standing to engage in the practice of marriage and family therapy under the laws of another state may, upon approval of the board, be issued a license as a Marriage and Family Therapist in this state. If the individual has held a license to practice marriage and family therapy in more than one state, the individual shall be required to provide verification that all licenses held within the last five (5) years have not had any discipline against the license.

**Section 7. Standards of Conduct.**

(a) The terms "Licensed Marriage and Family Therapist" or "Marriage and Family Therapist" shall be used only after the applicant is granted licensure by the Board.

(b) The Licensed Marriage and Family Therapist shall comply with the American Association for Marriage and Family Therapy "Code of Ethics" incorporated into these rules in Chapter 15.

## Chapter 11

### Licensed Professional Counselor

**Section 1. The Practice of a Licensed Professional Counselor.** The practice of a Licensed Professional Counselor is the rendering to individuals, couples, families, groups, organizations, corporations, institutions, government agencies or the general public a service that integrates a wellness, pathology and multicultural model of human behavior. This model applies a combination of mental health, psychotherapeutic, and human development principles and procedures to help clients achieve effective mental, emotional, physical, social, moral, educational, spiritual or career development and adjustment throughout the life span, and includes performing mental health procedures, the assessment, diagnostic description and treatment of mental disorders or disabilities within the range of the professional's preparation.

(a) The practice of counseling may be either face-to-face that involves the synchronous interaction between an individual or groups of individuals using what is seen and heard in person to communicate, or

(b) Via methods of electronic delivery that involves the use of electronic or other means (e.g. telephone, computers, etc.) to provide the service.

(i) When using electronic delivery means, all use must be in compliance with all professional ethical standards and all other requirements in these rules;

(ii) Special care should be taken to ensure the confidentiality and security of the provision of services; and

(iii) The Licensed Professional Counselor shall provide only those services that are legal within the state that the recipient of services lives.

**Section 2. General Requirements for Licensure.** It is the sole responsibility of the applicant to ensure that the Board receives all documentation necessary to prove to the Board's satisfaction that the applicant meets all the requirements for licensure herein. The applicant shall provide satisfactory evidence to the Board that they:

(a) are of majority age;

(b) have no felony convictions, and no misdemeanor convictions that relate adversely to the practice of counseling or to the ability to practice counseling, although exceptions to this requirement may be granted by the Board if consistent with the public interest;

(c) are legal inhabitants of the United States; and

(d) satisfy the requirements established in these rules.

### **Section 3. Education Requirement for Licensure.**

(a) The applicant shall have received a master's or doctorate degree in counseling from a Council for Accreditation of Counseling and Related Educational Programs (CACREP) or Council on Rehabilitation Education (CORE) accredited program in counseling.

(b) Applicants who have completed graduate counselor programs not accredited by CACREP or CORE may be deemed to have met the educational requirement provided they meet the following criteria:

(i) The graduate degree program, and any applicable additional graduate level course work, was completed at an educational institution accredited by one of the regional or national institutional accrediting bodies recognized by the Council for Higher Education Accreditation (CHEA).

(ii) The program was substantially similar in content as required by CACREP including instructor qualifications, clinical supervision and course work.

(iii) The applicant must have completed a minimum of seventy-two (72) quarter hours or forty-eight (48) semester hours of graduate level course work. Applicants who graduated after July 1, 2013, must have completed a minimum of ninety (90) quarter hours or sixty (60) semester hours of graduate level course work.

(iv) The official transcripts, course prefixes, and course descriptions clearly identify the educational program as preparing persons to be professional counselors.

(v) Course work shall be completed in a master's or doctoral program or subsequent graduate level course work.

(vi) Course work was completed in each of the core areas defined herein:

(A) Practicums, Internships or Field Experience under clinical supervision.

(I) Students must complete supervised practicum experiences that total a minimum of 100 clock hours over a minimum 10-week academic term.

(II) The program requires completion of a supervised internship in the student's designated program area of 600 clock hours, begun after successful completion of the practicum. The internship is intended to reflect the comprehensive work experience of a professional counselor appropriate to the designated program area. Each student's internship includes all of the following:

(1.) At least 240 clock hours of direct service, including experience leading groups;

(2.) Weekly interaction that averages one hour per week of individual ~~and/or~~ or triadic supervision throughout the internship, usually performed by the onsite supervisor; and

(3.) An average of 1 1/2 hours per week of group supervision provided on a regular schedule throughout the internship and performed by a program faculty member.

(B) Human Growth and Development- studies that provide an understanding of the nature and needs of individuals at all developmental levels, including all of the following:

(I) Theories of individual and family development and transitions across the life-span;

(II) Theories of learning and normal and abnormal personality development;

(III) Effects of crises, disasters, and other trauma-causing events on diverse individuals across the lifespan;

(IV) Individual, biological, neurological, physiological, systemic, spiritual, and environmental factors that affect human development, functioning, and behavior;

(V) A general framework for understanding differing abilities and strategies for differentiated interventions;

(VII) Theories and etiology of addictions and addictive behaviors; and

(VIII) Ethical and culturally relevant strategies for promoting resilience and optimum development and wellness across the life span

(C) Social and Cultural Diversity- studies that provide an understanding of the cultural context of relationships, issues and trends in a multicultural society including all of the following:

(I) Research addressing multicultural and pluralistic characteristics within and among diverse groups nationally and internationally;

(II) Learning activities to foster student's self understanding of the impact of their heritage, attitudes, beliefs, understandings, and acculturative experiences on their views of others;

(III) Theories and models of multicultural counseling, identity development, and social justice and advocacy;

(IV) Strategies for identifying and eliminating barriers, prejudices, and processes of intentional and unintentional oppression and discrimination;

(V) Learning activities that foster understandings of the help-seeking behaviors of diverse clients;

(VI) Learning activities that foster understanding of the impact of spiritual beliefs on clients' and counselors' worldviews; and

(VII) Multicultural competencies and strategies for working with and advocating optimum wellness for diverse populations;

(D) Helping Relationships- studies that provide an understanding of counseling process in a multicultural society, including all of the following:

(I) Theories and models of effective counseling and wellness programs;

(II) Counselor characteristics and behaviors that influence the helping process;

(III) Essential interviewing, case conceptualization and counseling skills;

(IV) A systems approach that provides an understanding of family, social, community, and political networks;

(V) Theories, models, and strategies for understanding and practicing consultation; and

(VI) Ethical and culturally relevant strategies for developing helping relationships:

(VII) Developmentally relevant counseling treatment or intervention plans;

(VIII) Development of measurable outcomes for clients;

(IX) Empirically-based counseling strategies and techniques for prevention, intervention, and advocacy;

(X) Strategies to promote client understanding of and access to a variety of community-based resources;

- (XI) Suicide prevention models and strategies;
  - (XII) Crisis intervention and psychological first aid strategies;
- and
- (XIII) Processes for aiding students in developing a personal model of counseling.
- (E) Group Work- studies that provide theoretical foundations of group work and dynamics associated with group process including all of the following:
- (I) Therapeutic factors and how they contribute to group effectiveness;
  - (II) Characteristics and functions of effective group leaders;
  - (III) Approaches to group formation, including recruiting, screening, and selecting members;
  - (IV) Types of groups and other considerations that affect conducting groups in varied settings;
  - (V) Ethical and culturally relevant strategies for designing and facilitating groups; and
  - (VI) Direct experiences in which students participate as group members in a small group activity, approved by the program, for a minimum of 10 clock hours over the course of one academic term.
- (F) Career Development- studies that provide an understanding of career development and related life factors, including all of the following:
- (I) Theories and models of career development, counseling, and decision-making;
  - (II) Process for identifying and utilizing career, avocational, educational, occupational and labor market information resources, technology and information systems;
  - (III) Approaches for assessing the conditions of the work environment on clients' overall life experiences;
  - (IV) Strategies for assessing abilities, interests, values, personality, and other factors that contribute to career development;

(V) Strategies for career development program planning, organization, implementation, administration, and evaluation;

(VI) Strategies for advocating for diverse clients' career and educational development and employment opportunities in a global economy;

(VII) Strategies for facilitating client skills development for career, educational, and life-work planning and management;

(VIII) Approaches for conceptualizing the interrelationships among and between work, family, and other life roles and factors;

(IX) Methods of identifying and utilizing assessment tools and techniques relevant to career planning and decision making; and

(X) Ethical and culturally relevant strategies for addressing career development.

(G) Assessment- studies that provide an understanding of individual and group approaches to assessment and evaluation in a multicultural society, including all of the following:

(I) Historical perspectives concerning the nature and meaning of assessment;

(II) Basic concepts of standardized and non-standardized testing, norm-referenced and criterion-referenced assessment and group and individual assessments;

(III) Statistical concepts, including scales of measurement, measures of central tendency, indices of variability, shapes and types of distributions, and correlations;

(IV) Reliability and validity in the use of assessments;

(V) Methods of effectively preparing for and conducting initial assessment meetings;

(VI) Procedures for assessing risk of aggression or danger to others, self-inflicted harm or suicide;

(VII) Procedures for identifying and reporting abuse:

(VIII) Use of assessments for diagnostic and intervention planning purposes;



(IX) Use of assessments relevant to academic/educational, career, personal, and social development;

(X) Use of environmental assessments and systematic behavioral observations;

(XI) Use of symptom checklists, personality and psychological testing;

(XII) Use of assessment results to diagnose developmental, behavioral, and mental disorders; and

(XIII) Ethical and culturally and developmentally relevant strategies for selecting, administering, and interpreting assessment and test results.

(H) Research and Program Evaluation- studies that provide an understanding of research methods, statistical analysis, needs assessment, and program evaluation, including all of the following:

(I) The importance of research in advancing the counseling profession, including its use to inform evidence based practice;

(II) Qualitative, quantitative, and mixed research methods;

(III) Statistical methods used in conducting research and program evaluation;

(IV) Evaluation of counseling interventions and programs;

(V) Development of outcome measures for counseling programs;

(VI) Analysis and use of data in counseling; and

(VII) Ethical and culturally relevant strategies for conducting, interpreting and reporting the results of research and/or program evaluation studies.

(I) Professional Counseling Orientation and Ethical Practice- studies that provide an understanding of all of the following aspects of professional functioning:

(I) History and philosophy of the counseling profession and the origins of the counseling specialty areas;

(II) The multiple professional roles and functions of counselors across specialty areas and their relationships with other human service providers, including interagency and interorganizational collaboration and consultation;

- (III) Counselors' roles and responsibilities as members of interdisciplinary community outreach and emergency management response teams;
- (IV) Self-care strategies appropriate to the counselor role;
- (V) Technology's impact on the counseling profession;
- (VI) Strategies for personal and professional self-evaluation and implications for practice;
- (VII) Counseling supervision models, practices, and processes;
- (VIII) Professional organizations, including membership benefits, activities, services to members, and current issues;
- (IX) Professional credentialing, including certification, licensure, and accreditation practices and standards, and the effects of public policy on these issues;
- (X) The role and process of the professional counselor advocating on behalf of the profession;
- (XI) Advocacy processes needed to address institutional and social barriers that impede access, equity, and success for clients; and
- (XII) Ethical standards of professional organizations and credentialing bodies, and applications of ethical and legal considerations in professional counseling.

#### **Section 4. Supervised Training/Work Experience Requirement for Licensure.**

- (a) A minimum of three thousand (3,000) hours of supervised clinical training/work experience in professional counseling under the direct supervision of a ~~designated-qualified clinical supervisor~~ DQCS is required for all applicants. This experience shall meet the requirements set forth in these rules. The hours must be completed over a period of not less than eighteen (18) months or more than thirty-six (36) months unless granted an extension by the Board.
  - (i) All three thousand (3,000) hours of supervised clinical training/work experience required shall be completed after the award of the graduate degree;
  - (ii) Of the three thousand (3,000) hours required, at least one thousand two hundred (1,200) hours shall be direct client contact hours.
  - (iii) The balance of the remaining indirect hours shall consist of work

experience that supports the direct client contact hours, e.g. charting, preparation, meetings, trainings, ~~and/or~~ or the other duties of counseling.

(b) An applicant shall have a minimum of one hundred (100) post graduate degree hours of clinical supervision with a DQCS as described in Chapter 18.

#### **Section 5. Examination Requirement for Licensure.**

(a) The Board shall accept a passing score as established by the examination provider on the following examinations:

(i) The National Board for Certified Counselor's (NBCC) National Counselor Examination (NCE) or the National Clinical Mental Health Examination (NCMH).

(ii) The Certification Examination administered by the Commission on Rehabilitation Counselor Certification (CRCC).

(iii) Other examinations as may be approved by the Board.

(b) The examination shall have been passed within the immediate five (5) years prior to submission of the application. This requirement does not apply to:

(i) those applying under Section 6 of these Rules; or

(ii) those applying for licensure by completing provisional.

**Section 6. License by Reciprocity.** An individual who has a master's degree or higher in professional counseling, has passed the examination as required in Section 5 of this Chapter, and holds a license that is free from discipline and in good standing to engage in the practice of professional counseling under the laws of another state may, upon approval of the board, be issued a license as a Professional Counselor in this state. If the individual has held a license to practice professional counseling in more than one state, the individual shall be required to provide verification that all licenses held within the last five (5) years have not had any discipline against the license.

#### **Section 7. Standards of Conduct.**

(a) The terms "Licensed Professional Counselor" or "Professional Counselor" shall be used only after the applicant is granted licensure by the Board.

(b) The Licensed Professional Counselor shall comply with the American Counseling Association "Code of Ethics" incorporated into these rules in Chapter 15.

## **Chapter 12**

### **Application Procedure**

#### **Section 1. Class of License and Certification.**

(a) A separate and distinct license or certification shall be issued for each of the following disciplines:

- (i) Certified Addictions Practitioner (CAP)
- (ii) Certified Addictions Practitioner Assistant (CAPA)
- (iii) Certified Mental Health Worker (CMHW)
- (iv) Certified Social Worker (CSW)
- (v) Licensed Addictions Therapist (LAT)
- (vi) Licensed Clinical Social Worker (LCSW)
- (vii) Licensed Marriage and Family Therapist (LMFT)
- (viii) Licensed Professional Counselor (LPC)
- (ix) Provisional Addictions Therapist (PAT)
- (x) Provisional Clinical Social Worker (PCSW)
- (xi) Provisional Marriage and Family Therapist (PMFT)
- (xii) Provisional Professional Counselor (PPC)

(b) Initial licenses and certifications shall expire on the licensee's or certificate holder's birth date immediately following the second anniversary of the issue date. Thereafter, upon renewal, the license or certification shall be valid for two (2) years.

(c) Additional licenses and certifications issued to the same individual shall expire on the same date as the initial license or certification held by that individual. Thereafter, upon renewal, the license or certification shall be valid for two (2) years.

(d) An applicant shall clearly indicate the specific license or certification desired. An applicant who seeks licensure or certification in more than one discipline shall submit separate applications, appropriate fees and documentation for each license or certification sought.

(e) The Board shall not make any determination regarding an applicant's eligibility for license or certification status prior to receiving a completed application, fee, and all supporting documents.

**Section 2. General Application Procedures.** An individual is considered an applicant once he or she has submitted the following:

(a) A complete official application form accompanied by the application fee and appropriate proof of legal presence in the U.S.

(b) Official transcripts from all colleges and universities attended.

(i) Applicants required to complete transcript evaluation forms shall not use the same class to meet the requirements for more than one required area of study.

(c) A certificate of professional qualification in the discipline from a national credentials bank, approved by the Board, may be accepted by the Board for license by reciprocity. The Board may require the applicant to submit such supplemental information as it deems necessary to assure that the applicant meets the qualifications for licensure.

(d) All documents submitted in support of the application shall contain signature and be submitted directly to the office of the Board from the respondent and not forwarded through the applicant.

(e) Fingerprints and other information necessary for a criminal history record background check as required by Wyoming Statute 33-38-105 (j).

(f) The applicant acknowledges through submission of an application and fee the Board may perform an ongoing query of their licensure through the National Practitioners Data Base.

(ge) Completion of all requirements for licensure or certification shall be documented within one (1) year of the date the application is received by the Board, otherwise the application will be deemed expired. If an application expires, an applicant shall be required to submit a new application including the payment of the required fees.

**Section 3. Application for Licensure by Examination.** In addition to the documents required in Section 2 of this chapter, the ~~designated qualified clinical supervisor(s)~~ DQCS(s) of the applicant shall submit complete Verification and Evaluation of Supervised Experience forms within thirty (30) days of the conclusion of supervision.

**Section 4. Application for Licensure by Reciprocity.** The applicant shall request verification of licensure in good standing from jurisdictions where the applicant holds or has held a license in any mental health discipline. Additionally, the applicant shall submit official transcripts from all colleges and universities required by the application as well as verification that the applicant has achieved a passing score on an accepted examination for the license. The

Board may rely upon the documentation and verified data gathered and stored by not for profit organizations which share in the public protection mission of this Board including, but not limited, to Association of Social Work Boards.

**Section 5. Application for Certification by Examination.** In addition to the documents required in section 2 of this chapter, the ~~designated qualified clinical supervisor~~ DQCS of the applicant shall submit a complete supervision agreement.

**Section 6. Application for Certification by Reciprocity.** The applicant shall request verification of certification in good standing from jurisdictions where the applicant holds or has held a certification in any mental health discipline. Additionally, the applicant shall submit official transcripts from all colleges and universities required by the application as well as verification that the applicant has achieved a passing score on an accepted examination for the certification. The board may rely upon the documentation and verified data gathered and stored by not for profit organizations which share in the public protection mission of this board including, but not limited, to Association of Social Work Boards.

**Section 7. Issuance of License or Certification.** The Board shall issue a wall certificate to the successful applicant bearing the full name of the holder, discipline designation, license or certification number, date of issuance, expiration date, and appropriate seal. The board may rely upon the documentation and verified data gathered and stored by not for profit organizations which share in the public protection mission of this board including, but not limited, to Association of Social Work Boards.

**Section 8. Change of Name, Address or Telephone Number.**

(a) Licensees and certificate holders shall register with the Board any change in their legal name, shall submit documentation demonstrating the change of name, appropriate fee and shall surrender the old wall certificate and a new wall certificate shall be issued by the Board.

(b) Each applicant, licensee and certificate holders shall file with the Board their current home and professional mailing addresses and telephone numbers and shall report to the Board in writing any change of addresses or telephone numbers, giving both old and new addresses and telephone numbers. A change in employment requires a revised disclosure statement.

(c) All changes shall be reported to the Board office within thirty (30) days of the change.

**Section 9. Correction and Amendment.** Any applicant, licensee or certificate holder may clarify erroneous, inaccurate or misleading information in their file by submitting a written statement to the Board which will be placed in their file.

## Chapter 13

### Fees

**Section 1. Fees.** This fee schedule is adopted by the Board pursuant to W.S. 33-1-201.

(a) Application Fees:

- (i) Licensure by reciprocity \$350.00 per discipline
- (ii) Licensure by examination \$350.00 per discipline
- (iii) Licensure by completing provisional \$200.00 per discipline
- (iv) Certification by reciprocity \$300.00 per discipline
- (v) Certification by examination \$300.00 per discipline
- (vi) Provisional License \$150.00 per discipline

(b) Renewal Fees:

(i) License \$125.00 for the initial discipline and \$75.00 for every additional discipline.

- (ii) Certification \$100.00 per discipline

(c) Re-Licensure Fee \$350.00 per discipline

(d) Re-Certification Fee \$300.00 per discipline

(e) Re-Instatement of license or certificate \$200.00 per discipline

(f) Non-sufficient Funds Fee: in accordance with W.S. 1-1-115

(g) Verification Fee: \$30.00 payable by cashier's check or money order only.

(h) Background Check Fee \$39.00 - required with initial application and renewal every 4 years.

(i) NPDB Fee \$4.00 - required with initial application and each renewal.

**Section 2. Refunds.** All fees collected by the Board are non-refundable.

**Section 3. Applications Unaccompanied by Fees.** No application shall be considered by the Board unless accompanied by ~~the application fee~~ all fees.

**Section 4. Duplicate or Replacement Certificate and Pocket Card.** Duplicate or replacement wall certificates and pocket cards may be issued by the Board. All requests for duplicate or replacement certificates shall be in writing and shall be accompanied by a \$20.00 fee for each duplicate or replacement. All requests for duplicate or replacement pocket cards shall be in writing and shall be accompanied by a \$10.00 fee for each duplicate or replacement.

**Section 5. Requests for Roster of Licensees and Certificate Holders.** The roster of current licensees and certificate holders shall be updated at least annually and made available electronically at no charge.



## Chapter 14

### Renewal

**Section 1. Statement of Purpose.** These Board rules are adopted to implement the Board's authority to establish and enforce the requirements for applications for renewal, relicensure, and reinstatement of licenses.

**Section 2. Definitions.** Terms used in this section are defined as follows:

- (a) "Applicant" means a licensee or former licensee.
- (b) "ARC" means Application Review Committee which shall be comprised of one (1) or two (2) Board members or other individuals with assistance from a representative of the Attorney General's Office.
- (c) ~~"Contact hour" means the actual number of hours during which instruction was received. A contact hour shall consist of not less than fifty (50) minutes of actual instruction or presentation. For academic courses, one (1) semester credit equals fifteen (15) contact hours. One (1) quarter credit equals ten (10) contact hours.~~
- (~~c~~d) "CE" means continuing education contact hours used to complete coursework or classes that have significant intellectual or practical content, and the primary objective shall be to increase the participant's competence within each licensed or certified discipline. The scope of practice for each discipline in these rules and regulations shall be used as a basis of what knowledge and skills are acceptable to the Board as continuing education activities.
- (~~d~~e) "License" means a license or certificate.

**Section 3. Renewal of License.**

- (a) Initial Licensure. An initial license shall be valid for a minimum of two (2) years and shall expire on the licensee's birthday immediately following that two (2) year period. If the licensee desires to continue to practice, the licensee shall seek renewal of their license.
- (b) Renewal Period and Expiration Date. A renewed license shall be valid for two (2) years. A license shall expire on a licensee's birthday at the end of that renewal period.
- (c) Renewal Procedure. A licensee shall seek renewal every two (2) years on or before their birthday. A licensee seeking renewal shall submit:
  - (i) A completed renewal application and payment of fee; and
  - (ii) Evidence of completion of forty-five (45) contact hours of CE that comply with Section 4.

(d) Renewal applications shall not be accepted if:

(i) Submitted more than one hundred twenty (120) days prior to the expiration date;

(ii) Received by the Board office which are postmarked after the expiration date or after the next business day in cases when the expiration date falls on a weekend or holiday; or

(iii) Electronically submitted after 11:59 p.m. on the expiration date.

(e) Fingerprints. Beginning July 1, 2021 applicants shall submit fingerprints and other information necessary for a criminal history record background check as required by Wyoming Statute 33-38-105(j) (2).

(f) The applicant acknowledges through submission of an application and fee the Board may perform an ongoing query of their licensure through the National Practitioners Data Base.

(eg) Failure to Timely Renew. If a licensee fails to timely renew their license, then the license shall expire and the licensee shall not practice until appropriately licensed.

#### **Section 4. Continuing Education Requirements.**

(a) Renewal Period. CE shall be obtained during the current renewal period.

(b) Specific CE Requirements.

(i) Licensees shall complete at least three (3) contact hours of CE activities in each of the following:

(A) Professional ethics; and

(B) Suicide assessment or intervention.

~~(I) — The requirement for suicide assessment or intervention shall not apply to renewals submitted prior to January 1, 2020.~~

(c) A licensee holding a LAT, CAP, or CAPA license shall complete at least fifteen (15) contact hours of CE in additions specific topics.

(d) Earning CE. CE may be earned as follows:

(i) Successful completion of college courses;

- (ii) Successful completion of continuing education classes or online courses;
- (iii) CE credit will be allowed for presenting at venues designed to increase other mental health professionals' knowledge base.
  - (A) One (1) hour of credit shall be allowed for each hour of presentation, up to a maximum of six (6) hours during each renewal period. Credit may be received only once for a particular presentation topic;
  - (B) Licensees employed by universities and colleges may not claim credit units for conducting courses that are a part of the regular course offering of those institutions, even if those courses are offered in the evening or summer, or for individuals enrolled in a degree program or vocational or technical schools; and
- (iv) Attending a meeting of the Board. One (1) hour of credit will be allowed for each hour of attendance, up to a maximum of three (3) contact hours of CE during the renewal period.
- (e) Record Keeping. Licensees and certificate holders shall be responsible for maintaining records used to support continuing education claimed on an application for two (2) years from the date of submitted for renewal. Copies shall be requested by the Board if the licensee is randomly selected for audit.
  - (i) Licensees shall maintain records used to support CE claimed on a renewal application for two (2) years. A licensee shall provide documentation upon request of the Board.
  - (ii) Proof of attendance shall contain the activity title, dates, contact hours attended, presenter, the name of the licensee, and shall be signed by the sponsor or the presenter.
- (f) Compliance and Application Review Committee Review of Continuing Education.
  - (i) Every application shall be subject to audit verification for CE compliance. The ARC shall review an applicant's claimed CE and documentation.
  - (ii) The ARC shall send a Notice of Deficiency to an applicant if:
    - (A) An applicant is unable to provide satisfactory documentary evidence of compliance with this section, or
    - (B) ARC does not approve CE units or credits claimed by the applicant.
    - (iii) Within thirty (30) days from the date of the Notice of Deficiency, the applicant shall submit:
      - (A) Satisfactory documentary evidence of CE to correct the deficiency;

or

(B) A written request for the Board to review the ARC's denial of claimed CE units or credits.

(iv) If the applicant does not provide satisfactory documentary evidence or request Board review, the application shall be dismissed.

(v) CE earned and submitted in response to the Notice of Deficiency shall not be used to demonstrate competency in the next renewal.

(g) Exemptions. An applicant may seek an exemption from all or part of the CE requirements. The applicant shall submit a petition to the Board demonstrating just cause for exemption. Just cause may include:

(i) Being called to active duty in the armed forces of the United States for a period of time exceeding one hundred and eighty (180) or more consecutive days in any calendar year; or

(ii) Experiencing a physical disability, illness or other disabling situation exceeding one hundred and eighty (180) or more consecutive days in any calendar year.

(iii) The number of hours exempted shall be in proportion to the length of deployment, disability or situation.

## **Section 5. Retired Status.**

(a) Eligibility. A licensee may seek retired status if they are no longer receiving any remuneration from providing any of the services regulated by this Act.

(b) Application Procedure. A licensee seeking retired status shall submit a completed retirement application and pay for a replacement wall certificate.

(c) CE Exemption. While a license is retired, the licensee shall be exempt from the CE requirement for renewal of the license.

(d) Wall Certificate. A replacement wall certificate shall be issued identifying the licensee as retired. The licensee shall return the original wall certificate to the Board Office.

(e) Fingerprints. Beginning July 1, 2021 applicants shall submit fingerprints and other information necessary for a criminal history record background check as required by W.S. 33-38-105(j) (2).

(f) The applicant acknowledges through submission of an application and fee the Board may perform an ongoing query of their licensure through the National Practitioners Data Base.

(ge) Reactivation. A retired licensee may return to active practice by completing forty-five (45) contact hours of CE within the two (2) years immediately preceding re-application, submitting a professional disclosure statement, and paying the full renewal fee for the remainder of the current license period.

## **Section 6. Relicensure.**

(a) Eligibility. An applicant may seek relicensure if the application failed to timely renew their license or allowed the license to expire and has not held an active license in another jurisdiction.

(b) Relicensure Procedure. An applicant seeking relicensure shall submit:

(i) Completed relicensure application and payment of fees; and

(ii) Evidence of completion of forty-five (45) contact hours of CE that comply with Section 4 within the two (2) years immediately preceding the application for relicensure; or

(iii) If the license has been expired for more than five (5) years, then applicant shall retake and successfully pass the proper examination.

(iv) Fingerprints and other information necessary for a criminal history record background check as required by W.S. 7-19-201(a)(xxx).

(v) The applicant acknowledges through submission of an application and fee the Board may perform an ongoing query of their licensure through the National Practitioners Data Base.

~~(e) — Certified Mental Health Workers shall not be eligible for relicensure.~~

## **Section 7. Reinstatement.**

(a) Eligibility. An applicant may seek reinstatement if the license has been revoked, surrendered, suspended, conditioned, or restricted.

(b) Reinstatement Procedure. An applicant seeking reinstatement shall submit:

(i) A completed reinstatement applicant and payment of fees;

(ii) Evidence of meeting requirements of the previous Board's order or correcting the conduct underlying the Board's order that demonstrates the applicant's ability to safely, skillfully, and competently practice; and

(iii) Evidence of completion of twenty (20) contact hours of CE that comply

with Section 4 for each year since the applicant's last renewal, if applicable.

## Chapter 15

### Professional Responsibility

**Section 1. Ethical Standards.** The Board hereby incorporates into these rules by reference the following ethical standards of the professional organization representing each discipline:

(a) The Association for Addiction Professionals (National Association for Alcoholism and Drug Abuse Counselors (NAADAC)) “Code of Ethics”, adopted by the Association for Addiction Professionals and effective on ~~October 9, 2016~~ January 1, 2021, found at: [mentalhealth.wyo.gov](http://mentalhealth.wyo.gov)

(b) National Association of Social Workers (NASW) “Code of Ethics”, adopted by the NASW Delegate Assembly and effective August 4, 2017, found at: [mentalhealth.wyo.gov](http://mentalhealth.wyo.gov)

(c) American Association of Marriage and Family Therapy (AAMFT) “Code of Ethics”, adopted by the American Association of Marriage and Family Therapy and effective on January 1, 2015, found at: [mentalhealth.wyo.gov](http://mentalhealth.wyo.gov)

(d) American Counseling Association (ACA) “Code of Ethics”, adopted by the ACA Governing Council and effective on March 26, 2014, found at: [mentalhealth.wyo.gov](http://mentalhealth.wyo.gov)

(e) For these rules incorporated by reference:

(i) The Board has determined that incorporation of the full text in these rules would be cumbersome or inefficient given the length or nature of the rules;

(ii) The incorporation by reference does not include any later amendments or editions of the incorporated matter beyond the applicable date identified in subsection (a), (b), (c), and (d) of this section; and

(iii) The incorporated rules are maintained at the Board’s office and are available for public inspection at the same location.

(f) Where the Codes of Ethics and Professional Standards of the professional organizations conflict with the Act and/or these rules, the Act and rules shall control.

(g) Persons licensed or certified by the Board shall:

(i) Practice in a manner that is in the best interest of the public and does not endanger the public health, safety or welfare.

(ii) Be able to justify all services rendered to clients as necessary for diagnostic or therapeutic purposes.

(iii) Practice only within the competency areas for which they are trained and experienced. The licensee or certificate holder must be able to demonstrate to the Board competency, training, and/or expertise should their ability to practice in a specialty area be called into question.

(iv) Report to the Board known or suspected violations of the laws and regulations governing the practice of licensed or certified professionals.

(v) Treat colleagues with respect and should represent accurately and fairly the qualifications, views and obligations of colleagues.

(vi) Avoid unwarranted criticism of colleagues in communications with clients or with other professionals. Unwarranted negative criticism may include demeaning comments that refer to colleagues' level of competency or to individuals attributes such as race, ethnicity, national origin, color, sex, sexual or gender orientation, age, marital status, political belief, religion, and mental or physical disability.

(vii) Not take advantage of a dispute between a colleague and an employer to obtain a position or otherwise advance their own interest.

(viii) Use only those educational credentials in association with their licensure or certification and practice as a professional that have been earned at an educational institution accredited by one of the regional or national institutional accrediting bodies recognized by the Council for Higher Education Accreditation (CHEA), and that are directly related to their licensed or certified discipline, and that are professional in nature, including, but not limited to M.Ed., M.A., M.S., M.S.S.W., M.S.W., D.S.W., Ph.D., and Ed.D., and shall include the designation of licensure as an LAT, LCSW, LMFT, LPC PPC, PMFT, PCSW, PAT, CSW, CAP, CAPA or CMHW.

(ix) Use only indicators of current discipline-related credentials earned such as Certified Rehabilitation Counselor and Certified Mental Health Counselor or such indicators as awarded by independent credentialing agencies such as the American Association for Marriage and Family Therapy, the National Board for Certified Counselors, Inc., the National Association of Alcohol and Drug Abuse Counselors, and the National Association of Social Workers in association with their licensure or certification and practice.

(x) Ensure that clients are aware of fees and billing arrangements before rendering services. Bartering is not an acceptable fee arrangement.

(xi) Provide clients with accurate and complete information regarding the extent and nature of services available to them.

(xii) Respect the privacy of clients and hold in confidence all information obtained in the course of professional service.



(xiii) Keep confidential their professional relationships with clients.

(xiv) Inform clients fully about the limits of confidentiality in a given situation, the purposes for which information is obtained and how it may be used.

(xv) Obtain proper consent prior to the provision of services.

~~(xvi)~~ Disclose the information contained in a client's record to the client or designated recipient within no more than thirty (30) days of receipt of an appropriate request for release of such information signed by the client, or an individual who is authorized to consent to treatment for the client. The paper, microfilm or data storage unit upon which the client's information is maintained belongs to the licensee or certificate holder or facility in which he/she practices. Clients do not have a right to possess the means by which the information is stored.

(A) Licensees or certificate holders may provide the client record or any portion in an accurate, detailed, comprehensive summary of the factual information contained in the complete record.

(B) The client record does not include a licensee's or certificate holder's personal office notes or personal communications between referring and consulting treatment providers relating to the client. A licensee or certificate holder may, however, include such notes and communications if appropriate.

(C) A licensee or certificate holder may refuse disclosure of client records in accord with W.S. 33-38-113 or as otherwise provided by law.

(D) If the licensee or certificate holder disclosing the client record believes, in good faith, that releasing any portion of the record would injure the health or well being of the client, a licensee or certificate holder may refuse disclosure of that portion of the record. In such instances, a licensee or certificate holder shall document the factual basis and rationale used in deciding against disclosure. A licensee or certificate holder may also deny access to client records if he/she reasonably concludes that access to the information requested is otherwise prohibited by law.

(E) A licensee or certificate holder may establish reasonable charges for the actual costs incurred in responding to a client's request for copies of any portion of a client's record. Such costs may include the cost of copies, clerical staff time and the licensee's or certificate holder's time in reviewing and summarizing the records and/or diagnostic records, if necessary. The client requesting records is responsible for payment of all such charges, however, a client shall not be denied a summary or a copy of requested client records because of inability to pay.

(F) A licensee or certificate holder may not withhold client records solely because payment has not been received for past services.

~~(xvii)~~ Maintain accurate documentation of all professional services

rendered to a client in confidential files for each client and ensure that client records are kept in a secure, safe, retrievable and legible condition.

(A) Each client record must be retained for a minimum of seven (7) years from the date of the last session.

(B) Records of treatment provided to minor clients must be retained for a minimum of seven (7) years from the date of the last session, or until the client reaches twenty-five (25) years of age, whichever is longer.

(C) A licensee in private practice shall make necessary arrangements for the maintenance of and access to client records to ensure clients' right to confidentiality in the event of the death or incapacity of the licensee.

(D) The licensee shall name a qualified person who will retain the client records and properly release the client records upon request.

~~(xviii)~~ Ensure that the welfare of clients is in no way compromised in any experimentation or research involving those clients which would include but not be limited to informed consent of the client.

~~(xix)~~ Refrain from conflictual dual relationships with clients and their family members that might compromise the client's well-being or impair the licensee's or certificate holder's objectivity and professional judgment including, but not limited to, familial, social, financial, business, or close personal relationships.

(xx) Refrain from conflictual dual relationships in supervision including, but not limited to, employing or supervising your DQCS.

(xxi) Refrain from self-employment when administrative supervision is required.

~~(xxii)~~ Refrain from engaging in romantic or sexual intimacies with a client or former client. Refrain from engaging in a therapeutic relationship with persons with whom they have had sexual or romantic intimacies.

~~(xxiii)~~ When advertising their services to the public, ensure that such advertising is neither fraudulent or misleading.

~~(xxiv)~~ Not practice discrimination on the basis of race, sex, age, religion, nation origin, marital status, sexual or gender orientation, or mental or physical handicap.

~~(xxv)~~ Clearly state the person's licensure or certification status by the use of a title or initials such as "licensed professional counselor" (LPC) or a statement such as "licensed by the Wyoming Mental Health Professions Licensing Board" in any advertising, public directory or solicitation, including telephone directory listings.

~~(xxiii)~~xxvi) Terminate services when such services are no longer required and no longer serve the client's needs. Services are not withdrawn precipitously except in unusual circumstances and with care to minimize possible adverse effects. This includes providing referral and transfer of services as appropriate.

~~(xxiv)~~xxvii) Avoid using relationships with clients to promote, for personal gain or the profit of an agency, commercial enterprises of any kind.

~~(xxv)~~xxviii) Seek advice and counsel of colleagues and supervisors when such consultation is in the best interest of the client while taking care to protect the client's confidentiality.

~~(xxvi)~~xxix) Respond to all requests for information and all other correspondence from the Board.

~~(xxvii)~~xxx) Conspicuously display a professional disclosure statement wherever their services are performed and provide a copy of the statement to each client before or during the first session and upon request. The professional disclosure statement shall contain the licensee's or certificate holder's name, title, business address and telephone number; listing of formal professional education with the name of the institution(s) attended and the specific degree(s) received; licensure or certification status; the ~~designated-qualified clinical supervisor's~~ DQCS's name, phone number and address; statement of confidentiality; a statement that sexual intimacy with a client is never appropriate; a statement that the professional will adhere to the professions' Code of Ethics; and a statement that the disclosure statement is required by the Mental Health Professions Licensing Act. It is recommended that the disclosure statement also contain areas of specialization, state of licensure or certification, license number, and address and phone number of the Mental Health Professions Licensing Board.

~~(xxviii)~~xxxi) Display their license or certification at all times in a conspicuous location readily accessible to all clients at the licensee's or certificate holder's place of business.

~~(xxix)~~xxxii) Ensure that they do not provide clinical supervision to persons holding a provisional license who have no intention of becoming fully licensed, or aid persons in obtaining a provisional license who have no intention of becoming fully licensed.

~~(xxx)~~xxxiii) Ensure that they do not provide clinical supervision to persons seeking certification or licensure who have not submitted an application to the Board.

~~(xxxi)~~xxxiv) Ensure that they do not supervise a provisional licensee or a certificate holder without a board approved supervision agreement.

~~(xxxii)~~xxxv) Not permit, condone or facilitate unlicensed practice or any activity which is a violation of the Act or these rules and regulations.

## **Chapter 16**

### **Adverse Action**

**Section 1. Board Authorization.** The Board is authorized to refuse to renew, or may deny, suspend, revoke or otherwise restrict the license or certification of any person violating provisions of the Act pursuant to W.S. 33-38-110.

**Section 2. Grounds.** The Board may take action for unprofessional or unethical conduct.

- (a) Unprofessional conduct shall include, but is not limited to:
  - (i) Willful violation of any provision of these Rules.
  - (ii) Suspension, revocation, denial, or other disciplinary action imposed upon a license or certification held in any jurisdiction. A certified copy of the disciplinary order shall be conclusive evidence.
  - (iii) Representation of oneself as legally authorized to engage in the practice of any profession regulated by the Act without a license or certification issued by this Board.
  - (iv) Conviction of a felony. A certified copy of the conviction shall be conclusive evidence.
  - (v) Conviction of a misdemeanor involving moral turpitude. A certified copy of the conviction shall be conclusive evidence.
  - (vi) Renting or lending the license or certification issued pursuant to this act to any person planning to use that license or certification;
  - (vii) Soliciting clients by any form of false or misleading communication.
  - (viii) Gross incompetence or malpractice.
  - (ix) Mental incompetency.
  - (x) Knowingly submitting false information to the Board.
  - (xi) Addiction or habitual intemperate use of alcohol, drugs and/or a controlled substance.

(xii) Violation and conviction of a charge under W.S. 35-7-1001 et. Seq, the Wyoming Controlled Substance Act.

(xiii) Sexual exploitation of a client, defined as:

(A) Offering professional services for some form of sexual gratification; or

(B) Sexual contact with a client.

(xiv) Willful violation of any provisions of this Act, W.S. 33-38-101, et. seq.

(xv) Violation of a Board Order.

(xvi) Practicing after the expiration of a license or certification.

(xvii) Failing to meet supervisory requirements.

(b) Unethical conduct shall be a violation of any provision of the adopted Professional Standards as set forth in these Rules.

## Chapter 18

### Supervision

#### **Section 1. The Practice of a Designated Qualified Clinical Supervisor (DQCS).**

The DQCS assumes professional and ethical responsibility and may be sanctioned by the Board for all acts and omissions of the supervisee within the scope of the supervision.

**Section 2. General Requirements for DQCS.** A DQCS shall meet the following requirements:

(a) The DQCS shall have been licensed for independent practice for a minimum of two (2) years prior to becoming a supervisor.

(b) The DQCS shall have had four (4) years of post-graduate professional experience in their discipline prior to providing supervision.

(c) The DQCS must be free from any disciplinary action brought against them by any jurisdiction, although exceptions to this requirement may be granted by the Board if consistent with the public interest.

(d) The DQCS shall have taken a graduate level course in clinical supervision or have at least 3 contact hours of CE in clinical supervision. If already approved as a supervisor by the Board, this educational requirement shall be fulfilled no later than during the current renewal period.

#### **Section 3. Role of a DQCS for all supervisee license types**

(a) The DQCS shall allow the supervisee to perform independently only those functions for which the supervisee has training and experience.

(b) The DQCS shall keep records verifying supervision, including the types of supervision provided and number of hours.

(c) The DQCS shall be identified on all reports and correspondence of a professional nature, excluding disciplinary correspondence with the Board.

(~~e~~) The DQCS ~~will take all necessary precautions to~~ shall avoid conflictual dual relationships in supervision.

(~~f~~e) The DQCS is readily available to give aid, direction, and instruction to any supervisee rendering clinical services pursuant to the Act.

**Section 4. Elements of Supervision.** The DQCS monitors the quality of services being offered to clients, facilitates the supervisee's learning and skill development, and endeavors to

enhance the professional growth of the supervisee within the discipline. In order to meet these objectives the content of supervision shall include:

- (a) A review of the supervisee's permissible scope of practice, as defined by the Act.
- (b) Discussion of case notes, charts, records and services provided. The review and discussion should evaluate the appropriateness of the services to clients and the supervisee's therapeutic skill.
- (c) Review and skill development of appropriate therapeutic interventions, treatment approaches, treatment planning and evidence based practices, within the supervisee's scope of practice.
- (d) Discussion on the standards of practice and ethical conduct, with particular emphasis given to the supervisee's role and appropriate responsibilities, professional boundaries, power dynamics; and termination of clinical relationships.

**Section 5. Requirement for Supervision.** Clinical practice shall not be permitted, until documentation of a DQCS has been provided to, and approved by, the Board and only under the clinical supervision of an approved ~~designated-qualified clinical supervisor~~ DQCS.

(a) Certified Addictions Practitioners, Certified Addictions Practitioner Assistants, Certified Mental Health Workers, Certified Social Workers and all provisionally licensed professionals may only provide services under the clinical supervision of a DQCS and under the administrative supervision of their employer.

(b) Individual, triadic face-to-face clinical supervision ~~and/or~~ or individual distance clinical supervision by a DQCS shall be provided monthly at a ratio of at least one (1) hour for every twenty (20) hours of direct clinical provision of services defined in this act.

(c) In the event of a change of the DQCS, the certificate holder shall notify the Board within ten (10) days in writing. The certificate holder shall not provide services until documentation of a ~~designated-qualified clinical supervisor~~ DQCS has been provided to, and approved by, the Board. A change in supervision requires a revised disclosure statement. The DQCS shall submit the Verification and Evaluation of Supervised Experience (VESE) form directly to the Board within thirty (30) days of the termination of supervision.

## **Section 6. Types of Supervision**

- (a) Individual Face-to-Face Clinical Supervision.
- (b) Triadic Face-to-Face Clinical Supervision.
- (c) Individual Distance Clinical Supervision.

(i) Supervision must be adequate to ensure the quality and competence of the

activities supervised and must comply with all other supervision requirements.

(d) Type of supervision must be documented in the supervisor verification process.

(e) Supervision of more than 2 supervisees simultaneously is not permitted to count towards the face-to-face supervision requirement.

**Section 67. Limits of Supervision.** DQCS must:

(a) Not provide clinical supervision to persons seeking certification or licensure who have not submitted an application to the Board;

(b) Not supervise a provisional licensee or a certificate holder without a board approved supervision agreement;

(c) Not provide supervision to more than (5) supervisees at one time, unless granted an exception in writing from the Board;

(d) Understand the Board may require an evaluation of the qualifications and roles of any designated qualified clinical supervisor and may approve or disapprove supervision at its discretion; and

(e) Understand that if they act as a DQCS without meeting the requirements of this chapter they are subject to discipline for unprofessional conduct.