

October 9, 2020  
VIRTUAL  
10:00 a.m.

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**Call to Order – Jaime H. Hoyle, JD, Executive Director, Boards of Counseling, Psychology, and Social Work**

- Welcome and Introductions
- Mission of the Board -----Page 2

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**Adoption of Bylaws\*** ---- Elaine Yeatts, Department of Health Professions, Sr. Policy Analyst and Regulatory Coordinator

- Statutory Authority to Regulate Art Therapists and Art Therapy Associates -----Page 3
- Statutory Authority for the Advisory Board on Art Therapy; membership; terms-----Page 3
- Example of Board of Counseling Bylaws-----Page 5
- Example of Advisory Board on Massage Therapy Bylaws-----Page 12
- Draft Bylaws on Advisory Board on Art Therapy\*-----Page 14

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**Election of Officers\*** ---- Jaime Hoyle

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**Public Comment**

*The Committee will not receive comment on any pending regulation process for which a public comment period has closed or any pending or closed complaint or disciplinary matter.*

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**New Business**

- Adoption of Regulations Governing the Practice of Art Therapy\* --- Elaine Yeatts
  - Study into the Need to Regulate Art Therapists----- Page 16
  - American Art Therapy Association: Recommended Legislative Provisions for Defining Art Therapy and the Scope of Practice of Art Therapy in State Licensure Bills-----Page 23
  - Regulations Governing the Practice of Professional Counseling-----Page 27

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**Next Meeting**

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**Meeting Adjournment**

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*\*Requires a Committee Vote*

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



Virginia Department of  
**Health Professions**  
Board of Counseling

## **MISSION STATEMENT**

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Our mission is to ensure safe and competent patient care by licensing health professionals, enforcing standards of practice, and providing information to health care practitioners and the public.

Code of Virginia  
Title 54.1. Professions and Occupations

### Article 3. Art Therapists.

#### **§ 54.1-3516. Art therapist and art therapy associate; licensure.**

A. No person shall engage in the practice of art therapy or hold himself out or otherwise represent himself as an art therapist or art therapy associate unless he is licensed by the Board. Nothing in this chapter shall prohibit a person licensed, certified, or registered by a health regulatory board from using the modalities of art media if such modalities are within his scope of practice.

B. The Board shall adopt regulations governing the practice of art therapy, upon consultation with the Advisory Board on Art Therapy established in § 54.1-3517. Such regulations shall (i) set forth the requirements for licensure as an art therapist or art therapy associate, (ii) provide for appropriate application and renewal fees, and (iii) include requirements for licensure renewal and continuing education.

C. In the adoption of regulations for licensure, the Board shall consider requirements for registration as a Registered Art Therapist (ATR) and certification as a Board Certified Art Therapist (ATR-BC) with the Art Therapy Credentials Board and successful completion of the Registered Art Therapist Board Certified Art Therapist examination.

D. A license issued for an art therapy associate shall be valid for a period of five years. At the end of the five-year period, an art therapy associate who has not met the requirements for licensure as an art therapist may submit an application for extension of licensure as an art therapy associate to the Board. Such application shall include (i) a plan for completing the requirements to obtain licensure as an art therapist, (ii) documentation of compliance with the continuing education requirements, (iii) documentation of compliance with requirements related to supervision, and (iv) a letter of recommendation from the clinical supervisor of record. An extension of a license as an art therapy associate pursuant to this subsection shall be valid for a period of two years and shall not be renewable.

2020, c. 301.

#### **§ 54.1-3517. Advisory Board on Art Therapy; membership; terms.**

A. The Advisory Board on Art Therapy (the Advisory Board) is hereby established to assist the Board in formulating regulations related to the practice of art therapy. The Advisory Board shall also assist in such other matters relating to the practice of art therapy as the Board may require.

B. The Advisory Board shall have a total membership of five nonlegislative citizen members to be appointed by the Governor as follows: three members shall be licensed art therapists, one member shall be a licensed health care provider other than an art therapist, and one member shall be a citizen at large.

C. After the initial staggering of terms, members shall be appointed for a term of four years. Appointments to fill vacancies, other than by expiration of a term, shall be for the unexpired

terms. All members may be reappointed. However, no member shall serve more than two consecutive four-year terms. The remainder of any term to which a member is appointed to fill a vacancy shall not constitute a term in determining the member's eligibility for reappointment. Vacancies shall be filled in the same manner as the original appointments.

2020, c. 301.

# VIRGINIA BOARD OF COUNSELING BYLAWS

## ARTICLE I: AUTHORIZATION

### **A. Statutory Authority**

The Virginia Board of Counseling ("Board") is established and operates pursuant to §§ 54.1-2400 and 54.1-3500, et seq., of the *Code of Virginia*. Regulations promulgated by the Virginia Board of Counseling may be found in 18VAC115-20-10 et seq., Regulations Governing the Practice of Professional Counseling; 18 VAC 115-30-10 et seq., "Regulations Governing the Certification of Substance Abuse Counselors and Substance Abuse Counseling Assistants"; 18VAC115-40-10 et seq., "Regulations Governing the Certification of Rehabilitation Providers"; 18VAC115-50-10 et seq., "Regulations Governing the Practice of Marriage and Family Therapy"; 18VAC115-60-10 et seq., "Regulations Governing the Practice of Substance Abuse Treatment Practitioners", 18VAC115-80-10 et seq., "Emergency Regulations Governing the Practice of Qualified Mental Health Professionals (QMHP), and 18VAC115-70-10 et seq., "Emergency Regulations Governing the Practice of Registered Peer Recovery Specialists".

### **B. Duties**

The Virginia Board of Counseling is charged with promulgating and enforcing regulations governing the licensure and practice of professional counselors, marriage and family therapists, and substance abuse treatment practitioners, and the certification and practice of substance abuse counselors and rehabilitation providers in the Commonwealth of Virginia, and the registration of qualified mental health professionals and registered peer recovery specialists. This includes, but is not limited to: setting fees; creating requirements for and issuing licenses, certificates, or registrations; setting standards of practice; and implementing a system of disciplinary action.

### **C. Mission**

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

## ARTICLE II: THE BOARD

### **A. Membership**

1. The Board shall consist of twelve (12) members, appointed by the Governor as follows:
  - a. Ten (10) professionals licensed in Virginia, who shall represent the various specialties recognized in the profession. The licensed professionals shall be
    - i. Six (6) licensed professional counselors
    - ii. Three (3) licensed marriage and family therapists, and

- iii. One (1) licensed substance abuse treatment practitioner
  - b. Two (2) shall be citizen members.
2. The terms of the members of the Board shall be four (4) years.
3. Members of the Board of Counseling holding a voting office in any related professional association or one that takes a policy position on the regulations of the Board shall abstain from voting on issues where there may be a conflict of interest present.

#### **B. Officers**

1. The Chairperson or designee shall preserve order and conduct all proceedings according to parliamentary rules, the Virginia Freedom of Information Act, and the Administrative Process Act. Roberts Rules of Order will guide parliamentary procedure for the meetings. Except where specifically provided otherwise by the law or as otherwise ordered by the Board, the Chairperson shall appoint all committees, and shall sign as Chairperson to the certificates authorized to be signed by the Chairperson.
2. The Vice-Chairperson shall act as Chairperson in the absence of the Chairperson and assume the duties of Chairperson in the event of an unexpired term.
3. In the absences of the Chairperson and Vice-Chairperson, the Chairperson shall appoint another board member to preside at the meeting and/or formal administrative hearing.

#### **C. Duties of Members**

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

#### **D. Election of Officers**

1. All officers shall be elected for a term of two (2) years and may serve no more than two (2) consecutive terms.

2. The election of officers shall occur at the first scheduled Board meeting following July 1 of each odd year, and elected officers shall assume their duties at the end of the meeting.
  - a. Officers shall be elected at a meeting of the Board with a quorum present.
  - b. The Chairperson shall ask for nominations from the floor by office.
  - c. Voting shall be by voice unless otherwise decided by a vote of the members present. The results shall be recorded in the minutes.
  - d. A simple majority shall prevail with the current Chairperson casting a vote only to break a tie.
  - e. Special elections to fill an unexpired term shall be held in the event of a vacancy of an officer at the subsequent Board meeting following the occurrence of an office being vacated.
  - f. The election shall occur in the following order: Chairperson, Vice-Chairperson.

#### **E. Meetings**

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

### **ARTICLE III: COMMITTEES**

#### **A. Duties and Frequency of Meetings.**

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

#### **B. Standing Committees**

Standing committees of the Board shall consist of the following:

Regulatory/Legislative Committee  
Special Conference Committee  
Credentials Committee  
Any other Standing Committees created by the Board.

##### 1. Regulatory/Legislative Committee

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

##### 2. Special Conference Committee

- a. The Special Conference Committee shall:
  - i. consist of two (2) Board members.
  - ii. conduct informal conferences pursuant to §§ 2.2-4019, 2.2-4021, and 54.1-2400 of the Code of Virginia as necessary to adjudicate cases in a timely manner in accordance with the agency standards for case resolution.





4. The Board delegates to the Executive Director the authority to grant an accommodation of additional testing time or other requests for accommodation to candidates for Board-required examinations pursuant to the Americans with Disabilities Act, provided the candidate provide documentation that supports such an accommodation.
5. The Board delegates to the Executive Director authority to grant an extension for good cause of up to one (1) year for the completion of continuing education requirements upon written request from the licensee or certificate holder prior to the renewal date.
6. The Board delegates to the Executive Director authority to grant an exemption for all or part of the continuing education requirements due to circumstances beyond the control of the licensee or certificate holder, such as temporary disability, mandatory military service, or officially declared disasters.
7. The Board delegates to the Executive Director the authority to reinstate a license or certificate when the reinstatement is due to the lapse of the license or certificate rather than a disciplinary action and there is no basis upon which the Board could refuse to reinstate.
8. The Board delegates to the Executive Director the authority to sign as entered any Order or Consent Order resulting from the disciplinary process or other administrative proceeding.
9. The Board delegates to the Executive Director the authority to enter a Pre-Hearing Consent Order for Indefinite Suspension or revocation of a license, certificate, or registration.
10. The Board delegates to the Executive Director, who may consult with a Special Conference Committee member, the authority to provide guidance to the agency's Enforcement Division in situations wherein a complaint is of questionable jurisdiction and an investigation may not be necessary.
11. The Board delegates authority to the Executive Director to close non-jurisdictional cases and fee dispute cases without review by a Board member.
12. The Board delegates to the Executive Director the authority to determine if there is probable cause to initiate proceedings or action on behalf of the Board of Counseling, including the authority to close a case if staff determines probable cause does not exist, the conduct does not rise to the level of disciplinary action by the Board, or the Board does not have jurisdiction.
13. The Board delegates to the Executive Director the authority to review alleged violations of law or regulations with a Special Conference Committee member to make a determination as to whether probable cause exists to proceed with possible disciplinary action.

14. The Board delegates to the Executive Director the authority to assign the determination of probable cause for disciplinary action to a board member, or the staff counseling review coordinator in consultation with board staff, who may offer a confidential consent agreement, offer a pre-hearing consent order, cause the scheduling of an informal conference, request additional information, or close the case.
15. In accordance with established Board guidance documents, the Board delegates to the Executive Director the determination of probable cause, for the purpose of offering a confidential consent agreement, a pre-hearing consent order, or for scheduling an informal conference.
16. The Board delegates to the Executive Director the selection of the agency subordinate who is deemed appropriately qualified to conduct a proceeding based on the qualifications of the subordinate and the type of case being convened.
17. The Board delegates to the Executive Director the convening of a quorum of the Board by telephone conference call, for the purpose of considering the summary suspension of a license or for the purpose of considering settlement proposals.
18. The Board delegates to the Chairperson, the authority to represent the Board in instances where Board "consultation" or "review" may be requested where a vote of the Board is not required and a meeting is not feasible.
19. The Board delegates authority to the Executive Director to issue an Advisory Letter to the person who is the subject of a complaint pursuant to Virginia Code § 54.1-2400.2(F), when it is determined that a probable cause review indicates a disciplinary proceeding will not be instituted.
20. The Board delegates authority to the Executive Director to delegate tasks to the Deputy Executive Director, as necessary.

#### **ARTICLE V: AMENDMENTS**

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

Adopted: June 3, 2005

Revised: November 5, 2013; January 27, 2017; November 3, 2017; May 18, 2018

**BYLAWS**

**THE ADVISORY BOARD ON MASSAGE THERAPY  
VIRGINIA BOARD OF NURSING**

**Article I - Members of the Advisory Board**

The appointments and limitations of service of the members shall be in accordance with Section 54.1-3029.1 of the Code of Virginia.

**Article II - Officers**

Section 1. Titles of Officers - The officers of the advisory board shall consist of a chairman and a vice-chairman elected by the advisory board. The Deputy Executive Director of the Board of Nursing shall serve in an advisory capacity.

Section 2. Terms of Office - The chairman and the vice-chairman shall serve for a one-year term and may not serve for more than two consecutive terms in each office. The election of officers shall take place at the first meeting after July 1, and officers shall assume their duties immediately thereafter.

Section 3. Duties of Officers.

a. Chairman

- (1) The chairman shall preside at all meetings when present, make such suggestions as he may deem calculated to promote and facilitate its work, and discharge all other duties pertaining by law or by resolution of the advisory board. The chairman shall preserve order and conduct all proceedings according to and by parliamentary rules and demand conformity thereto on the part of the members.
- (2) The chairman shall appoint members of all committees as needed.
- (3) The chairman shall act as liaison between the advisory board and the Board of Nursing on matters pertaining to certification, discipline, legislation and regulation of massage therapy.

b. Vice-Chairman

The vice-chairman shall preside at meetings in the absence of the chairman and shall take over the other duties of the chairman as may be made necessary by the absence of the chairman.

### **Article III - Meetings**

Section 1. There shall be at least one meeting each year in order to elect the chairman and vice-chairman and to conduct such business as may be deemed necessary by the advisory board.

Section 2. Quorum - Three members shall constitute a quorum for transacting business.

Section 3. Order of the Agenda - The order of the agenda may be changed at any meeting by a majority vote.

### **Article IV - Amendments**

Amendments to these bylaws may be proposed by presenting the amendments in writing to all advisory board members prior to any scheduled advisory board meeting. If the proposed amendment receives a majority vote of the members present at that regular meeting, it shall be presented for consideration and vote to the Board of Nursing at its next regular meeting.

**BYLAWS**

**THE ADVISORY BOARD ON ART THERAPY  
VIRGINIA BOARD OF COUNSELING**

**Article I - Members of the Advisory Board**

The appointments and limitations of service of the members shall be in accordance with Section 54.1-3029.1 of the Code of Virginia.

**Article II - Officers**

Section 1. Titles of Officers - The officers of the advisory board shall consist of a chairman and a vice-chairman elected by the advisory board.

Section 2. Terms of Office - The chairman and the vice-chairman shall serve for a one-year term and may not serve for more than two consecutive terms in each office. The election of officers shall take place at the first meeting after July 1, and officers shall assume their duties immediately thereafter.

Section 3. Duties of Officers.

a. Chairman

- (1) The chairman shall preside at all meetings when present, make such suggestions as he may deem calculated to promote and facilitate its work, and discharge all other duties pertaining by law or by resolution of the advisory board. The chairman shall preserve order and conduct all proceedings according to and by parliamentary rules and demand conformity thereto on the part of the members.
- (2) The chairman shall appoint members of all committees as needed.
- (3) The chairman shall act as liaison between the advisory board and the Board of Counseling on matters pertaining to certification, discipline, legislation and regulation of art therapy.

b. Vice-Chairman

The vice-chairman shall preside at meetings in the absence of the chairman and shall take over the other duties of the chairman as may be made necessary by the absence of the chairman.

### **Article III - Meetings**

Section 1. There shall be at least one meeting each year in order to elect the chairman and vice-chairman and to conduct such business as may be deemed necessary by the advisory board.

Section 2. Quorum - Three members shall constitute a quorum for transacting business.

Section 3. Order of the Agenda - The order of the agenda may be changed at any meeting by a majority vote.

### **Article IV - Amendments**

Amendments to these bylaws may be proposed by presenting the amendments in writing to all advisory board members prior to any scheduled advisory board meeting. If the proposed amendment receives a majority vote of the members present at that regular meeting, it shall be presented for consideration and vote to the Board of Counseling at its next regular meeting.

**THE VIRGINIA BOARD OF HEALTH PROFESSIONS  
THE VIRGINIA DEPARTMENT OF HEALTH PROFESSIONS**

**Study into the Need to Regulate Art Therapists  
in the Commonwealth of Virginia**

**August 2018**

**Virginia Board of Health Professions  
9960 Mayland Dr, Suite 300  
Richmond, VA 23233-1463  
(804) 367-4403**



# EXECUTIVE SUMMARY

## Authority & Background:

Section 54.1-2510 of the *Code of Virginia* authorizes the Virginia Board of Health Profession to advise the Governor, General Assembly, and Director of the Department of Health Professions on matters pertaining to the regulation of health professions and occupations and scope of practice issues. The Board conducted this study into the feasibility of licensing Art Therapists on behalf of the Virginia Art Therapy Association.

The review was guided by the principles, evaluative criteria, and research methods set forth in the Board's standard policies and procedures for evaluating the need for regulation of health occupations and professions. It examined Art Therapist education, training, competency examination and continuing competency requirements, typical duties and functions, regulation in other U.S. jurisdictions, available workforce data, and the potential impact on existing behavioral health professions regulated in Virginia: Licensed Professional Counselors and Licensed Marriage and Family Therapists.

## Major Findings

1. Art therapy is an integrative mental health and human services profession. Art therapists are educated in psychotherapeutic principles as specifically trained in the use of art media to provide counseling to individuals, families and groups.
2. Art therapy is categorically different than "art in therapy." Art in therapy is a therapeutic modality leveraging the creative process as a growth-producing experience.
3. Art therapy practices pose an inherent risk of harm to the patient. Individuals practicing art therapy without the proper skills, level education, supervision and ethical standards pose a risk, especially to vulnerable patients who may have difficulty with verbal communication.
4. Art therapists practice autonomously as well as under supervision.
5. Art therapists are educated at the master's degree level and must sit for a national board certification exam to obtain the Registered Art Therapist (ATR) credential.
6. Seven (7) states license art therapists as a distinct profession; five (5) states provide for licensure of art therapists under a related profession's license; and four (4) state recognize art therapists to enable state hiring and/or to provide title protection.
7. The number of art therapists in Virginia is undetermined at this time.
8. There is a need for art therapists in Virginia.

## Recommendation:

At its August 23, 2018 meeting, the Regulatory Research Committee recommended licensure for art therapists, citing the following rationale:

- The unregulated practice of the profession poses the potential for significant harm to the public especially in consideration of the vulnerability of the patients the profession serves.
- Specialized skills and training exist to distinguish the profession. The profession now requires master's degree level education and training through accredited programs, such as those at Eastern Virginia Medical School and George Washington University in Virginia. Art therapist required coursework includes

diagnostic as well as treatment aspects of care. Additionally, the profession has a psychometrically sound, national examination used to assess professional competency.

- Art therapists practice autonomously as well as within teams.
- The profession's scope of practice is defined with sufficient specificity even though other behavioral health professions employ some of the same tools and modalities. State licensure and regulations would assure the public of professional practice standards and a clearer understanding of what constitutes formal art therapy.
- The economic impact to the public of licensure costs will be small. The increase in Virginia's supply of art therapist practitioners would likely result from removal of the current barrier to practice which *also* requires licensure as a Licensed Professional Counselor, Licensed Marriage and Family Therapist, or similar profession.
- Lack of standalone licensure has restricted the potential supply of these mental health professionals in Virginia. Comment revealed that students and graduates of George Washington University and Eastern Virginia Medical School art therapy programs feel driven to look to other states where art therapist licensure without the additional burden of obtaining licensure as *another* profession exists.
- No alternatives to licensure were deemed commensurate with the public's protection.

liable for improper conduct or unethical practice as no standards have been established for this unlicensed profession. Art therapist currently follow the Code of Ethics (Appendix 3) established by the ATCB.

Section 1.1.6 of the Code of Ethics prohibit engaging in therapy practices or procedures beyond scope of practice<sup>1</sup>, experience, training, and experience. Patients requiring services outside of this scope are referred out to seek the services of another provider. Referral to see an art therapist might come from another health practitioner, such as a doctor. Children’s Hospital of Richmond at VCU provides art therapy to young patients as a creative outlet to help them express their emotions and cope with the pain and stress of treatment. VCU understands the healing value of art and artistic traditions and how art therapists are able to apply their special knowledge of human development and psychology, clinical practice, and spiritual and cultural customs, to help children and their families deal with the impact of complex medical conditions on their lives. (Children’s Hospital, 2018)

## CREDENTIALING

The ATCB develops and administers board certification exams for art therapists who have met the education and supervision requirements to become credentialed as a Registered Art Therapist (ATR). The exam covers the following domains: Administrative and Therapeutic Environments, Initial Interview and Evaluation Assessment, Art Therapy Treatment and Services, Professional Practice and Ethics, and Theory and Therapeutic Applications. This exam is psychometrically sound and administered at locations across the United States four times each year.

To maintain ATCB certification art therapists must complete a yearly minimum of 20 continuing education (CE) credits, during a five (5) year recertification cycle, equivalent to 100 hours of approved continuing education during the recertification cycle. Six of these credits must be in ethics during each cycle. CE audits are performed on 10 percent of those applying for recertification.

ATCB credentialing allows for easy recognition of individuals who are Master’s degree trained and qualified to practice art therapy.

<sup>1</sup> “Scope of practice” is a term, which generally references specific state statutes, which describe the permissible activities of the regulated occupation or profession.

## Credentials - National Level

Credential	Description
Provisional Registered Art Therapist (ATR-Provisional)	Individuals who have completed a degree (or education requirements for the ATR-Provisional) and are engaged in a supervisory relationship with a qualified supervisor(s). The ATR-Provisional is not a required credential to apply for the ATR.
Registered Art Therapist (ATR)	Individuals who meet established standards, with successful completion of advanced specific graduate-level education in art therapy and supervised, post-graduate art therapy experience.
Board Certification (ATR-BC)	Individuals who complete the highest-level art therapy credential by passing a national examination, demonstrating comprehensive knowledge of the theories and clinical skills used in art therapy.
Art Therapy Certified Supervisor (ATCS)	Experienced Board Certified Art Therapists who provide clinical supervision and have acquired specific training and skills in clinical supervision.

\*AATA Credentials and Licensure

## EDUCATION

Education to practice as an art therapist requires a minimum of a master's degree in a program accredited by the AATA's Educational Programs Approval Board (EPAB). After obtaining the necessary education, 1,000 hours of post-graduate clinical experience under the supervision of a credentialed art therapist is required. Private, national certification is available from an independent certification board.

Educational training in psychopathology with children, adolescents and adults provide the art therapist the ability to learn the criteria for psychiatric diagnoses, allowing them to recognize behavioral and art indicators of functional and organic disorders. Practice includes the application of art therapy principles and methods in diagnosis, prevention, treatment and amelioration of psychological problems and emotions. They often work in team settings that allow them to contribute to collective diagnosis and treatment plans. Treatment plans are designed and implemented based on the art therapists level of training and the practice setting.

Art therapists must undergo individual and group supervised training as part of their education. The ATCB requires that students complete 100 hours of supervised practicum, and 600 hours of supervised art therapy clinical internship to obtain their degree. Credentialing as a registered art therapist (ATR) requires 1,000 hours (if individual graduated from an AATA/EPAB), or 1,500 hours (if individual graduated from a non-approved art

therapy program) of direct contact practice supervised by a credentialed art therapist, another licensed mental health provider or an Art Therapy Certified Supervisor (ATCS), 100 hours of which half must be supervised by an ATCS or an ATR-BC credentialed supervisor. While under supervision, the facility in which they are obtaining supervision is legally accountable and held liable for the supervisee's actions. Supervision practice agreements follow the ATCB Code of Ethics, Conduct and Disciplinary Procedures established policy.

The American Art Therapy Association (AATA), Inc., offers program and curriculum standards for each Master's degree program. All AATA programs must be approved by the AATA Education Program Approval Board (EPAB). There are two AATA EPAB approved art therapy Master's degree programs in Virginia:

- George Washington University's Columbian College of Arts and Sciences' Art Therapy Master's Degree Program in Alexandria, Virginia offers three (3) options: a Master's in Art Therapy (with a thesis option); a Master's in Art Therapy Practice; and a combined Bachelor of Arts/Masters of Arts in Art Therapy, enrolling approximately 20 students per year (George Washington University, 2017); and
- Eastern Virginia Medical Schools Art Therapy & Counseling Program in Norfolk, Virginia, a Post Master's program (Appendix 1) 2016-2017 school year enrollment listed 34 students. (Eastern Virginia Medical School, 2018)

There is currently a five-year transition for approved EPAB programs to transition to a new program with external accreditation through the Commission on Accreditation of Allied Health Education Programs (CAAHEP).

It is important to note that undergraduate and Doctoral degree programs in art therapy do not undergo a formal review and approval process by the EPAB. Certificate art programs are offered online but do not provide the level of education necessary to obtain credentialing as an art therapist.

There are currently 39 colleges and/or universities in the United States and Canada with AATA approved master's degree art therapy programs.

**Art Therapy Programs – US and Canada**

<b>State</b>	<b>Master's Degree Program</b>	<b>Undergraduate Degree Program</b>	<b>Doctoral Program</b>
California	4		1
*Canada	1		
Colorado	1		
Connecticut	1		
Florida	1	1	
Illinois	3		
Indiana	1		
Kansas	1		
Kentucky	1		
Maryland		1	
Massachusetts	2	1	1

<b>State</b>	<b>Master's Degree Program</b>	<b>Undergraduate Degree Program</b>	<b>Doctoral Program</b>
Michigan	2		
Minnesota	1		
New Jersey	1		
New Mexico	1		
New York	7	2	
North Carolina		1	
Ohio	1	2	
Oregon	1		
Pennsylvania	3	5	1
South Carolina		1	
Tennessee		6	
Virginia/Washington DC	2	1	
Washington	3		
Wisconsin	1	2	1
<b>Total Programs</b>	<b>39</b>	<b>23</b>	<b>4</b>

Source: American Art Therapy Association-Approved Programs

## REGULATION

Currently seven (7) states require art therapists to be licensed as art therapists. There are five (5) states that license art therapists under a related license, and four (4) states that recognize art therapists for purposes of state hiring and/or title protection. Currently, 17 states are considering art therapist licensure. (AATA)

In Virginia, there are no laws, regulations or standards of practice that exist for the practice of art therapy. Credentialed art therapists that are employed in Virginia as counselors or marriage and family therapists would be under the laws and regulations of the Board of Counseling. Employers of art therapists have applicable standards of practice that must be followed to comply with state laws. State agencies and hospitals that employ art therapists would have an established code of conduct along with regulations that apply to that entity.

The Art Therapy Credentials Board administers the ATCB Examination (ATCBE) which is a national exam taken for Board Certification and, in some cases, needed for state licensure. The board certification proficiency exam provides credentialing for board certified art therapists (ATR-BC) and is administered yearly by paper and pencil at the AATA conference as well as computer based testing which is offered several times per year at different testing locations. Test by exception is offered for an additional fee for individuals wishing to take the exam outside the scheduled time frame.

## APPENDIX 5 – AATA RECOMMENDED LEGISLATIVE PROVISIONS FOR DEFINING ART THERAPY AND THE SCOPE OF PRACTICE OF ART THERAPY IN STATE LICENSURE BILLS

The AATA provided the following information at the August 23, 2018 meeting to be included in the final report.

### American Art Therapy Association

#### **Recommended Legislative Provisions for Defining Art Therapy and the Scope of Practice of Art Therapy in State Licensure Bills**

State licensing laws and legislative bills generally follow one of three approaches in describing health and mental health professions or specialties to be licensed and the professions' or specialties' approved scope of professional practice. Many states include these descriptions as one of more definitions in the "definitions" sections of licensure bills (*the Maryland and Kentucky art therapy licensing laws follow this approach*). A number of large states structure legislation to include this information in separate "scope of practice" sections in professional licensure bills. Other states simply describe a profession or specialty by the academic and experience requirements needed to qualify for licensure, without specific definitions for the profession/specialty or its scope of practice (*the New Mexico and Kentucky art therapy acts and Texas' LPC art therapy subspecialty statute follow this approach*).

An important strategic goal of the Association is to ensure that licensed and credentialed art therapy professionals are recognized by legislators, regulators and insurers in all states. This will require a high level of uniformity in standards governing licensure and practice of art therapy in state licensing laws. AATA's Government Affairs Committee (GAC) has developed the following legislative provisions, modeled on the language of the 2012 Maryland law, to guide chapters in describing professional art therapy and the practice of professional art therapy in state licensure bills. Chapters are strongly encouraged to use one or more of the model legislative provisions that correspond to the structure of licensure legislation in their state.

#### DEFINITIONS OF PROFESSIONAL ART THERAPY AND THE PRACTICE OF PROFESSIONAL ART THERAPY:

"Sec. . Definitions.

- (a) "Professional art therapy" means the integrated use of psychotherapeutic principles, art media, and the creative process to assist individuals, families, or groups in:
- (1) Increasing awareness of self and others;
  - (2) Coping with symptoms, stress, and traumatic experiences;
  - (3) Enhancing cognitive abilities; and
  - (4) Identifying and assessing clients' needs in order to implement therapeutic intervention to meet developmental, behavioral, mental, and emotional needs.

(b)"Practice of professional art therapy" means to engage professionally and for compensation in art therapy and appraisal activities by providing services involving the application of art therapy principles and methods in the diagnosis , prevention, treatment, and amelioration of psychological problems and emotional or mental conditions that includes , but is not limited to:

(1) Clinical appraisal and treatment activities during individual , couples, family or group sessions which provide opportunities for expression through the creative process;

(2) Using the process and products of art creation to tap into client' s inner fears, conflicts and core issues with the goal of improving physical, mental and emotional functioning and well-being ;

(3) Using diagnostic art therapy assessments to determine treatment goals and implement therapeutic art interventions which meet developmental , mental , and emotional needs ; and

(4) Employing art media , the creative process and the resulting artwork to assist clients to:

(i) Reduce psychiatric symptoms of depression, anxiety , post traumatic stress, and attachment disorders ;

(ii) Enhance neurological, cognitive, and verbal abilities, develop social skills, aid sensory impairments , and move developmental capabilities forward in specific areas;

(iii) Cope with symptom s of stress, anxiety, traumatic experiences and grief;

(iv) Explore feelings, gain insight into behaviors , and reconcile emotional conflicts;

(v) Improve or restore functioning and a sense of personal well-being;

(vi) Increase coping skills, se lf-esteem, awareness of self and empathy for others;

(vii) Healthy channeling of anger and guilt; and

(viii) Improve school performance, family functioning and parent/child relationship.

### **Scope of Practice for Professional Art Therapy:**

Sec. \_ . Scope of Practice of a Licensed Professional Art Therapist.

The scope of practice of a licensed professional art therapist includes, but is not limited to:



(a) The use of psychotherapeutic principles, art media, and the creative process to assist individuals, families , or groups in:

- (1) Increasing awareness of self and others;
- (2) Coping with symptoms, stress, and traumatic experiences;
- (3) Enhancing cognitive abilities; and
- (4) Identifying and assessing clients' needs in order to implement therapeutic intervention to meet developmental, behavioral, mental, and emotional needs.

(b) The application of art therapy principles and methods in the diagnosis, prevention, treatment, and amelioration of psychological problems and emotional or mental conditions that include , but are not limited to:

- (1) Clinical appraisal and treatment activities during individual , couples, family or group sessions which provide opportunities for expression through the creative process;
- (2) Using the process and products of art creation to tap into client' s inner fears, conflicts and core issues with the goal of improving physical, mental and emotional functioning and well-being; and
- (3) Using diagnostic art therapy assessments to determine treatment goals and implement therapeutic art interventions which meet developmental, mental, and emotional needs; an

(c) The employment of art media, the creative process and the resulting artwork to assist clients to:

- (1) Reduce psychiatric symptoms of depression , anxiety, post traumatic stress, and attachment disorders;
- (2) Enhance neurological, cognitive , and verbal abilities, develop social skills, aid sensory impairments, and move developmental capabilities forward in specific areas;
- (3) Cope with symptoms of stress, anxiety, traumatic experiences and grief;
- (4) Explore feelings, gain insight into behaviors, and reconcile emotional conflicts;
- (5) Improve or restore functioning and a sense of personal well-being;
- (6) Increase coping skills, self-esteem, awareness of self and empathy for others;
- (7) Healthy channeling of anger and guilt; and
- (8) Improve school performance, family functioning and parent/child relationship.

## PROFESSIONAL ART THERAPY: REQUIREMENTS FOR LICENSURE

Sec. \_\_\_\_ . Licensure of Professional Art Therapists

To qualify for a license to practice professional art therapy, an applicant shall be an individual who meets the requirements of this section.

(a) The applicant shall be of good moral character.

(b) The applicant shall be at least 18 years old.

(c) The applicant shall hold a master's or doctoral degree in art therapy from an accredited educational institution that is approved by the (*Board*), and shall have completed:

(1) A minimum of 60 graduate credit hours in an art therapy program accredited by the American Art Therapy Association and approved by the (*Board*); and

(2) Not less than two (2) years, with a minimum of 2,000 hours, of supervised experience in art therapy approved by the (*Board*), one half of which, or a minimum of 1,000 client contact hours under appropriate supervision, shall have been completed after the award of the graduate degree.

(d) The applicant shall provide documentation to the (*Board*) evidencing the completion of 60 hours of graduate course work from an accredited college or university in a program of art therapy approved by the American Art Therapy Association, or a substantially equivalent program approved by the (*Board*) that includes graduate-level training in:

(1) The art therapy profession;

(2) Theory and practice of art therapy;

(3) Human growth and developmental dynamics in art;

(4) Application of art therapy with people in different treatment settings;

(5) Art therapy appraisal, diagnosis and assessment;

(6) Ethical and legal issues of art therapy practice;

(7) Matters of cultural and social diversity bearing on the practice of art therapy;

(8) Standards of good art therapy practice;

(9) Group art therapy; and

(f) The applicant shall pass the Board Examination of the Art Therapy

*Commonwealth of Virginia*



**REGULATIONS**  
**GOVERNING THE PRACTICE OF**  
**PROFESSIONAL COUNSELING**  
**VIRGINIA BOARD OF COUNSELING**

**Title of Regulations: 18 VAC 115-20-10 et seq.**

**Statutory Authority: §§ 54.1-2400 and Chapter 35 of Title 54.1  
of the *Code of Virginia***

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## TABLE OF CONTENTS

TABLE OF CONTENTS.....	2
Part I. General Provisions.....	3
18VAC115-20-10. Definitions.....	3
18VAC115-20-20. Fees required by the board. ....	4
18VAC115-20-30. (Repealed.) .....	4
18VAC115-20-35. Sex offender treatment provider certification. ....	4
Part II. Requirements for Licensure. ....	5
18VAC115-20-40. Prerequisites for licensure by examination. ....	5
18VAC115-20-45. Prerequisites for licensure by endorsement.....	5
18VAC115-20-49. Degree program requirements.....	6
18VAC115-20-50. (Expired.) .....	6
18VAC115-20-51. Coursework requirements. ....	7
18VAC115-20-52. Residency requirements. ....	8
18VAC115-20-60. (Repealed.) .....	10
Part III. Examinations. ....	10
18VAC115-20-70. General examination requirements; schedules; time limits. ....	10
18VAC115-20-80. (Repealed.) .....	11
18VAC115-20-90. (Repealed.) .....	11
Part IV. Licensure Renewal; Reinstatement.....	11
18VAC115-20-100. Annual renewal of licensure.....	11
18VAC115-20-105. Continued competency requirements for renewal of a license. ....	11
18VAC115-20-106. Continuing competency activity criteria. ....	12
18 VAC 115-20-107. Documenting compliance with continuing competency requirements. ....	14
18VAC115-20-110. Late renewal; reinstatement. ....	15
Part V. Standards of Practice; Unprofessional Conduct; Disciplinary Actions; Reinstatement. ....	15
18VAC115-20-130. Standards of practice. ....	15
18VAC115-20-140. Grounds for revocation, suspension, probation, reprimand, censure, or denial of license. ....	18
18 VAC115-20-150. Reinstatement following disciplinary action.....	18

## Part I. General Provisions.

### 18VAC115-20-10. Definitions.

A. The following words and terms when used in this chapter shall have the meaning ascribed to them in § 54.1-3500 of the Code of Virginia:

"Board"

"Counseling"

"Professional counselor"

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

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

"Applicant" means any individual who has submitted an official application and paid the application fee for licensure as a professional counselor.

"CACREP" means the Council for Accreditation of Counseling and Related Educational Programs.

"Candidate for licensure" means a person who has satisfactorily completed all educational and experience requirements for licensure and has been deemed eligible by the board to sit for its examinations.

"Clinical counseling services" means activities such as assessment, diagnosis, treatment planning, and treatment implementation.

"Competency area" means an area in which a person possesses knowledge and skill and the ability to apply them in the clinical setting.

"CORE" means Council on Rehabilitation Education.

"Exempt setting" means an agency or institution in which licensure is not required to engage in the practice of counseling according to the conditions set forth in § 54.1-3501 of the Code of Virginia.

"Face-to-face" means the in-person delivery of clinical counseling services for a client.

"Group supervision" means the process of clinical supervision of no more than six persons in a group setting provided by a qualified supervisor.

"Internship" means a formal academic course from a regionally accredited college or university in which supervised, practical experience is obtained in a clinical setting in the application of counseling principles, methods, and techniques.

"Jurisdiction" means a state, territory, district, province, or country that has granted a professional certificate or license to practice a profession, use a professional title, or hold oneself out as a practitioner of that profession.

"Nonexempt setting" means a setting that does not meet the conditions of exemption from the requirements of licensure to engage in the practice of counseling as set forth in § 54.1-3501 of the Code of Virginia.

"Regional accrediting agency" means one of the regional accreditation agencies recognized by the U.S. Secretary of Education responsible for accrediting senior postsecondary institutions.

"Residency" means a postgraduate, supervised, clinical experience registered with the board.

"Resident" means an individual who has submitted a supervisory contract and has received board approval to provide clinical services in professional counseling under supervision.

"Supervision" means the ongoing process performed by a supervisor who monitors the performance of the person supervised and provides regular, documented individual or group

consultation, guidance, and instruction that is specific to the clinical counseling services being performed with respect to the clinical skills and competencies of the person supervised.

**18VAC115-20-20. Fees required by the board.**

A. The board has established the following fees applicable to licensure as a professional counselor:

Active annual license renewal	\$130
Inactive annual license renewal	\$65
Initial licensure by examination: Application processing and initial licensure	\$175
Initial licensure by endorsement: Application processing and initial licensure	\$175
Registration of supervision	\$65
Add or change supervisor	\$30
Duplicate license	\$10
Verification of licensure to another jurisdiction	\$30
Late renewal	\$45
Reinstatement of a lapsed license	\$200
Replacement of or additional wall certificate	\$25
Returned check	\$35
Reinstatement following revocation or suspension	\$600

B. All fees are nonrefundable.

C. Examination fees shall be determined and made payable as determined by the board.

**18VAC115-20-30. (Repealed.)**

**18VAC115-20-35. Sex offender treatment provider certification.**

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

## **Part II. Requirements for Licensure.**

### **18VAC115-20-40. Prerequisites for licensure by examination.**

Every applicant for licensure examination by the board shall:

1. Meet the degree program requirements prescribed in 18VAC115-20-49, the course work requirements prescribed in 18VAC115-20-51, and the experience requirements prescribed in 18VAC115-20-52; and
2. Pass the licensure examination specified by the board;
3. Submit the following to the board:
  - a. A completed application;
  - b. Official transcripts documenting the applicant's completion of the degree program and coursework requirements prescribed in 18VAC115-20-49 and 18VAC115-20-51. Transcripts previously submitted for registration of supervision do not have to be resubmitted unless additional coursework was subsequently obtained;
  - c. Verification of Supervision forms documenting fulfillment of the residency requirements of 18VAC115-20-52 and copies of all required evaluation forms, including verification of current licensure of the supervisor if any portion of the residency occurred in another jurisdiction;
  - d. Verification of any other mental health or health professional license or certificate ever held in another jurisdiction;
  - e. The application processing and initial licensure fee as prescribed in 18VAC115-20-20.; and
  - f. A current report from the U.S. Department of Health and Human Services National Practitioner Data Bank (NPDB); and
4. Have no unresolved disciplinary action against a mental health or health professional license or certificate held in Virginia or in another jurisdiction. The board will consider history of disciplinary action on a case-by-case basis.

### **18VAC115-20-45. Prerequisites for licensure by endorsement.**

A. Every applicant for licensure by endorsement shall hold or have held a professional counselor license in another U. S. jurisdiction and shall submit the following:

1. A completed application;
2. The application processing fee and initial licensure fee as prescribed in 18VAC115-20-20;

3. Verification of all mental health or health professional licenses or certificates ever held in any other jurisdiction. In order to qualify for endorsement the applicant shall have no unresolved action against a license or certificate. The board will consider history of disciplinary action on a case-by-case basis;
4. Documentation of having completed education and experience requirements as specified in subsection B of this section;
5. Verification of a passing score on an examination required for counseling licensure in the jurisdiction in which licensure was obtained;
6. A current report from the U.S. Department of Health and Human Services National Practitioner Data Bank (NPDB); and
7. An affidavit of having read and understood the regulations and laws governing the practice of professional counseling in Virginia.

B. Every applicant for licensure by endorsement shall meet one of the following:

1. Educational requirements consistent with those specified in 18VAC115-20-49 and 18VAC115-20-51 and experience requirements consistent with those specified in 18VAC115-20-52;
2. If an applicant does not have educational and experience credentials consistent with those required by this chapter, he shall provide:
  - a. Documentation of education and supervised experience that met the requirements of the jurisdiction in which he was initially licensed as verified by an official transcript and a certified copy of the original application materials; and
  - b. Evidence of post-licensure clinical practice in counseling, as defined in § 54.1-3500 of the Code of Virginia, for 24 of the last 60 months immediately preceding his licensure application in Virginia. Clinical practice shall mean the rendering of direct clinical counseling services or clinical supervision of counseling services; or
3. In lieu of transcripts verifying education and documentation verifying supervised experience, the board may accept verification from the credentials registry of the American Association of State Counseling Boards or any other board-recognized entity.

**18VAC115-20-49. Degree program requirements.**

A. The applicant shall have completed a graduate degree from a program that prepares individuals to practice counseling, as defined in § 54.1-3500 of the Code of Virginia, is offered by a college or university accredited by a regional accrediting agency, and meets the following criteria:



1. There must be a sequence of academic study with the expressed intent to prepare counselors as documented by the institution;
2. There must be an identifiable counselor training faculty and an identifiable body of students who complete that sequence of academic study; and
3. The academic unit must have clear authority and primary responsibility for the core and specialty areas.

B. Programs that are approved by CACREP or CORE are recognized as meeting the requirements of subsection A of this section.

C. Graduates of programs that are not within the United States or Canada shall provide documentation from an acceptable credential evaluation service that provides information that allows the board to determine if the program meets the requirements set forth in this chapter.

**18VAC115-20-50. (Expired.)**

**18VAC115-20-51. Coursework requirements.**

A. The applicant shall have successfully completed 60 semester hours or 90 quarter hours of graduate study in the following core coursework with a minimum of three semester hours or 4.0 quarter hours in each of subdivisions 1 through 12 of this subsection:

1. Professional counseling identity, function and ethics;
2. Theories of counseling and psychotherapy;
3. Counseling and psychotherapy techniques;
4. Human growth and development;
5. Group counseling and psychotherapy, theories and techniques;
6. Career counseling and development theories and techniques;
7. Appraisal, evaluation and diagnostic procedures;
8. Abnormal behavior and psychopathology;
9. Multicultural counseling, theories and techniques;
10. Research;
11. Diagnosis and treatment of addictive disorders;
12. Marriage and family systems theory; and
13. Supervised internship of at least 600 hours to include 240 hours of face-to-face client contact. Only internship hours earned after completion of 30 graduate semester hours may be counted towards residency hours.

B. If 60 graduate hours in counseling were completed prior to April 12, 2000, the board may accept those hours if they meet the regulations in effect at the time the 60 hours were completed.

**18VAC115-20-52. Residency requirements.**

A. Registration. Applicants who render counseling services shall:

1. With their supervisor, register their supervisory contract on the appropriate forms for board approval before starting to practice under supervision;
2. Have submitted an official transcript documenting a graduate degree as specified in 18VAC115-20-49 to include completion of the coursework and internship requirement specified in 18VAC115-20-51; and
3. Pay the registration fee.

B. Residency requirements.

1. The applicant for licensure shall have completed a 3,400-hour supervised residency in the role of a professional counselor working with various populations, clinical problems and theoretical approaches in the following areas:

- a. Assessment and diagnosis using psychotherapy techniques;
- b. Appraisal, evaluation and diagnostic procedures;
- c. Treatment planning and implementation;
- d. Case management and recordkeeping;
- e. Professional counselor identity and function; and
- f. Professional ethics and standards of practice.

2. The residency shall include a minimum of 200 hours of in-person supervision between supervisor and resident in the consultation and review of clinical counseling services provided by the resident. Supervision shall occur at a minimum of one hour and a maximum of four hours per 40 hours of work experience during the period of the residency. For the purpose of meeting the 200-hour supervision requirement, in-person may include the use of secured technology that maintains client confidentiality and provides real-time, visual contact between the supervisor and the resident. Up to 20 hours of the supervision received during the supervised internship may be counted towards the 200 hours of in-person supervision if the supervision was provided by a licensed professional counselor.

3. No more than half of the 200 hours may be satisfied with group supervision. One hour of group supervision will be deemed equivalent to one hour of individual supervision.

4. Supervision that is not concurrent with a residency will not be accepted, nor will residency hours be accrued in the absence of approved supervision.

5. The residency shall include at least 2,000 hours of face-to-face client contact in providing clinical counseling services. The remaining hours may be spent in the performance of ancillary counseling services.

6. A graduate-level internship in excess of 600 hours, which was completed in a program that meets the requirements set forth in 18VAC115-20-49 may count for up to an additional 300 hours towards the requirements of a residency.

7. Supervised practicum and internship hours in a CACREP-accredited doctoral counseling program may be accepted for up to 900 hours of the residency requirement and up to 100 of the required hours of supervision provided the supervisor holds a current, unrestricted license as a professional counselor.

8. The residency shall be completed in not less than 21 months or more than four years. Residents who began a residency before August 24, 2016, shall complete the residency August 24, 2020. An individual who does not complete the residency after four years shall submit evidence to the board showing why the supervised experience should be allowed to continue.

9. The board may consider special requests in the event that the regulations create an undue burden in regard to geography or disability that limits the resident's access to qualified supervision.

10. Residents may not call themselves professional counselors, directly bill for services rendered, or in any way represent themselves as independent, autonomous practitioners or professional counselors. During the residency, residents shall use their names and the initials of their degree, and the title "Resident in Counseling" in all written communications. Clients shall be informed in writing of the resident's status and the supervisor's name, professional address, and phone number.

11. Residents shall not engage in practice under supervision in any areas for which they have not had appropriate education.

12. Residency hours approved by the licensing board in another United States jurisdiction that meet the requirements of this section shall be accepted.

C. Supervisory qualifications. A person who provides supervision for a resident in professional counseling shall:

1. Document two years of post-licensure clinical experience;

2. Have received professional training in supervision, consisting of three credit hours or 4.0 quarter hours in graduate-level coursework in supervision or at least 20 hours of continuing education in supervision offered by a provider approved under 18VAC115-20-106; and

3. Hold an active, unrestricted license as a professional counselor, or a marriage and family therapist in the jurisdiction where the supervision is being provided. At least 100 hours of the supervision shall be rendered by a licensed professional counselor. Supervisors who are substance abuse treatment practitioners, school psychologists, clinical psychologists, clinical social workers, or psychiatrists and have been approved to provide supervision may continue to do so until August 24, 2017.

D. Supervisory responsibilities.

1. Supervision by any individual whose relationship to the resident compromises the objectivity of the supervisor is prohibited.

2. The supervisor of a resident shall assume full responsibility for the clinical activities of that resident specified within the supervisory contract for the duration of the residency.

3. The supervisor shall complete evaluation forms to be given to the resident at the end of each three-month period.

4. The supervisor shall report the total hours of residency and shall evaluate the applicant's competency in the six areas stated in subdivision B 1 of this section.

5. The supervisor shall provide supervision as defined in 18VAC115-20-10.

E. Applicants shall document successful completion of their residency on the Verification of Supervision Form at the time of application. Applicants must receive a satisfactory competency evaluation on each item on the evaluation sheet. Supervised experience obtained prior to April 12, 2000, may be accepted toward licensure if this supervised experience met the board's requirements that were in effect at the time the supervision was rendered.

**18VAC115-20-60. (Repealed.)**

**Part III. Examinations.**

**18VAC115-20-70. General examination requirements; schedules; time limits.**

A. Every applicant for initial licensure by examination by the board as a professional counselor shall pass a written examination as prescribed by the board.

B. Every applicant for licensure by endorsement shall have passed a licensure examination in the jurisdiction in which licensure was obtained.

C. A candidate approved to sit for the examination shall pass the examination within two years from the date of such initial approval. If the candidate has not passed the examination by the end of the two-year period here prescribed:

1. The initial approval to sit for the examination shall then become invalid; and
2. The applicant shall file a new application with the board, meet the requirements in effect at that time, and provide evidence of why the board should approve the reapplication for examination. If approved by the board, the applicant shall pass the examination within two years of such approval. If the examination is not passed within the additional two-year period, a new application will not be accepted.

D. The board shall establish a passing score on the written examination.

E. A candidate for examination or an applicant shall not provide clinical counseling services unless he is under supervision approved by the board.

**18VAC115-20-80. (Repealed.)**

**18VAC115-20-90. (Repealed.)**

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

**18VAC115-20-100. Annual renewal of licensure.**

A. All licensees shall renew licenses on or before June 30 of each year.

B. Every license holder who intends to continue an active practice shall submit to the board on or before June 30 of each year:

1. A completed form for renewal of the license on which the licensee attests to compliance with the continuing competency requirements prescribed in this chapter; and

2. The renewal fee prescribed in 18VAC115-20-20.

C. A licensee who wishes to place his license in an inactive status may do so upon payment of the inactive renewal fee as established in 18VAC115-20-20. No person shall practice counseling in Virginia unless he holds a current active license. A licensee who has placed himself in inactive status may become active by fulfilling the reactivation requirements set forth in 18VAC115-20-110.C.

D. Licensees shall notify the board of a change in the address of record or the public address, if different from the address of record within 60 days. Failure to receive a renewal notice from the board shall not relieve the license holder from the renewal requirement.

E. Practice with an expired license is prohibited and may constitute grounds for disciplinary action.

**18VAC115-20-105. Continued competency requirements for renewal of a license.**

A. Licensed professional counselors shall be required to have completed a minimum of 20 hours of continuing competency for each annual licensure renewal. A minimum of two of these hours shall be in courses that emphasize the ethics, standards of practice, or laws governing behavioral science professions in Virginia.

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

C. The board may grant an exemption for all or part of the continuing competency requirements due to circumstances beyond the control of the licensee such as temporary disability, mandatory military service, or officially declared disasters.

D. Those individuals dually licensed by this board will not be required to obtain continuing competency for each license. Dually licensed individuals will only be required to provide the hours set out in subsection A of this section, subsection A of 18VAC115-50-95 in the Regulations Governing the Practice of Marriage and Family Therapy, or subsection A of 18VAC115-60-115 in the Regulations Governing the Practice of Licensed Substance Abuse Treatment Practitioners.

E. Up to two hours of the 20 hours required for annual renewal may be satisfied through delivery of counseling services, without compensation, to low-income individuals receiving health services through a local health department or a free clinic organized in whole or primarily for the delivery of those services. One hour of continuing education may be credited for three hours of providing such volunteer services, as documented by the health department or free clinic.

F. A professional counselor who was licensed by examination is exempt from meeting continuing competency requirements for the first renewal following initial licensure.

#### **18VAC115-20-106. Continuing competency activity criteria.**

A. Continuing competency activities must focus on increasing knowledge or skills in one or more of the following areas:

1. Ethics, standards of practice or laws governing behavioral science professions;
2. Counseling theory;
3. Human growth and development;
4. Social and cultural foundations;
5. The helping relationship;
6. Group dynamics, processing and counseling;
7. Lifestyle and career development;
8. Appraisal of individuals;
9. Research and evaluation;
10. Professional orientation;
11. Clinical supervision;
12. Marriage and family therapy; or
13. Addictions.

B. Approved hours of continuing competency activity shall be one of the following types:

1. Formally organized learning activities or home study. Activities may be counted at their full hour value. Hours shall be obtained from one or a combination of the following board-approved mental health related activities:

- a. Regionally accredited university or college level academic courses in a behavioral health discipline.
- b. Continuing education programs offered by universities or colleges.
- c. Workshops, seminars, conferences, or courses in the behavioral health field offered by federal, state or local governmental agencies or licensed health facilities and licensed hospitals.
- d. Workshops, seminars conferences or courses in the behavioral health field offered by an individual or organization that has been certified or approved by one of the following:
  - (1) The International Association of Marriage and Family Counselors and its state affiliates.
  - (2) The American Association for Marriage and Family Therapy and its state affiliates.
  - (3) The American Association of State Counseling Boards.
  - (4) The American Counseling Association and its state and local affiliates.
  - (5) The American Psychological Association and its state affiliates.
  - (6) The Commission on Rehabilitation Counselor Certification.
  - (7) NAADAC, The Association for Addiction Professionals and its state and local affiliates.
  - (8) National Association of Social Workers.
  - (9) National Board for Certified Counselors.
  - (10) A national behavioral health organization or certification body.
  - (11) Individuals or organizations that have been approved as continuing competency sponsors by the American Association of State Counseling Boards or a counseling board in another state.
  - (12) The American Association of Pastoral Counselors.

2. Individual professional activities.

a. Publication/presentation/new program development

- (1) Publication of articles. Activity will count for a maximum of eight hours. Publication activities are limited to articles in refereed journals or a chapter in an edited book.
- (2) Publication of books. Activity will count for a maximum of 18 hours.
- (3) Presentations. Activity will count for a maximum of eight hours. The same presentations may be used only once in a two-year period. Only actual presentation time may be counted.
- (4) New program development. Activity will count for a maximum of eight hours.)New program development includes a new course, seminar, or workshop. New courses shall be graduate or undergraduate level college or university courses.

b. Dissertation. Activity will count for a maximum of 18 hours. Dissertation credit may only be counted once.

c. Clinical supervision/consultation. Activity will count for a maximum of 10 hours. Continuing competency can only be granted for clinical supervision/consultation received on a regular basis with a set agenda. Continuing competency cannot be granted for supervision provided to others.

d. Leadership. Activity will count for a maximum of eight hours. The following leadership positions are acceptable for continuing competency credit: officer of state or national counseling organization; editor and/or reviewer of professional counseling journals; member of state counseling licensure/certification board; member of a national counselor certification board; member of a national ethics disciplinary review committee rendering licenses; active member of a counseling committee producing a substantial written product; chair of a major counseling conference or convention; or other leadership positions with justifiable professional learning experiences. The leadership positions must take place for a minimum of one year after the date of first licensure.

e. Practice related programs. Activity will count up to a maximum of eight hours. The board may allow up to eight contact hours of continuing competency as long as the regulant submits proof of attendance plus a written justification of how the activity assists him in his direct service of his clients. Examples include: language courses, software training, and medical topics, etc.

**18 VAC 115-20-107. Documenting compliance with continuing competency requirements.**

A. All licensees are required to maintain original documentation for a period of two years following renewal.

B. After the end of each renewal period, the board may conduct a random audit of licensees to verify compliance with the requirement for that renewal period.

C. Upon request, a licensee shall provide documentation as follows:

1. To document completion of formal organized learning activities the licensee shall provide:

a. Official transcripts showing credit hours earned; or

b. Certificates of participation.

2. Documentation of home study shall be made by identification of the source material studied, summary of content, and a signed affidavit attesting to completion of the home study.

3. Documentation of individual professional activities shall be by one of the following:

a. Certificates of participation;

b. Proof of presentations made;

c. Reprints of publications;

d. Letters from educational institutions or agencies approving continuing education programs;

e. Official notification from the association that sponsored the item writing workshop or continuing education program; or

f. Documentation of attendance at formal staffing by a signed affidavit on a form provided by the board.