Call to Order – James Werth, Ph.D, Board Chair
Roll Call/Welcome and Introductions
Mission of the Board

Public Comment
The Board will receive public comment related to agenda items at this time. The Board will not receive comment on any pending regulation process for which a public comment period has closed or any pending or closed complaint or disciplinary matter.

Review of Laws Governing the Certification of Sex Offender Treatment Providers – Dr. Werth

Adjournment

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 2.2-3708(D).
Virginia Board of Psychology

Instructions for Accessing September 10, 2020 Virtual Board Meeting and Providing Public Comment

- **Access:** Perimeter Center building access is closed to the public due to the COVID-19 pandemic. To observe this virtual meeting, use one of the options below. Participation capacity is limited and is on a first come, first serve basis due to the capacity of CISCO WebEx technology.

- **Public comment:** Comments will be received during the public hearings and during the full board meeting from those persons who have submitted an email to jaime.hoyle@dhp.virginia.gov no later than 5:00 pm on September 9, 2020 indicating that they wish to offer comment. Comment may be offered by these individuals when their names are announced by the Chair. Comments must be restricted to 3-5 minutes each.

- Public participation connections will be muted following the public comment periods.
- Please call from a location without background noise.
- Dial (804) 938-6243 to report an interruption during the broadcast.
- FOIA Council *Electronic Meetings Public Comment* form for submitting feedback on this electronic meeting may be accessed at http://foiacouncil.dls.virginia.gov/sample%20letters/welcome.htm

JOIN THE INTERACTIVE MEETING DIRECTLY
https://virginia-dhp.my.webex.com/virginia-dhp.my/j.php?MTID=m2d020a804662c8e2db614385bf7b38fb

JOIN BY AUDIO ONLY
1-408-418-9388
Meeting number (access code): 132 298 8847
Meeting password: mV2SZfJb335 (68279352 from phones and video systems)
MISSION STATEMENT

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.
Commonwealth of Virginia

REGULATIONS

GOVERNING THE CERTIFICATION OF
SEX OFFENDER TREATMENT PROVIDERS

VIRGINIA BOARD OF PSYCHOLOGY

Title of Regulations: 18 VAC 125-30-10 et seq.

Statutory Authority: §§ 54.1-2400 and Chapter 36 of Title 54.1 of the Code of Virginia

Revised Date: March 5, 2020

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18VAC125-30-10. Definitions.

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

"Ancillary services" means training in anger management, stress management, assertiveness, social skills, substance abuse avoidance and sex education as part of an identified sex offender treatment provider program.

"Applicant" means an individual who has submitted a completed application with documentation and the appropriate fees to be examined for certification as a sex offender treatment provider.

"Assessment" means using specific techniques of evaluation and measurement to collect facts related to sexually abusive thoughts and behaviors contributing to sexual offense.

"Board" means the Virginia Board of Psychology.

"Certified sex offender treatment provider" means a person who is certified to provide treatment to sex offenders and who provides such services in accordance with the provisions of §§ 54.1-2924.1, 54.1-3005, 54.1-3505, 54.1-3609, 54.1-3610, 54.1-3611, and 54.1-3705 of the Code of Virginia and the regulations promulgated pursuant to these provisions.

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

"Sex offender" means (i) any person who has been adjudicated or convicted of a sex offense or has a founded child sexual abuse status by the Department of Social Services; (ii) any person for whom any court has found sufficient evidence without specific finding of guilt of committing a felony or misdemeanor which may be reasonably inferred to be sexually motivated; or (iii) any person who admits to or acknowledges behavior which would result in adjudication, conviction, or a founded child sexual abuse status.

"Sex offense" means behavior in violation of any of the following statutes in the Code of Virginia: § 18.2-48 in part (abduction of any person with intent to defile such person), § 18.2-60.3 in part (includes only those instances in which sexual motivation can be reasonably inferred), § 18.2-61, § 18.2-63, § 18.2-64.1, § 18.2-67.1, § 18.2-67.2, § 18.2-67.2:1, § 18.2-67.3, § 18.2-67.4, § 18.2-67.5, § 18.2-130 in part (includes only those instances in which sexual motivation can be reasonably inferred), subsection A of § 18.2-361 in part "If any person carnally knows in any manner any brute animal" and subsection B § 18.2-361 in its entirety, § 18.2-366, § 18.2-370, § 18.2-370.1, § 18.2-374.1 (not to include plethysmographic testing materials in the possession of qualified mental health professionals or technicians), § 18.2-387.

"Supervision" means the ongoing process performed by a supervisor who monitors the performance of the person supervised and provides regular documented individual consultation, guidance and instruction with respect to the skills and competencies of the person providing sex offender treatment services.

"Supervisor" means an individual who assumes full responsibility for the education and training activities of a person as it relates to sex offender treatment and provides the supervision required by such a person. The supervisor shall be a certified sex offender treatment provider and licensed by the Board of Medicine, Nursing, Counseling, Psychology or Social Work.

"Treatment" means therapeutic intervention to change sexually abusive thoughts and behaviors which specifically addresses the occurrence and dynamics of sexual behavior and utilizes specific strategies to promote change.
18VAC125-30-20. Fees required by the board.

A. The board has established the following fees applicable to the certification of sex offender treatment providers:

<table>
<thead>
<tr>
<th>Service</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registration of supervision</td>
<td>$50</td>
</tr>
<tr>
<td>Add or change supervisor</td>
<td>$25</td>
</tr>
<tr>
<td>Application processing and initial certification fee</td>
<td>$90</td>
</tr>
<tr>
<td>Certification renewal</td>
<td>$75</td>
</tr>
<tr>
<td>Duplicate certificate</td>
<td>$5</td>
</tr>
<tr>
<td>Late renewal</td>
<td>$25</td>
</tr>
<tr>
<td>Reinstatement of an expired certificate</td>
<td>$125</td>
</tr>
<tr>
<td>Replacement of or additional wall certificate</td>
<td>$15</td>
</tr>
<tr>
<td>Handling fee for returned check or dishonored credit card or debit card</td>
<td>$50</td>
</tr>
<tr>
<td>Reinstatement following revocation or suspension</td>
<td>$500</td>
</tr>
<tr>
<td>One-time reduction in fee for renewal on June 30, 2020</td>
<td>$55</td>
</tr>
</tbody>
</table>

B. Fees shall be made payable to the Treasurer of Virginia. All fees are nonrefundable.

Statutory Authority

18VAC125-30-30. Prerequisites to certification.

A. Every applicant for certification by the board shall:

1. Meet the educational requirements prescribed in 18VAC125-30-40;
2. Meet the experience requirements prescribed in 18VAC125-30-50;
3. Submit to the board:
   a. A completed application form;
   b. Documented evidence of having fulfilled the education, experience, and supervision set forth in 18VAC125-30-40 and 18VAC125-30-50; and
   c. Reference letters from three licensed health care professionals familiar with and attesting to the applicant's skills and experience.

B. The board may certify by endorsement an individual who can document current certification as a sex offender treatment provider in good standing obtained by standards substantially equivalent to those outlined in this chapter as verified by an out-of-state certifying agency on a board-approved form.

18VAC125-30-40. Educational requirements.

An applicant for certification as a sex offender treatment provider shall:

1. Document completion of one of the following degrees:
   a. A master's or doctoral degree in social work, psychology, counseling, or nursing from a regionally accredited university; or
   b. The degree of Doctor of Medicine or Doctor of Osteopathic Medicine from an institution that is approved by an accrediting agency recognized by the Virginia Board of Medicine. Graduates of institutions that are not accredited by an acceptable accrediting agency shall establish the equivalency of their education to the educational requirements of the Virginia Board of Social Work, Psychology, Counseling, Nursing or Medicine.
2. Provide documentation of 50 clock hours of training acceptable to the board in the following areas, with 15 clock hours in each area identified in subdivisions 2 a and b of this section, 10 clock hours in each area identified in subdivision 2 c of this section, and five clock hours in each area identified in subdivisions 2 d and e of this section:
   a. Sex offender assessment;
   b. Sex offender treatment interventions;
   c. Etiology/developmental issues of sex offense behavior;
   d. Criminal justice and legal issues related to sexual offending; and
   e. Program evaluation, treatment efficacy, and issues related to recidivism of sex offenders.

18VAC125-30-50. Experience requirements; supervision.

A. Registration of supervision.
   1. In order to register supervision with the board, individuals shall submit:
      a. A completed supervisory contract;
      b. The registration fee prescribed in 18VAC125-30-20; and
      c. Official graduate transcript.
   2. The board may waive the registration requirement for individuals who have obtained at least five years documented work experience in sex offender treatment in another jurisdiction.

B. An applicant for certification as a sex offender treatment provider shall provide documentation of having 2,000 hours of postdegree clinical experience in the delivery of clinical assessment/treatment services. At least 200 hours of this experience must be face-to-face treatment and assessment with sex offender clients.
   1. The experience shall include a minimum of 100 hours of face-to-face supervision within the 2,000 hours experience with a minimum of six hours per month. A minimum of 50 hours shall be in individual face-to-face supervision. Face-to-face supervision obtained in a group setting shall include no more than six trainees in a group.
   2. If the applicant has obtained the required postdegree clinical experience for a mental health license within the past 10 years, he can receive credit for those hours that were in the delivery of clinical assessment/treatment services with sex offender clients provided:
      a. The applicant can document that the hours were in the treatment and assessment with sex offender clients; and
      b. The supervisor for those hours can attest that he was licensed and qualified to render services to sex offender clients at the time of the supervision.

C. Supervised experience obtained in Virginia without prior written board approval shall not be accepted toward certification. Candidates shall not begin the experience until after completion of the required degree as set forth in 18VAC125-30-40. An individual who proposes to obtain supervised postdegree experience in Virginia shall, prior to the onset of such supervision, submit a supervisory contract along with the application package and pay the registration of supervision fee set forth in 18VAC125-30-20.

D. The supervisor.
   1. The supervisor shall assume responsibility for the professional activities of the applicant.
   2. The supervisor shall not provide supervision for activities for which the prospective applicant has not had appropriate education.
   3. The supervisor shall hold a current and unrestricted license as a clinical nurse specialist, doctor of medicine or osteopathic medicine, professional counselor, clinical social worker, or clinical psychologist and shall provide supervision only for those sex offender treatment services which he is qualified to render.
4. At the time of formal application for certification, the board approved supervisor shall document for the board the applicant's total hours of supervision, length of work experience, competence in sex offender treatment, and needs for additional supervision or training.

18VAC125-30-60. [Repealed]

18VAC125-30-70. Supervision of unlicensed persons.

Those persons providing ancillary services as part of an identified sex offender treatment program in an exempt practice situation and not meeting the educational and experience requirements to become an applicant shall provide such services under the supervision of a certified sex offender treatment provider.

Part III. Renewal and Reinstatement.

18VAC125-30-80. Annual renewal of certificate.

A. Every certificate issued by the board shall expire on June 30 of each year.
B. Along with the renewal application, the certified sex offender treatment provider shall:
   1. Submit the renewal fee prescribed in 18VAC125-30-20; and
   2. Attest to having obtained six hours of continuing education in topics related to the provision of sex offender treatment within the renewal period. Continuing education shall be offered by a sponsor or provider approved by the Virginia Board of Social Work, Psychology, Counseling, Nursing, or Medicine or by the Association for the Treatment of Sexual Abusers or one of its state chapters. Hours of continuing education used to satisfy the renewal requirements for another license may be used to satisfy the six-hour requirement for sex offender treatment provider certification, provided it was related to the provision of sex offender treatment.
C. Certificate holders shall notify the board in writing of a change of address of record or of the public address, if different from the address of record, within 60 days. Failure to receive a renewal notice and application form or forms shall not excuse the certified sex offender treatment provider from the renewal requirement.

18VAC125-30-90. Reinstatement.

A. A person whose certificate has expired may renew it within one year after its expiration date by paying the renewal fee and the late renewal fee prescribed in 18VAC125-30-20.
B. A person whose certificate has expired beyond one year and who wishes to resume practice shall:
   1. Submit a reinstatement application along with the reinstatement fee.
   2. Provide evidence satisfactory to the board of current ability to practice.
   3. Submit verification of any professional certification or licensure obtained in any other jurisdiction subsequent to the initial application for certification.

Part IV. Standards of Practice; Disciplinary Action; Reinstatement.

18VAC125-30-100. Standards of practice.
A. The protection of the public health, safety, and welfare and the best interest of the public shall be the primary guide in determining the appropriate professional conduct of all certified practitioners who provide services to sex offenders.

B. Persons certified by the board and applicants under supervision shall:
   1. Practice in a manner that ensures community protection and safety.
   2. Treat all sex offender clients with dignity and respect, regardless of the nature of their crimes or offenses.
   3. Provide only services and use only techniques for which they are qualified by training and experience.
   4. Inform sex offender clients of (i) the purposes of an interview, testing, or evaluation session; (ii) the ways in which information obtained in such sessions will be used before asking the sex offender client to reveal personal information or allowing such information to be divulged; (iii) the methods of interventions, including any experimental methods of treatment; and (iv) the risks and benefits of any treatment.
   5. Inform sex offender clients of the limits of confidentiality and any circumstances which may allow an exception to the agreed upon confidentiality, including (i) as obligated under dual-client situations, especially in criminal justice or related settings; (ii) when the client is a danger to self or others; (iii) when under court order to disclose information; (iv) in cases of suspected child abuse; and (v) as otherwise required by law.
   6. Not require or seek waivers of privacy or confidentiality beyond the requirements of treatment, training, or community safety.
   7. Explain to juvenile sex offender clients the rights of their parents or legal guardians, or both, to obtain information relating to the sex offender client.
   8. Maintain sex offender client records securely, inform all employees of the rules applicable to the appropriate level of confidentiality, and provide for the destruction of records which are no longer useful.
   9. Retain sex offender client records for a minimum of five years from the date of termination of services.
   10. Stay abreast of new developments, concepts, and practices which are important to providing appropriate professional services.
   11. Never engage in dual relationships with sex offender clients or former clients, or current trainees that could impair professional judgment or compromise the sex offender client's or trainee's well-being, impair the trainee's judgment, or increase the risk of sex offender client or trainee exploitation. Engaging in sexual intimacies or romantic relationships with sex offender clients or former clients, or with current trainees is strictly prohibited.
   12. Report to the board known or suspected violations of the laws and regulations governing the practice of sex offender treatment providers, as well as any information that a sex offender treatment provider is unable to practice with reasonable skill and safety because of illness or substance abuse or otherwise poses a danger to himself, the public, or clients.
   13. Provide clients with accurate information concerning tests, reports, billing, payment responsibilities, therapeutic regime, and schedules before rendering services.
   14. Maintain cooperative and collaborative relationships with corrections/probation/parole officers or any responsible agency for purposes of the effective supervision and monitoring of a sex offender client's behavior in order to assure public safety.
   15. Consider the validity, reliability, and appropriateness of assessments selected for use with sex offender clients. Where questions exist about the appropriateness of utilizing a particular assessment with a sex offender client, expert guidance from a knowledgeable, certified sex offender treatment provider shall be sought.
16. Recognize the sensitivity of sexual arousal assessment testing and treatment materials, safeguard the use of such materials in compliance with § 18.2-374.1:1 of the Code of Virginia, and use them only for the purpose for which they are intended in a controlled penile plethysmographic laboratory assessment.

17. Be aware of the limitations of plethysmograph and that plethysmographic data is only meaningful within the context of a comprehensive evaluation or treatment process or both.

18. Be knowledgeable of the limitations of the polygraph and take into account its appropriateness with each individual client and special client population.

19. Comply with all laws of the Code of Virginia applicable to the practice of sex offender treatment providers.

18VAC125-30-110. Grounds for disciplinary action.

The board may revoke, suspend, restrict or refuse to issue a certificate, or reprimand or fine a practitioner in accord with the following:
1. Violation of the standards of practice.
2. Conviction of a felony or a misdemeanor involving moral turpitude.
3. Misuse of drugs or alcohol which interferes with professional functioning.
4. Mental or physical illness which interferes with professional functioning.
5. The denial, revocation, suspension, or restriction of a registration, license or certificate to practice in another state, or a United States possession or territory or the surrender of any such registration, license or certificate while an active investigation is pending.

18VAC125-30-120. Reinstatement following disciplinary action.

A. Any person whose certificate has been revoked by the board under the provisions of 18VAC125-30-110 may, three years subsequent to such board action, submit a new application to the board for certification to the board. Any person whose certificate has been denied renewal by the board under the provisions of 18VAC125-30-110 may, two years subsequent to such board action, submit a new application to the board for certification to the board.

B. The board in its discretion may, after a hearing, grant reinstatement.

C. The applicant for reinstatement, if approved, shall be certified upon payment of the appropriate fees applicable at the time of reinstatement.
18VAC125-30-10. Definitions.

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

"Ancillary services" means training in anger management, stress management, assertiveness, social skills, substance abuse avoidance and sex education as part of an identified sex offender treatment provider program.

"Applicant" means an individual who has submitted a completed application with documentation and the appropriate fees to be examined for certification as a sex offender treatment provider.

"Assessment" means using specific techniques of evaluation and measurement to collect facts related to sexually abusive thoughts and behaviors contributing to sexual offense.

"Board" means the Virginia Board of Psychology.

"Certified sex offender treatment provider" means a person who is certified to provide treatment to sex offenders and who provides such services in accordance with the provisions of §§ 54.1-2924.1, 54.1-3005, 54.1-3505, 54.1-3609, 54.1-3610, 54.1-3611, and 54.1-3705 of the Code of Virginia and the regulations promulgated pursuant to these provisions.
“Competency area” means an area in which a person possesses knowledge and skills and the ability to apply them in the clinical setting.

“Face-to-face” means in-person or real-time interactive in which there is visual and audio contact and an opportunity for interaction with a supervisor.

“Sex offender” means (i) any person who has been adjudicated or convicted of a sex offense or has a founded child sexual abuse status by the Department of Social Services; (ii) any person for whom any court has found sufficient evidence without specific finding of guilt of committing a felony or misdemeanor which may be reasonably inferred to be sexually motivated; or (iii) any person who admits to or acknowledges behavior which would result in adjudication, conviction, or a founded child sexual abuse status.

“Sex offense” means behavior in violation of any of the following statutes in the Code of Virginia: § 18.2-48 in part (abduction of any person with intent to defile such person), § 18.2-60.3 in part (includes only those instances in which sexual motivation can be reasonably inferred), § 18.2-61, § 18.2-63, § 18.2-64.1, § 18.2-67.1, § 18.2-67.2, § 18.2-67.2:1, § 18.2-67.3, § 18.2-67.4, § 18.2-67.5, § 18.2-130 in part (includes only those instances in which sexual motivation can be reasonably inferred), subsection A of § 18.2-361 in part “If any person carnally knows in any manner any brute animal” and subsection B § 18.2-361 in its entirety, § 18.2-366, § 18.2-370, § 18.2-370.1, § 18.2-374.1 (not to include plethysmographic testing materials in the possession of qualified mental health professionals or technicians), § 18.2-387.

“Supervision” means the ongoing process performed by a supervisor who monitors the performance of the person supervised and provides regular documented individual consultation, guidance and instruction with respect to the skills and competencies of the person providing sex offender treatment services.
“Supervisor” means an individual who assumes full responsibility for the education and training activities of a person as it relates to sex offender treatment and provides the supervision required by such a person. The supervisor shall be a certified sex offender treatment provider and licensed by the Board of Medicine, Nursing, Counseling, Psychology or Social Work.

“Treatment” means therapeutic intervention to change sexually abusive thoughts and behaviors which specifically addresses the occurrence and dynamics of sexual behavior and utilizes specific strategies to promote change.

Part II
Requirements for Certification

18VAC125-30-30. Prerequisites to certification.

A. Every applicant for certification by the board shall:

1. Meet the educational requirements prescribed in 18VAC125-30-40;

2. Meet the experience requirements prescribed in 18VAC125-30-50;

3. Submit to the board:

   a. A completed application form;

   b. Documented evidence of having fulfilled the education, experience, and supervision set forth in 18VAC125-30-40 and 18VAC125-30-50; and

   c. Reference letters from three licensed health care professionals familiar with and attesting to the applicant's skills and experience; and,

   d. A current report from the National Practitioner Data Bank (NPDB).

B. The board may certify by endorsement an individual who can document current certification as a sex offender treatment provider in good standing obtained by standards substantially
equivalent to those outlined in this chapter as verified by an out-of-state certifying agency on a board-approved form.

18VAC125-30-40. Educational requirements.

An applicant for certification as a sex offender treatment provider shall:

1. Document completion of one of the following degrees:
   a. A master's or doctoral degree in social work, psychology, counseling, or nursing from a regionally accredited university; or
   b. The degree of Doctor of Medicine or Doctor of Osteopathic Medicine from an institution that is approved by an accrediting agency recognized by the Virginia Board of Medicine. Graduates of institutions that are not accredited by an acceptable accrediting agency shall establish the equivalency of their education to the educational requirements of the Virginia Board of Social Work, Psychology, Counseling, Nursing or Medicine.

2. Provide documentation of 50 clock hours of training acceptable to the board in the following areas, with 15 clock hours in each area identified in subdivisions 2 a and b of this section, 10 clock hours in each area identified in subdivision 2 c of this section, and five clock hours in each area identified in subdivisions 2 d and e of this section:
   a. Sex offender assessment;
   b. Sex offender treatment interventions;
   c. Etiology/developmental issues of sex offense behavior;
   d. Criminal justice and legal issues related to sexual offending; and
   e. Program evaluation, treatment efficacy, and issues related to recidivism of sex offenders.

18VAC125-30-50. Experience requirements; supervision.

A. Registration of supervision.

1. In order to register supervision with the board, individuals shall submit:
a. A completed supervisory contract;

b. The registration fee prescribed in 18VAC125-30-20; and

c. Official graduate transcript.

2. The board may waive the registration requirement for individuals who have obtained at least five years of documented work experience in sex offender treatment in another jurisdiction. For individuals with less than five years of documented work experience, the board may accept experience hours completed in another jurisdiction towards requirements for certification if the supervisor met the requirements in 18VAC125-30-50(D) at the time supervision was provided.

B. An applicant for certification as a sex offender treatment provider shall provide documentation of having 2,000 hours of postdegree clinical experience in the delivery of clinical assessment/treatment services. At least 200 hours of this experience must be face-to-face treatment and assessment with sex offender clients.

1. The experience shall include a minimum of 100 hours of face-to-face supervision within the 2,000 hours experience with a minimum of six hours per month. A minimum of 50 hours shall be in individual face-to-face supervision. Face-to-face supervision obtained in a group setting shall include no more than six trainees in a group.

2. If the applicant has obtained the required postdegree clinical experience for a mental health license within the past 10 years, he can receive credit for those hours that were in the delivery of clinical assessment/treatment services with sex offender clients provided:

a. The applicant can document that the hours were in the treatment and assessment with sex offender clients; and

b. The supervisor for those hours can attest that he was licensed and qualified to render services to sex offender clients at the time of the supervision.
C. Supervised experience obtained in Virginia without prior written board approval shall not be accepted toward certification. Candidates shall not begin the experience until after completion of the required degree as set forth in 18VAC125-30-40. An individual who proposes to obtain supervised postdegree experience in Virginia shall, prior to the onset of such supervision, submit a supervisory contract along with the application package and pay the registration of supervision fee set forth in 18VAC125-30-20.

D. The supervisor.

1. The supervisor shall assume responsibility for the professional activities of the applicant.

2. The supervisor shall not provide supervision for activities for which the prospective applicant has not had appropriate education.

3. The supervisor shall hold a current and unrestricted license as a clinical nurse specialist, doctor of medicine or osteopathic medicine, professional counselor, marriage and family therapist, clinical social worker, or clinical psychologist and shall provide supervision only for those sex offender treatment services which he is qualified to render.

4. At the time of formal application for certification, the board approved supervisor shall document for the board the applicant's total hours of supervision, length of work experience, competence in sex offender treatment, and needs for additional supervision or training.

18VAC125-30-60. [Repealed]

18VAC125-30-70. Supervision of unlicensed persons.

Those persons providing ancillary services as part of an identified sex offender treatment program in an exempt practice situation and not meeting the educational and experience
requirements to become an applicant shall provide such services under the supervision of a
certified sex offender treatment provider.

Part III
Renewal and Reinstatement

18VAC125-30-80. Annual renewal of certificate.

A. Every certificate issued by the board shall expire on June 30 of each year.

B. Along with the renewal application, the certified sex offender treatment provider shall:

1. Submit the renewal fee prescribed in 18VAC125-30-20; and

2. Attest to having obtained six hours of continuing education as specified in 18VAC125-

30-81 in topics related to the provision of sex offender treatment within the renewal period.

Continuing education shall be offered by a sponsor or provider approved by the Virginia
Board of Social Work, Psychology, Counseling, Nursing, or Medicine or by the Association
for the Treatment of Sexual Abusers or one of its state chapters. Hours of continuing
education used to satisfy the renewal requirements for another license may be used to
satisfy the six-hour requirement for sex offender treatment provider certification, provided
it was related to the provision of sex offender treatment.

C. Certificate holders shall notify the board in writing of a change of address of record or of
the public address, if different from the address of record, within 60 days. Failure to receive a
renewal notice and application form or forms shall not excuse the certified sex offender treatment
provider from the renewal requirement.
18VAC125-30-81. Continuing education requirements.

A. Certified sex offender treatment providers shall complete a minimum of six contact hours of continuing education in topics related to the provision of sex offender treatment for each annual renewal period.

B. Continuing education shall be offered by a sponsor or provider approved by the Virginia Board of Social Work, Psychology, Counseling, Nursing, or Medicine or by the Association for the Treatment of Sexual Abusers or one of its state chapters. Hours of continuing education used to satisfy the renewal requirements for another license may be used to satisfy the six-hour requirement for sex offender treatment provider certification, provided the hours are related to the provision of sex offender treatment.

C. Attestation of completion of continuing education is not required for the first renewal following initial certification in Virginia.

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

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

F. All certificate holders shall maintain original documentation of official transcripts showing credit hours earned, or certificates of participation, for a period of three years following renewal.

G. Continuing education hours required by a disciplinary order may not be used to satisfy the requirement for renewal.
18VAC125-30-90. Reinstatement.

A. A person whose certificate has expired may renew it within one year after its expiration date by paying the renewal fee and the late renewal fee prescribed in 18VAC125-30-20.

B. A person whose certificate has expired beyond one year and who wishes to resume practice shall:

1. Submit a reinstatement application along with the reinstatement fee.
2. Provide evidence satisfactory to the board of current ability to practice.
3. Submit verification of any professional certification or licensure obtained in any other jurisdiction subsequent to the initial application for certification.

Part IV

Standards of Practice; Disciplinary Action; Reinstatement

18VAC125-30-100. Standards of practice.

A. The protection of the public health, safety, and welfare and the best interest of the public shall be the primary guide in determining the appropriate professional conduct of all certified practitioners who provide services to sex offenders.

B. Persons certified by the board and applicants under supervision shall:

1. Practice in a manner that ensures community protection and safety.
2. Treat all sex offender clients with dignity and respect, regardless of the nature of their crimes or offenses.
3. Provide or supervise only services and use only techniques for which they are qualified by education, training and experience.
4. Accurately inform sex offender clients of (i) the purposes of an interview, testing, or evaluation session; (ii) the ways in which information obtained in such sessions will be used before asking the sex offender client to reveal personal information or allowing such
information to be divulged; (iii) the methods of interventions, including any experimental methods of treatment; and (iv) the risks and benefits of any treatment.

5. Clearly document at the outset of service delivery what party the sex offender treatment provider considers to be the client and what, if any, responsibilities the provider has to all related parties;

5. Inform sex offender clients of the limits of confidentiality and any circumstances which may allow an exception to the agreed upon confidentiality, including (i) as obligated under dual-client situations, especially in criminal justice or related settings; (ii) when the client is a danger to self or others; (iii) when under court order to disclose information; (iv) in cases of suspected child abuse; and (v) as otherwise required by law.

6. Not require or seek waivers of privacy or confidentiality beyond the requirements of treatment, training, or community safety.

7. Explain to juvenile sex offender clients the rights of their parents or legal guardians, or both, to obtain information relating to the sex offender client.

8. Document the reasons for and steps taken if it becomes necessary to terminate a therapeutic relationship (e.g., when it becomes clear that the client is not benefiting from the relationship or when the sex offender treatment provider feels endangered).

Document assistance provided in making arrangements for the continuation of treatment for clients, if necessary, following termination of a therapeutic relationship:

8. Maintain sex offender client records securely, inform all employees of the rules applicable to the appropriate level of confidentiality, and provide for the destruction of records which are no longer useful.
9. Retain sex offender client records for a minimum of five years from the date of termination of services.

9. Accurately represent their areas of competence, education, training, experience, professional affiliations, credentials and published findings to ensure that such statements are neither fraudulent nor misleading.

10. Stay abreast of new developments, concepts, and practices which are important to providing appropriate professional services.

10. Maintain current competency in the areas of practice through continuing education, consultation, or other procedures consistent with current standards of scientific and professional knowledge.

11. Never engage in dual relationships with sex offender clients or former clients, or current trainees that could impair professional judgment or compromise the sex offender client's or trainee's well-being, impair the trainee's judgment, or increase the risk of sex offender client or trainee exploitation. Engaging in sexual intimacies or romantic relationships with sex offender clients or former clients, or with current trainees is strictly prohibited.

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

12. Report to the board known or suspected violations of the laws and regulations governing the practice of sex offender treatment providers, as well as any information that a sex offender treatment provider is unable to practice with reasonable skill and safety because of illness or substance abuse or otherwise poses a danger to himself, the public, or clients.
12. Be able to justify all services rendered to clients as necessary for diagnostic or therapeutic purposes;

13. Provide clients with accurate information concerning tests, reports, billing, payment responsibilities, therapeutic regime, and schedules before rendering services.

13. Avoid harming, exploiting, misusing influence, or misleading patients or clients, research participants, students, and others for whom they provide professional services and minimize harm when it is foreseeable and unavoidable;

14. Maintain cooperative and collaborative relationships with corrections/probation/parole officers or any responsible agency for purposes of the effective supervision and monitoring of a sex offender client's behavior in order to assure public safety.

15. Consider the validity, reliability, and appropriateness of assessments selected for use with sex offender clients. Where questions exist about the appropriateness of utilizing a particular assessment with a sex offender client, expert guidance from a knowledgeable, certified sex offender treatment provider shall be sought.

15. Construct, maintain, administer, interpret, and report testing and diagnostic services in a manner and for purposes that are current and appropriate. Sex offender treatment providers shall consider the validity, reliability, appropriateness and limitations of assessments and data selected for use with sex offender clients, including but not limited to the plethysmograph and polygraph. Where questions exist about the appropriateness of utilizing a particular assessment with a sex offender client, expert guidance from a knowledgeable, certified sex offender treatment provider shall be sought;

16. Recognize the sensitivity of sexual arousal assessment testing and treatment materials, safeguard the use of such materials in compliance with § 18.2-374.1:1 of the
Code of Virginia, and use them only for the purpose for which they are intended in a controlled penile plethysmographic laboratory assessment.

17. Be aware of the limitations of plethysmograph and that plethysmographic data is only meaningful within the context of a comprehensive evaluation or treatment process or both.

17. Not engage in, direct, or facilitate torture, which is defined as any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person, or in any other cruel, inhuman, or degrading behavior that causes harm;

18. Be knowledgeable of the limitations of the polygraph and take into account its appropriateness with each individual client and special client population.

18. Not engage in conversion therapy with any person under 18 years of age.

19. Withdraw from, avoid, adjust, or clarify conflicting roles with due regard for the best interest of the affected party and maximal compliance with these standards;

20. Neither accept nor give commissions, rebates, or other forms of remuneration for referral of clients for professional services. Make appropriate consultations and referrals consistent with the law based on the interest of the patients or clients;

20. Comply with all laws of the Code of Virginia applicable to the practice of sex offender treatment providers.

21. Make arrangements for another professional to deal with emergency needs of clients during periods of foreseeable absences from professional availability and provide for continuity of care when services must be terminated;

22. Conduct financial responsibilities to clients in an ethical and honest manner by:

a. Informing clients of fees for professional services and billing arrangements as soon as is feasible;
b. Informing clients prior to the use of collection agencies or legal measures to collect fees and provide opportunity for prompt payment;

c. Obtaining written consent for fees that deviate from the practitioner’s usual and customary fees for services;

d. Participating in bartering only if it is not clinically contraindicated and is not exploitative; and,

e. Not obtaining, attempting to obtain, or cooperating with others in obtaining payment for services by misrepresenting services provided, dates of services, or status of treatment;

23. Design, conduct, and report research in accordance with recognized standards of scientific competence and research ethics. Practitioners shall adhere to requirements of § 32.1-162.18 of the Code of Virginia for obtaining informed consent from patients prior to involving them as participants in human research, with the exception of retrospective chart reviews;

24. Report to the board known or suspected violations of the laws and regulations governing the practice of sex offender treatment providers, as well as any information that a sex offender treatment provider is unable to practice with reasonable skill and safety because of illness or substance abuse or otherwise poses a danger to himself, the public, or clients.

25. Comply with all laws of the Code of Virginia applicable to the practice of sex offender treatment providers.

C. In regard to confidentiality, persons regulated by the board shall:
1. Inform sex offender clients of the limits of confidentiality and any circumstances which may allow an exception to the agreed upon confidentiality, including (i) as obligated under dual-client situations, especially in criminal justice or related settings; (ii) when the client is a danger to self or others; (iii) when under court order to disclose information; (iv) in cases of suspected child abuse; and (v) as otherwise required by law.

2. Keep confidential their professional relationships with patients or clients and disclose client information to others only with written consent except as required or permitted by law. Sex offender treatment providers shall inform clients of legal limits to confidentiality.

3. Protect the confidentiality in the usage of client information and clinical materials by obtaining informed consent from the client or the client's legally authorized representative before (i) videotaping, (ii) audio recording, (iii) permitting third party observation, or (iv) using clinical information in teaching, writing, or public presentations; and

4. Not willfully or negligently breach the confidentiality between a practitioner and a client. A disclosure that is required or permitted by applicable law or beyond the control of the practitioner shall not be considered negligent or willful.

D. In regard to client records, persons regulated by the board shall:

1. Maintain timely, accurate, legible, and complete written or electronic records for each client. For a sex offender treatment provider practicing in an institutional setting, the record-keeping shall follow the policies of the institution or public facility. For a sex offender treatment provider practicing in a non-institutional setting, the record shall include:

   a. The name of the client and other identifying information;

   b. The presenting problem, purpose, or diagnosis;
c. Documentation of the fee arrangement;
d. The date and clinical summary of each service provided;
e. Any test results, including raw data, or other evaluative results obtained;
f. Notation and results of formal consults with other providers; and
g. Any releases by the client;

2. Maintain client records securely, inform all employees of the requirements of confidentiality and dispose of written, electronic, and other records in such a manner as to ensure their confidentiality; and

3. Maintain client records for a minimum of five years or as otherwise required by law from the last date of service, with the following exceptions:

   a. At minimum, records of a minor child shall be maintained for five years after attaining 18 years of age;

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

   c. Records that have been transferred pursuant to § 54.1-2405 of the Code of Virginia pertaining to closure, sale, or change of location of one's practice.

E. In regard to dual relationships, persons regulated by the board shall:

1. Not engage in a dual relationship with a person under supervision that could impair professional judgment or increase the risk of exploitation or harm. Sex offender treatment providers shall take appropriate professional precautions when a dual relationship cannot be avoided, such as informed consent, consultation, supervision, and documentation to ensure that judgment is not impaired and no exploitation occurs;
2. Not engage in sexual intimacies or a romantic relationship with a student, supervisee, resident, intern, therapy patient, client, or those included in collateral therapeutic services (such as a parent, spouse, or significant other of the client) while providing professional services. For at least five years after cessation or termination of professional services, not engage in sexual intimacies or a romantic relationship with a therapy patient, client, or those included in collateral therapeutic services. Consent to, initiation of, or participation in sexual behavior or romantic involvement with a sex offender treatment provider does not change the exploitative nature of the conduct nor lift the prohibition. Because sexual or romantic relationships are potentially exploitative, sex offender treatment providers shall bear the burden of demonstrating that there has been no exploitation, based on factors such as duration of therapy, amount of time since therapy, termination circumstances, client's personal history and mental status, and adverse impact on the client;

3. Not engage in a personal relationship with a former client in which there is a risk of exploitation or potential harm or if the former client continues to relate to the sex offender treatment provider in his professional capacity; and

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

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

Commented [LJ/6]: This was added to the pending changes to LCP regulations but it doesn't appear that CSOTPs are included in this Code. Elaine, please let me know if I missed it.
18VAC125-30-110. Grounds for disciplinary action.

The board may revoke, suspend, restrict or refuse to issue a certificate, or reprimand or fine a practitioner in accord with the following:

1. Violation of provisions of this chapter, including the standards of practice set forth in 18VAC125-30-100.

2. Conviction of a felony or a misdemeanor involving moral turpitude (i.e., relating to lying, stealing or cheating).

3. Misuse of drugs or alcohol which interferes with professional functioning. Demonstrating an inability to practice as a sex offender treatment provider with reasonable skill and safety to clients by reason of illness or substance misuse, or as a result of any mental, emotional, or physical condition.

4. Mental or physical illness which interferes with professional functioning. Conducting one’s practice in such a manner so as to make it a danger to the health and welfare of a client or to the public.

5. The denial, revocation, suspension, or restriction of a health or mental health registration, license or certificate to practice in Virginia or in another U.S. state, or a United States possession or territory or the surrender of any such registration, license or certificate while an active investigation is pending or in lieu of disciplinary action.

6. Engaging in intentional or negligent conduct that causes or is likely to cause injury to a client;

7. Knowingly allowing persons under supervision to jeopardize client safety or provide care to clients outside of such person's scope of practice or area of responsibility;

8. Performing functions outside areas of competency;
9. Failing to comply with the continuing education requirements set forth in this chapter;

10. Performing an act or making statements that are likely to deceive, defraud, or harm the public;

11. Failing to cooperate with an employee of the Department of Health Professions in the conduct of an investigation;

12. Procuring, attempting to procure, or maintaining a certificate or registration by fraud or misrepresentation;

13. Violating or aiding and abetting another to violate any statute applicable to the practice of the profession, including § 32.1-127.1:03 of the Code of Virginia relating to health records; or

14. Failing to report evidence of child abuse or neglect as required in § 63.2-1509 of the Code of Virginia, or abuse of aged and incapacitated adults as required in § 63.2-1606 of the Code of Virginia.