

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 is available to the public pursuant to Virginia Code Section 2.2-3707.

10:00 a.m. Call to Order – Elke Cox, LCSW, Chairperson

- Welcome/Introductions/Establishment of a Quorum
- Mission of the Board/Emergency Egress Procedures2

Adoption of Agenda*

Approval of Minutes of February 6, 2026 Regulatory Committee Meeting *3

Public Comment

The Board will receive public comment related to agenda items. 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.

Legislative and Regulatory Report – Erin Barrett, JD, DHP Director of Legislative and Regulatory Affairs, and Matt Novak, Agency Regulatory Coordinator

- Continued discussion of changes to combine LMSW and LCSW supervisee statuses7

Old Business

- Exam alternatives
 - ASWB March 6, 2026 presentation.....27

Next Meeting: August 14, 2026

Meeting Adjournment

* Indicates a Board Vote is required.

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.

EMERGENCY EGRESS

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DRAFT
Virginia Board of Social Work
Regulatory Committee Meeting Minutes
Friday, February 6, 2026, at 10:00 a.m.
9960 Mayland Drive, Henrico, VA 23233
Board Room 3

- PRESIDING OFFICER:** Elke Cox, MSW, LCSW
- BOARD MEMBERS PRESENT:** Denise Purgold, MSW, LCSW
 Sherwood Randolph, Jr., MSW, LCSW
 Teresa Reynold, MSW, LCSW
- BOARD STAFF PRESENT:** Krystal Blanton, Discipline & Compliance Case Specialist
 Jennifer Lang, Acting Executive Director
 Charlotte Lenart, Deputy Executive Director
 Sharniece Vaughan, Licensing & Operations Supervisor
 Rebecca Walker, Licensing Specialist
- DHP STAFF PRESENT:** Matt Novak, Agency Regulatory Coordinator, Department of Health Professions
- PUBLIC ATTENDEES:** John Richardson-Lauve, LCSW
 Mark Smith, Greater Washington Society for Clinical Social Work (GWSCSW),
 Virginia Society of Clinical Social Work (VSCSW)
- CALL TO ORDER:** Ms. Cox called the Regulatory Committee meeting to order at 10:03 a.m.
- ESTABLISHMENT OF A QUORUM:** Four members of the regulatory committee were present; therefore, a quorum was established.
- MISSION STATEMENT:** Ms. Cox read the mission statement of the Department of Health Professions, which was also the mission statement of the Board.
- ADOPTION OF AGENDA:** The agenda was adopted as presented.
- Action Item:**
 Mr. Sherwood from the Ad Hoc Committee requested the Committee address exam alternatives at the next meeting in May.
- PUBLIC COMMENT:** No public comment was provided.
- APPROVAL OF MINUTES:** The meeting minutes from September 12, 2025, were approved as presented.
- LEGISLATIVE & REGULATORY REPORT:** **Discussion on LMSWs and Supervisee in Social Work Conversion**
- Mr. Novak provided an overview of HB1897 from the 2025 General Assembly session, which requires the Board to amend its regulations to allow master's-level social workers to engage in clinical services under supervision. He noted that the Notice of Intended Regulatory Action (NOIRA) submitted in September 2025 reflects the Board's intent to consolidate the requirements and credentials for the Licensed Master Social Worker (LMSW) and the Supervisee in Social Work registration. This initiative is intended to create a clearer and more streamlined pathway to licensure. He further stated that this process may require several Regulatory Committee meetings to address issues related to establishing new

requirements and combining the two credentials.

Ms. Lang provided an overview of the changes to the scope of practice and informed the Committee that she and Ms. Lenart had drafted preliminary regulatory amendments to support the consolidation of the two credentials. Ms. Lenart outlined several key assumptions, including requiring LMSWs to hold an MSW with a clinical course of study, requiring individuals providing clinical services to practice under Board-approved supervision, and allowing LMSWs to practice indefinitely, amending timeframes for completing supervised hours or passing the examination.

The Committee discussed the need to address LMSWs who are currently licensed but did not complete a clinical course of study, including whether they should be permitted to provide clinical services under supervision and whether they should be grandfathered into the new structure with the requirement to complete a clinical course of study prior to applying for Licensed Clinical Social Work (LCSW) licensure.

Ms. Lang also raised questions regarding whether LMSWs who remain under ongoing supervision must be supervised specifically by LCSWs. She further inquired about the level of detail the Board should provide in defining the parameters for ongoing supervision when an LMSW is not pursuing, nor intending to pursue, LCSW licensure.

Review of NOIRA and Proposed Regulatory Revisions

Mr. Novak directed the Committee's attention to the NOIRA and the proposed regulatory changes included in the agenda packet. He highlighted revisions and deletions proposed under 18VAC140-20-10, including updates to the definition of "supervisee" and the removal of the term "ancillary services." In response, Ms. Lenart recommended retaining the term "ancillary services," noting that its removal could create confusion.

Ms. Lang emphasized that certain definitions should remain in place, as their removal could affect the future implementation of the social work compact. She also recommended updating the definition of "supervisee" to specify that the individual holds a current, active LMSW license, has entered into a supervisory contract with a Board-approved LCSW supervisor, and provides clinical social work services under supervision.

Ms. Lenart further suggested incorporating the statutory definition of LMSW into the regulatory definition to ensure consistency between the Code and the regulations.

Mr. Randolph inquired whether obtaining the LMSW credential would be required in order to receive clinical supervision. She explained that individuals holding the LMSW would be authorized to provide non-clinical generalist services without supervision, would be required to practice under supervision when delivering clinical social work services, and would not be obligated to pursue or apply for LCSW licensure. This framework would allow LMSW-credentialed practitioners to continue practicing without seeking the LCSW credential.

Mr. Randolph asked whether candidates seeking the LCSW would be required to take two examinations, the master's examination and the clinical examination, and expressed concern about creating additional barriers for individuals entering the profession. Ms. Reynolds then inquired whether the Board could consider allowing the master's level examination to be taken prior to receiving the MSW degree,

noting that this matter might be appropriate to raise with CSWE. She also stated her support for permitting candidates to take the clinical examination earlier and at any point during their supervision period. Examination scheduling will need to be discussed with ASWB to determine whether this request can be accommodated, and Board staff will need to develop new processes to support such changes.

Ms. Purgold noted that the examination instructs candidates to answer questions as if they had just graduated and asked whether the Board could obtain visuals or infographics to illustrate the differences between the competencies assessed in the two exams. Ms. Lenart stated that she will email ASWB to have them provide this information to the Board.

The Committee then discussed whether the LBSW credential is necessary and whether maintaining the credential is meeting current workforce needs. Mr. Novak explained that removing the LBSW from the Code would require legislative action by the General Assembly.

Discussion on Generalist Services, Supervision and Reporting

Mr. Novak reviewed several proposed regulatory changes. First, he stressed the importance of revising the definition of “generalist services,” noting that the Board will need to implement these changes during the final stage of the regulatory process.

Under 18VAC140-20-40 of the regulations, the Committee discussed several proposed modifications to this section, which will consolidate the LCSW and LMSW examination requirements into a single section.

The Committee discussed the current requirements and the proposed amendments to 18VAC140-20-50, noting several changes under consideration related to the experience requirements for LCSW licensure.

Specifically, LMSW’s working toward LCSW licensure must:

- Maintain an active LMSW license. Hours accrued with an inactive or expired license, would not be accepted toward licensure.
- Be supervised by an LCSW listed on the Board’s supervisor registry.
- Complete 3,000 hours, a minimum of 1,380 must be in direct, face-to-face client-contact providing clinical services.
- Complete a minimum of 100 hours must of face-to-face supervision with an approved supervisor, completing a minimum of one and a maximum of 4 hours per 40 hours of work experience.
 - No more than 50 hours of the required 100 may occur in group supervision.
 - Group supervision must comprise no more than six supervisees per session.
- Complete supervised experience in no less than two years.
- Complete at least 500 hours of face-to-face client contact and 35 hours of supervision within four years immediately prior to submitting an application for LCSW licensure.
- Post-master’s experience completed outside Virginia must include evidence that the supervision met the jurisdiction’s requirements where it was completed.
- LMSWs must comply with renewal requirements to maintain active an active license.
- The term supervisory “agreement” will be changed to “contract” to align with current definition.
- Clarify and amend responsibilities of supervisors, including:

- Ensure that supervisees only practice within the scope of the supervisee’s education and training.
- Maintain a copy of the supervisory contract and supervision documentation for five years post-supervision.
- Complete evaluation forms to be given to the supervisee at the end of each six-month period.
- Document the hours of experience completed and an evaluation of the supervisee’s competency on board approved form. If the supervision is terminated due to safety of practice concerns, the supervisor must notify the board withing 60 days of termination of the supervision.
- Clarify and amend responsibilities of supervisee, including:
 - During the supervised experience, supervisee must use their names and initial s of their degree and LMSW in all written communications
 - Maintain a copy of their supervisory contracts and supervision documentation.

Sections 18VAC140-20-51 and 18VAC140-20-60 of the regulations will have LMSW-specific requirements removed, as these sections will be incorporated into 18VAC140-20-40. Additionally, a change to section 18VAC140-20-70 of the regulations related to the examination requirements will be tabled until the next Committee meeting.

Action Items to be discussed at the next Committee meeting:

- 1) Current LMSWs with Macro Degrees
- 2) Exam Alternatives
- 3) Ongoing Supervision
- 4) Transition from Supervisee in Social Work to LMSW Process

NEXT MEETING DATES:

The next meeting is scheduled for Friday, May 22, 2026, at 10:00a.m.

ADJOURNMENT:

Ms. Cox adjourned the Regulatory Committee meeting held on February 6, 2026.

Elke Cox, MSW, LCSW

Jennifer Lang, Acting Executive Director

Action Item: Continued Discussion of LMSW Combination Changes

Included in your Agenda Package:

- Track changes document of 18VAC140-20 with changes from last meeting

Staff Note: The goal of this meeting is to continue discussion on changes to combine LMSW and LCSW supervisee statuses. There are included comment boxes to help guide discussion. While no decision necessarily must be reached today, if the committee finishes revisions and is comfortable with what is presented, a recommendation may be made to the Board to adopt these changes as a proposed stage action.

Action Needed:

- If comfortable with the proposed revisions:
 - Motion to recommend the Board of Social Work adopt proposed stage regulations as included here.

Commonwealth of Virginia



REGULATIONS
GOVERNING THE PRACTICE OF SOCIAL
WORK

VIRGINIA BOARD OF SOCIAL WORK

Title of Regulations: 18 VAC 140-20-10 et seq.

**Statutory Authority: Va. Code § 54.1-2400 and Chapter 37 of Title 54.1
of the Code of Virginia**

Revised Date: July 17, 2024

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Part I. General Provisions.

18VAC140-20-10. Definitions.

A. The following words and terms when used in this chapter shall have the meanings ascribed to them in § 54.1-3700 of the Code of Virginia:

Baccalaureate social worker

Board

Casework

Casework management and supportive services

Clinical social worker

Master's social worker

Practice of social work

Social worker

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

"Accredited school of social work" means a school of social work accredited by the Council on Social Work Education.

"Active practice" means post-licensure practice at the level of licensure for which an applicant is seeking licensure in Virginia and shall include at least 360 hours of practice in a 12-month period.

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

"Clinical course of study" means graduate course work that includes specialized advanced courses in human behavior and the social environment, social justice and policy, psychopathology, and diversity issues; research; clinical practice with individuals, families, and groups; and a clinical practicum that focuses on diagnostic, prevention, and treatment services.

"Clinical social work services" include the application of social work principles and methods in performing assessments and diagnoses based on a recognized manual of mental and emotional disorders or recognized system of problem definition, preventive and early intervention services, and treatment services, including psychosocial interventions, psychotherapy, and counseling for mental disorders, substance abuse, marriage and family dysfunction, and problems caused by social and psychological stress or health impairment.

"Conversion therapy" means any practice or treatment as defined in § 54.1-2409.5 A of the Code of Virginia.

"Exempt practice" is that which meets the conditions of exemption from the requirements of licensure as defined in § 54.1-3701 of the Code of Virginia.

"Face-to-face " means the physical presence of the individuals involved in the supervisory relationship during either individual or group supervision or in the delivery of clinical social work services by a supervisee and may include the use of technology that provides real-time, interactive contact among the individuals involved.

"Generalist social work" means non-clinical practice at the case management level which involves engaging, assessing, intervening, evaluating, supporting, educating, and organizing with and on behalf of individuals, families, and collections of people. Work may include case management services with individuals, families, and groups, community development, organizational development, and evaluation to ensure that services are useful, effective, and ethical.

Commented [MN1]: This is the definition included in a separate regulatory action related to section 37. Included for awareness.

"LBSW" means a licensed baccalaureate social worker.

"LMSW" means a licensed master's social worker.

"Nonexempt practice" means that which does not meet the conditions of exemption from the requirements of licensure as defined in § 54.1-3701 of the Code of Virginia.

"Supervisee" means an individual who ~~has submitted a supervisory contract and has received board approval to provide clinical services in social work under supervision~~ holds a current, active license as a LMSW, has entered into a supervisory contract with a board-approved LCSW supervisor, and provides clinical social work services under supervision.

"Supervision" means a professional relationship between a supervisor and supervisee in which the supervisor directs, monitors and evaluates the supervisee's social work practice while promoting development of the supervisee's knowledge, skills and abilities to provide social work services in an ethical and competent manner.

"Supervisory contract" means an agreement that outlines the expectations and responsibilities of the supervisor and supervisee in accordance with regulations of the board.

18VAC140-20-20. [Repealed]

18VAC140-20-30. Fees.

A. The board has established fees for the following:

1. Registration of supervision	\$50
2. Addition to or change in registration of supervision	\$25
3-1. Application processing	
a. Licensed clinical social worker	\$165
b. LBSW	\$100
c. LMSW	\$115

4.2. Annual license renewal	
a. Registered social worker	\$25
b. Associate social worker	\$25
c. LBSW	\$55
d. LMSW	\$65
e. Licensed clinical social worker	\$90
5.3. Penalty for late renewal	
a. Registered social worker	\$10
b. Associate social worker	\$10
c. LBSW	\$20
d. LMSW	\$20
e. Licensed clinical social worker	\$30
6.4. Verification of license to another jurisdiction	\$25
7.5. Additional or replacement licenses	\$15
8.6. Additional or replacement wall certificates	\$25
9.7. Handling fee for returned check or dishonored credit or debit card	\$50
10.8. Reinstatement following disciplinary action	\$500

B. Fees shall be paid by check or money order made payable to the Treasurer of Virginia and forwarded to the board. All fees are nonrefundable.

C. Examination fees shall be paid directly to the examination service according to its requirements.

18VAC140-20-35. Sex offender treatment provider certification.

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

18VAC140-20-37. Licensure; general.

~~LBSWs and LMSWs may practice in exempt practice settings under appropriate supervision. In accordance with § 54.1-3700 of the Code of Virginia, an LBSW shall engage in the practice of social work under the supervision of a master's social worker. Only licensed clinical social workers may practice at the autonomous level.~~

A. In accordance with §54.1-3700 of the Code of Virginia, an LBSW shall engage in the practice of social work under the supervision of an LMSW or LCSW. An LBSW may practice in exempt practice settings under appropriate supervision.

B. LBSWs and LMSWs may practice generalist social work.

Commented [MN2]: This is the currently proposed language in a separate action with slight staff modifications. This section is connected to the definition of "generalist social work." Changes may be made to this section as necessary; this is only a starting point for discussion.

C. Only LCSWs may practice at the autonomous level.

Part II. Requirements for Licensure.

18VAC140-20-40. Requirements for licensure by examination as a clinical social worker or a licensed master's social worker.

A. Every applicant for examination for licensure as a licensed clinical social worker or as a licensed master's social worker shall:

1. Meet the education requirements prescribed in 18VAC140-20-49; and ~~experience requirements prescribed in 18VAC140-20-50.~~
2. Submit a completed application to the board office ~~within two years of completion of supervised experience~~ to include:

~~a. Documentation, on the appropriate forms, of the successful completion of the supervised experience requirements of 18VAC140-20-50 along with documentation of the supervisor's out-of-state license where applicable. Applicants whose former supervisor is deceased, or whose whereabouts is unknown, shall submit to the board a notarized affidavit from the present chief executive officer of the agency, corporation or partnership in which the applicant was supervised. The affidavit shall specify dates of employment, job responsibilities, supervisor's name and last known address, and the total number of hours spent by the applicant with the supervisor in face to face supervision;~~

~~b.~~ The application fee prescribed in 18VAC140-20-30;

~~e.b.~~ Official transcript ~~or~~ and documentation submitted from the appropriate institutions of higher education that verifies successful completion of educational requirements set forth in 18VAC140-20-49;

~~d.c.~~ Documentation of any other health or mental health licensure, ~~or~~ certification, or registration, if applicable; ~~and~~

~~e.d.~~ A current report from the U.S. Department of Health and Human Services National Practitioner Data Bank (NPDB); and

f. Evidence of passage of the examination prescribed in 18VAC140-20-70.

B. Applicants for licensure by examination as a clinical social worker shall also provide documentation on the appropriate forms of the successful completion of the supervised experience requirements of 18VAC140-20-50 along with copies of semi-annual evaluation forms and documentation of the supervisor's out-of-state license, where applicable.

Commented [MN3]: Changed from quarterly

C. For applicants whose former supervisor is deceased or otherwise incapable of verifying supervision, they shall submit to the board an affidavit from the present chief executive officer or top leadership official of the agency, corporation, or partnership in which the applicant was supervised. The affidavit shall specify dates of employment, job responsibilities, supervisor's name and last known address, the total number of face-to-face client contact hours and hours spent by the applicant with the supervisor in face-to-face supervision.

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~~3. Provide evidence of passage of the examination prescribed in 18VAC140-20-70.~~

18VAC140-20-45. Requirements for licensure by endorsement.

A. Every applicant for licensure by endorsement shall submit in one package:

1. A completed application and the application fee prescribed in [18VAC140-20-30](#).
2. Documentation of active social work licensure in good standing obtained by standards required for licensure in another jurisdiction as verified by the out-of-state licensing agency. Licensure in the other jurisdiction shall be of a comparable type as the licensure that the applicant is seeking in Virginia.
3. Verification of a passing score on a board-approved national exam at the level for which the applicant is seeking licensure in Virginia. The board may accept evidence that a national examination was not required for licensure by the other jurisdiction at the time the applicant was initially licensed.
4. Documentation of any other health or mental health licensure, ~~or~~ certification, or registration, if applicable.
5. A current report from the U.S. Department of Health and Human Services National Practitioner Data Bank (NPDB).
6. Certification that the applicant is not the respondent in any pending or unresolved board action in another jurisdiction or in a malpractice claim.

B. If an applicant for licensure by endorsement has not passed a board-approved national examination at the level for which the applicant is seeking licensure in Virginia, the board may approve the applicant to sit for such examination.

18VAC140-20-49. Educational requirements for a licensed clinical social worker and a licensed master's social worker.

A. The applicant for licensure as a clinical social worker or as a licensed master's social worker shall document successful completion of one of the following: (i) a master's degree in social work with a clinical course of study from a program accredited by the Council on Social Work Education, (ii) a master's degree in social work with a nonclinical concentration from a program accredited by the Council on Social Work Education together with successful completion of the educational requirements for a clinical course of study through a graduate program accredited by the Council on

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Social Work Education, or (iii) a program of education and training in social work at an educational institution outside the United States recognized by the Council on Social Work Education.

B. The requirement for a clinical practicum in a clinical course of study shall be a minimum of 600 hours, which shall be integrated with clinical course of study coursework and supervised by a person who is a licensed clinical social worker or who holds a master's or doctor's degree in social work and has a minimum of three years of experience in clinical social work services after earning the graduate degree. An applicant who has otherwise met the requirements for a clinical course of study but who did not have a minimum of 600 hours in a supervised field placement/practicum in clinical social work services may meet the requirement by obtaining an equivalent number of hours of supervised practice in clinical social work services in addition to the experience required in 18VAC140-20-50.

18VAC140-20-50. Experience requirements for a licensed clinical social worker.

~~A. Requirements for supervised experience. Supervised post-master's degree experience without prior written board approval will not be accepted toward licensure, except supervision obtained in another United States jurisdiction may be accepted if it met the requirements of that jurisdiction. Prior to registration for supervised experience, a person shall satisfactorily complete the educational requirements of 18VAC140-20-49.~~

~~1. Registration. An individual who proposes to obtain supervised post-master's degree experience in Virginia shall, prior to the onset of such supervision, or whenever there is an addition or change of a supervisor to a supervisor not currently approved by the board:~~

~~a. Register on a form provided by the board;~~

~~b. Submit a copy of a supervisory contract completed by the supervisor and the supervisee;~~

~~c. Submit an official transcript documenting a graduate degree and clinical practicum as specified in 18VAC140-20-49; and~~

~~d. Pay the registration of supervision fee set forth in 18VAC140-20-30.~~

~~2. Hours. The applicant shall have completed a minimum of 3,000 hours of supervised post-master's degree experience in the delivery of clinical social work services and in ancillary services that support such delivery. Of the 3,000 hours, a minimum of 1,380 hours shall be in face-to-face client contact hours. A minimum of one hour and a maximum of four hours of face-to-face supervision shall be provided per 40 hours of work experience for a total of at least 100 hours. No more than 50 of the 100 hours may be obtained in group supervision, nor shall there be more than six persons being supervised in a group unless approved in advance by the board. The board may consider alternatives to face-to-face supervision if the applicant can demonstrate an undue burden due to hardship, disability, or geography.~~

~~a. During the supervised experience, the applicant shall maintain an active LMSW issued by the Virginia Board of Social Work. Hours accrued without a license, or with a license in an inactive or expired status, shall not be accepted.~~

~~2. Supervised experience completed in Virginia shall be under the supervision of a licensed clinical social worker designated on the board's website as an approved supervisor. If post-master's supervision was completed outside of Virginia, the applicant shall submit evidence that the supervised experience met the requirements of the jurisdiction towards licensure as an independent social worker in which it was completed.~~

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Commented [MN6]: Stricken language in part moved to new #3

~~3. The applicant shall complete a minimum of 100 hours of face-to-face supervision.~~

Commented [MN7]: Language moved from old "hours" section (old #2). Part about alternatives to face-to-face eliminated.

~~a. Supervision shall occur at a minimum of one hour and a maximum of four hours per 40 hours of work experience.~~

~~b. No more than 50 of the 100 hours may be obtained in group supervision, nor shall there be more than six persons being supervised in a group.~~

~~a.4. Supervised experience shall be acquired in no less than two ~~nor more than four consecutive~~ years.~~

~~b.5. Supervisees shall obtain throughout their hours of supervision a minimum of 1,380 hours of supervised experience in face to face client contact in the delivery of clinical social work services. The remaining hours may be spent in ancillary services supporting the delivery of clinical social work services. A minimum of 500 hours of face-to-face client contact and 35 hours of supervision shall be completed within four years immediately prior to application to the board for licensure as a clinical social worker.~~

Commented [MN8]: Revisit these hours next meeting

~~6. Supervisees shall meet the renewal requirements of 18VAC140-20-105 in order to maintain a license in current, active status.~~

~~3. An individual who does not complete the supervision requirement after four consecutive years of supervised experience may request an extension of up to 12 months. The request for an extension shall include evidence that demonstrates extenuating circumstances that prevented completion of the supervised experience within four consecutive years.~~

Commented [MN9]: Eliminated

B. Requirements for supervisors.

1. The supervisor shall hold an active, unrestricted license as a licensed clinical social worker in the jurisdiction in which the clinical services are being rendered with at least two years of post-licensure clinical social work experience. The board may consider supervisors with commensurate qualifications if ~~the applicant can demonstrate an undue burden due to geography or disability or if~~ supervision was obtained in another United States jurisdiction.

2. The supervisor shall have received professional training in supervision, consisting of a three credit-hour graduate course in supervision or at least 14 hours of continuing education offered by a provider approved under [18VAC140-20-105](#). After the initial graduate course or 14 hours of continuing education in supervision, at least seven hours of continuing education in supervision shall be obtained by a supervisor within five years immediately preceding registration of supervision.

3. The supervisor shall not provide supervision for a family member or provide supervision for anyone with whom the supervisor has a dual relationship.

~~4. The board may consider supervisors from jurisdictions outside of Virginia who provided clinical social work supervision if they have commensurate qualifications but were either (i) not licensed because their jurisdiction did not require licensure or (ii) not designated as clinical social workers because the jurisdiction did not require such designation.~~

C. Responsibilities of supervisors. The supervisor shall:

1. Be responsible for the social work activities of the supervisee and for ensuring that the supervisee only practices within the scope of the supervisee's education and training as set forth in this subsection once the supervisory ~~arrangement~~ contract is accepted;

Commented [MN10]: Made this change to be consistent with the use of supervisory contract elsewhere

2. Review and approve the diagnostic assessment and treatment plan of a representative sample of the clients assigned to the applicant during the course of supervision. The sample should be representative of the variables of gender, age, diagnosis, length of treatment, and treatment method within the client population seen by the applicant. It is the applicant's responsibility to ensure the representativeness of the sample that is presented to the supervisor;
3. Provide supervision only for those social work activities for which the supervisor has determined the applicant is competent to provide to clients;
4. Provide supervision only for those activities for which the supervisor is qualified by education, training, and experience;
5. Evaluate the supervisee's knowledge and document minimal competencies in the areas of an identified theory base, application of a differential diagnosis, establishing and monitoring a treatment plan, development and appropriate use of the professional relationship, assessing the client for risk of imminent danger, understanding the requirements of law for reporting any harm or risk of harm to self or others, and implementing a professional and ethical relationship with clients;
6. Be available to the applicant on a regularly scheduled basis for supervision;
7. Maintain a copy of all supervisory contracts and supervision documentation, for five years post-supervision, ~~of which clients were the subject of supervision; and~~
8. ~~Ensure that the board is notified of any change in supervision or if supervision has ended or been terminated by the supervisor. Complete evaluation forms to be given to the supervisee at the end of each six-month period;~~
9. Document the hours of experience completed and an evaluation of the supervisee's competency on board approved forms. If the supervisee is terminated due to safety of practice concerns, notify the board within 60 days of termination of the supervision.

D. Responsibilities of supervisees.

1. Supervisees may not directly bill for services rendered or in any way represent themselves as independent, autonomous practitioners, or licensed clinical social workers.
2. During the supervised experience, supervisees shall use their names, and the ~~initials of their degree, and the title "Supervisee in Social Work"~~abbreviation of their license in all written communications.
3. Clients shall be informed in writing of the supervisee's status and the supervisor's name, professional address, and telephone number.
4. Supervisees shall not supervise the provision of clinical social work services provided by another person.
5. While providing clinical social work services, a supervisee shall remain under board-approved supervision until licensed in Virginia as a licensed clinical social worker.
6. Maintain a copy of all supervisory contracts and supervision documentation for a period of five years.

Commented [MN11]: Discussion needed about this addition

18VAC140-20-51. Requirements for licensure by examination as an LBSW ~~or LMSW.~~

A. In order to be approved to sit for the board-approved examination as an LBSW ~~or an LMSW~~, an applicant shall:

1. Meet the education requirements prescribed in 18VAC140-20-60.
2. Submit a completed application to the board office to include:
 - a. The application fee prescribed in 18VAC140-20-30; and
 - b. Official transcripts submitted from the appropriate institutions of higher education.

B. In order to be licensed by examination as an LBSW ~~or an LMSW~~, an applicant shall:

1. Meet the requirements prescribed in 18VAC140-20-60; and
2. Submit, in addition to the application requirements of subsection A of this section, the following:
 - a. Verification of a passing score on the board-approved national examination;
 - b. Documentation of any other health or mental health licensure or certification, if applicable; and
 - c. A current report from the U.S. Department of Health and Human Services National Practitioner Data Bank (NPDB).

18VAC140-20-60. Education requirements for an LBSW ~~or LMSW~~.

The applicant for licensure as an LBSW shall hold a bachelor's degree from an accredited school of social work. ~~The applicant for licensure as an LMSW shall hold a master's degree from an accredited school of social work.~~ Graduates of foreign institutions must establish the equivalency of their education to this requirement through the Foreign Equivalency Determination Service of the Council on Social Work Education.

**Part III
Examinations**

18VAC140-20-70. Examination requirement.

A. An applicant for licensure by the board as an LBSW, an LMSW, or clinical social worker shall pass a written examination prescribed by the board.

1. The examination prescribed for licensure as a clinical social worker shall be the licensing examination of the Association of Social Work Boards at the clinical level.
2. The examination prescribed for licensure as an LBSW shall be the licensing examination of the Association of Social Work Boards at the bachelor's level.

3. The examination prescribed for licensure as an LMSW shall be the licensing examination of the Association of Social Work Boards at the master's or clinical level.

~~B. An applicant approved by the board to sit for an examination shall take that examination within two years of the date of the initial board approval. If the applicant has not passed the examination by the end of the two-year period here prescribed following submission of an application for licensure, the applicant shall reapply according to the requirements of the regulations in effect at that time in order to be approved for another two years in which to pass the examination.~~

Commented [MN12]: To be revisited pending discussion with ASWB regarding examination timelines.

~~C. If an applicant for clinical social work licensure has not passed the examination within the second two-year approval period, the applicant shall be required to register for supervision and complete one additional year as a supervisee before approval for another two-year period in which to re-take the examination may be granted.~~

18VAC140-20-80 to 18VAC140-20-90. [Repealed]

Part IV. Licensure Renewal; Reinstatement.

18VAC140-20-100. Licensure renewal.

A. ~~Beginning with the 2017 renewal, licensees~~ Licensees shall renew their licenses on or before June 30 of each year and pay the renewal fee prescribed by the board.

B. Licensees who wish to maintain an active license shall pay the appropriate fee and document on the renewal form compliance with the continued competency requirements prescribed in 18VAC140-20-105. Newly licensed individuals are not required to document continuing education on the first renewal date following initial licensure.

C. A licensee who wishes to place his license in inactive status may do so upon payment of a fee equal to one-half of the annual license renewal fee as indicated on the renewal form. No person shall practice social work or clinical social work 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 18VAC140-20-110.

D. Each licensee shall furnish the board his current address of record. All notices required by law or by this chapter to be mailed by the board to any such licensee shall be validly given when mailed to the latest address of record given by the licensee. Any change in the address of record or the public address, if different from the address of record, shall be furnished to the board within 30 days of such change.

18VAC140-20-105. Continued competency requirements for renewal of an active license.

A. Licensed clinical social workers shall be required to have completed a minimum of 30 contact hours of continuing education and LBSWs and LMSWs shall be required to have completed a minimum of 15 contact hours of continuing education prior to licensure renewal in even years. Courses or activities shall be directly related to the practice of social work or another behavioral health field. A minimum of six of those hours for licensed clinical social workers and a minimum of three of those hours for licensed social workers must pertain to ethics or the standards of practice for

the behavioral health professions or to laws governing the practice of social work in Virginia. Up to two continuing education hours required for renewal may be satisfied through delivery of social work 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, as verified by the department or clinic. Three hours of volunteer service is required for one hour of continuing education credit.

1. 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 licensee prior to the renewal date. Such extension shall not relieve the licensee of the continuing education requirement.

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

B. Hours may be obtained from a combination of board-approved activities in the following two categories:

1. Category I. Formally Organized Learning Activities. A minimum of 20 hours for licensed clinical social workers or 10 hours for licensed social workers shall be documented in this category, which shall include one or more of the following:

a. Regionally accredited university or college academic courses in a behavioral health discipline. A maximum of 15 hours will be accepted for each academic course.

b. Continuing education programs offered by universities or colleges accredited by the Council on Social Work Education.

c. Workshops, seminars, conferences, or courses in the behavioral health field offered by federal, state or local social service agencies, public school systems 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 Child Welfare League of America and its state and local affiliates.
- (2) The National Association of Social Workers and its state and local affiliates.
- (3) The Association of Black Social Workers and its state and local affiliates.
- (4) The Family Service Association of America and its state and local affiliates.
- (5) The Clinical Social Work Association and its state and local affiliates.
- (6) The Association of Social Work Boards.
- (7) Any state social work board.

2. Category II. Individual Professional Activities. A maximum of 10 of the required 30 hours for licensed clinical social workers or a maximum of five of the required 15 hours for licensed social workers may be earned in this category, which shall include one or more of the following:

a. Participation in an Association of Social Work Boards item writing workshop. (Activity will count for a maximum of two hours.)

b. Publication of a professional social work-related book or initial preparation or presentation of a social work-related course. (Activity will count for a maximum of 10 hours.)

c. Publication of a professional social work-related article or chapter of a book, or initial preparation or presentation of a social work-related in-service training, seminar or workshop. (Activity will count for a maximum of five hours.)

d. Provision of a continuing education program sponsored or approved by an organization listed under Category I. (Activity will count for a maximum of two hours and will only be accepted one time for any specific program.)

e. Field instruction of graduate students in a Council on Social Work Education-accredited school. (Activity will count for a maximum of two hours.)

f. Serving as an officer or committee member of one of the national professional social work associations listed under subdivision B 1 d of this section or as a member of a state social work licensing board. (Activity will count for a maximum of two hours.)

g. Attendance at formal staffings at federal, state or local social service agencies, public school systems or licensed health facilities and licensed hospitals. (Activity will count for a maximum of five hours.)

h. Individual or group study including listening to audio tapes, viewing video tapes, or reading professional books or articles. (Activity will count for a maximum of five hours.)

18VAC140-20-106. Documenting compliance with continuing education requirements.

A. All licensees in active status are required to maintain original documentation for a period of three years following renewal.

B. The board may conduct an audit of licensees to verify compliance with the requirement for a renewal period.

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

1. Documentation of Category I activities by submission of:
 - a. Official transcripts showing credit hours earned; or
 - b. Certificates of participation.

2. Attestation of completion of Category II activities.

D. Continuing education hours required by disciplinary order shall not be used to satisfy renewal requirements.

18VAC140-20-110. Late renewal; reinstatement; reactivation.

A. An LBSW, LMSW, or clinical social worker whose license has expired may renew that license within one year after its expiration date by:

1. Providing evidence of having met all applicable continuing education requirements.

2. Paying the penalty for late renewal and the renewal fee as prescribed in [18VAC140-20-30](#).

B. An LBSW, LMSW, or clinical social worker who fails to renew the license after one year and who wishes to resume practice shall apply for reinstatement and pay the reinstatement fee, which shall consist of the application processing fee and the penalty fee for late renewal, as set forth in [18VAC140-20-30](#). An applicant for reinstatement shall also provide:

1. Documentation of having completed all applicable continued competency hours equal to the number of years the license has lapsed, not to exceed four years;

2. Documentation of any other health or mental health licensure or certification held in another United States jurisdiction, if applicable; and

3. A current report from the U.S. Department of Health and Human Services National Practitioner Data Bank.

C. An LBSW, LMSW, or clinical social worker wishing to reactivate an inactive license shall submit the difference between the renewal fee for active licensure and the fee for inactive licensure renewal and document completion of continued competency hours equal to the number of years the license has been inactive, not to exceed four years.

18VAC140-20-120. [Repealed]

18VAC140-20-130. Renewal of registration for associate social workers and registered social workers.

The registration of every associate social worker and registered social worker with the former Virginia Board of Registration of Social Workers under former §54-775.4 of the Code of Virginia shall expire on June 30 of each year.

1. Each registrant shall return the completed application before the expiration date, accompanied by the payment of the renewal fee prescribed by the board.

2. Failure to receive the renewal notice shall not relieve the registrant from the renewal requirement.

18VAC140-20-140. [Repealed]

Part V. Standards of Practice.

18VAC140-20-150. Professional conduct.

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 persons whose activities are regulated by the board. Regardless of the delivery method, whether in person, by telephone, or electronically, these standards shall apply to the practice of social work.

B. Persons licensed as LBSWs, LMSWs, and clinical social workers shall:

1. Be able to justify all services rendered to or on behalf of clients as necessary for diagnostic or therapeutic purposes.
2. Provide for continuation of care when services must be interrupted or terminated.
3. Practice only within the competency areas for which they are qualified by education and experience.
4. Report to the board known or suspected violations of the laws and regulations governing the practice of social work.
5. Neither accept nor give commissions, rebates, or other forms of remuneration for referral of clients for professional services.
6. Ensure that clients are aware of fees and billing arrangements before rendering services.
7. Inform clients of potential risks and benefits of services and the limitations on confidentiality and ensure that clients have provided informed written consent to treatment.
8. Keep confidential their therapeutic relationships with clients and disclose client records to others only with written consent of the client, with the following exceptions: (i) when the client is a danger to self or others; or (ii) as required by law.
9. When advertising their services to the public, ensure that such advertising is neither fraudulent nor misleading.
10. As treatment requires and with the written consent of the client, collaborate with other health or mental health providers concurrently providing services to the client.
11. Refrain from undertaking any activity in which one's personal problems are likely to lead to inadequate or harmful services.
12. Recognize conflicts of interest and inform all parties of the nature and directions of loyalties and responsibilities involved.
13. Not engage in conversion therapy with any person younger than 18 years of age.
14. Not engage in physical contact with a client when there is a likelihood of psychological harm to the client. Social workers who engage in physical contact are responsible for setting clear and culturally sensitive boundaries.
15. Not sexually harass clients. Sexual harassment includes sexual advances; sexual solicitation; requests for sexual favors; and other verbal, written, electronic, or physical contact of a sexual nature.

C. In regard to client records, persons licensed by the board shall comply with provisions of § [32.1-127.1:03](#) of the Code of Virginia on health records privacy and shall:

1. Maintain written or electronic clinical records for each client to include identifying information and assessment that substantiates diagnosis and treatment plans. Each record shall include a diagnosis and treatment plan, progress notes for each case activity, information received from all collaborative contacts and the treatment implications of that information, and the termination process and summary.

2. Maintain client records securely, inform all employees of the requirements of confidentiality, and provide for the destruction of records that are no longer useful in a manner that ensures client confidentiality.

3. Disclose or release records to others only with clients' expressed written consent or that of their legally authorized representative or as mandated by law.

4. Ensure confidentiality in the usage of client records and clinical materials by obtaining informed consent from clients or their legally authorized representative before (i) videotaping, (ii) audio recording, (iii) permitting third-party observation, or (iv) using identifiable client records and clinical materials in teaching, writing, or public presentations.

5. Maintain client records for a minimum of six years or as otherwise required by law from the date of termination of the therapeutic relationship with the following exceptions:

a. At minimum, records of a minor child shall be maintained for six years after attaining the age of majority or 10 years following termination, whichever comes later.

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

c. Records that have been transferred to another mental health professional or have been given to the client or the client's legally authorized representative.

D. In regard to dual relationships, persons licensed by the board shall:

1. Not engage in a dual relationship with a client or a supervisee that could impair professional judgment or increase the risk of exploitation or harm to the client or supervisee. (Examples of such a relationship include familial, social, financial, business, bartering, or a close personal relationship with a client or supervisee.) Social workers 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 have any type of romantic relationship or sexual intimacies with a client or those included in collateral therapeutic services, and not provide services to those persons with whom they have had a romantic or sexual relationship. Social workers shall not engage in romantic relationship or sexual intimacies with a former client within a minimum of five years after terminating the professional relationship. Social workers who engage in such a relationship after five years following termination shall have the responsibility to examine and document thoroughly that such a relationship did not have an exploitive nature, based on factors such as duration of therapy, amount of time since therapy, termination circumstances, client's personal history and mental status, adverse impact on the client. A client's consent to, initiation of, or participation in sexual behavior or involvement with a social worker does not change the nature of the conduct nor lift the regulatory prohibition.

3. Not engage in any romantic or sexual relationship or establish a therapeutic relationship with a current supervisee or student. Social workers shall avoid any nonsexual dual relationship with a supervisee or student in which there is a risk of exploitation or potential harm to the supervisee or student, or the potential for interference with the supervisor's professional judgment.

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

5. 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 social worker in the social worker's professional capacity.

E. 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.

18VAC140-20-160. Grounds for disciplinary action or denial of issuance of a license or registration.

The board may refuse to admit an applicant to an examination; refuse to issue a license or registration to an applicant; or reprimand, impose a monetary penalty, place on probation, impose such terms as it may designate, suspend for a stated period of time or indefinitely, or revoke a license or registration for one or more of the following grounds:

1. Conviction of a felony or of a misdemeanor involving moral turpitude;
2. Procurement of license by fraud or misrepresentation;
3. Conducting one's practice in such a manner so as to make the practice a danger to the health and welfare of one's clients or to the public. In the event a question arises concerning the continued competence of a licensee, the board will consider evidence of continuing education.
4. Being unable to practice social work with reasonable skill and safety to clients by reason of illness, excessive use of alcohol, drugs, narcotics, chemicals or any other type of material or as a result of any mental or physical condition;
5. Conducting one's practice in a manner contrary to the standards of ethics of social work or in violation of 18VAC140-20-150, standards of practice;
6. Performing functions outside the board-licensed area of competency;
7. Failure to comply with the continued competency requirements set forth in 18VAC140-20-105; and
8. Violating or aiding and abetting another to violate any statute applicable to the practice of social work or any provision of this chapter; and
9. Failure to provide supervision in accordance with the provisions of 18VAC140-20-50 or 18VAC140-20-60.

18VAC140-20-170. Reinstatement following disciplinary action.

Any person whose license has been suspended, revoked, or denied renewal by the board under the provisions of 18VAC140-20-160 shall, in order to be eligible for reinstatement, (i) submit a new application to the board for a license, (ii) pay the appropriate reinstatement fee, and (iii) submit any

other credentials as prescribed by the board. After a hearing, the board may, at its discretion, grant the reinstatement.

18VAC140-20-171. Criteria for delegation of informal fact-finding proceedings to an agency subordinate.

A. Decision to delegate. In accordance with § 54.1-2400 (10) of the Code of Virginia, the board may delegate an informal fact-finding proceeding to an agency subordinate.

B. Criteria for delegation. Cases that may not be delegated to an agency subordinate include violations of standards of practice as set forth in 18 VAC 140-20-150, except as may otherwise be determined by the probable cause committee in consultation with the board chair.

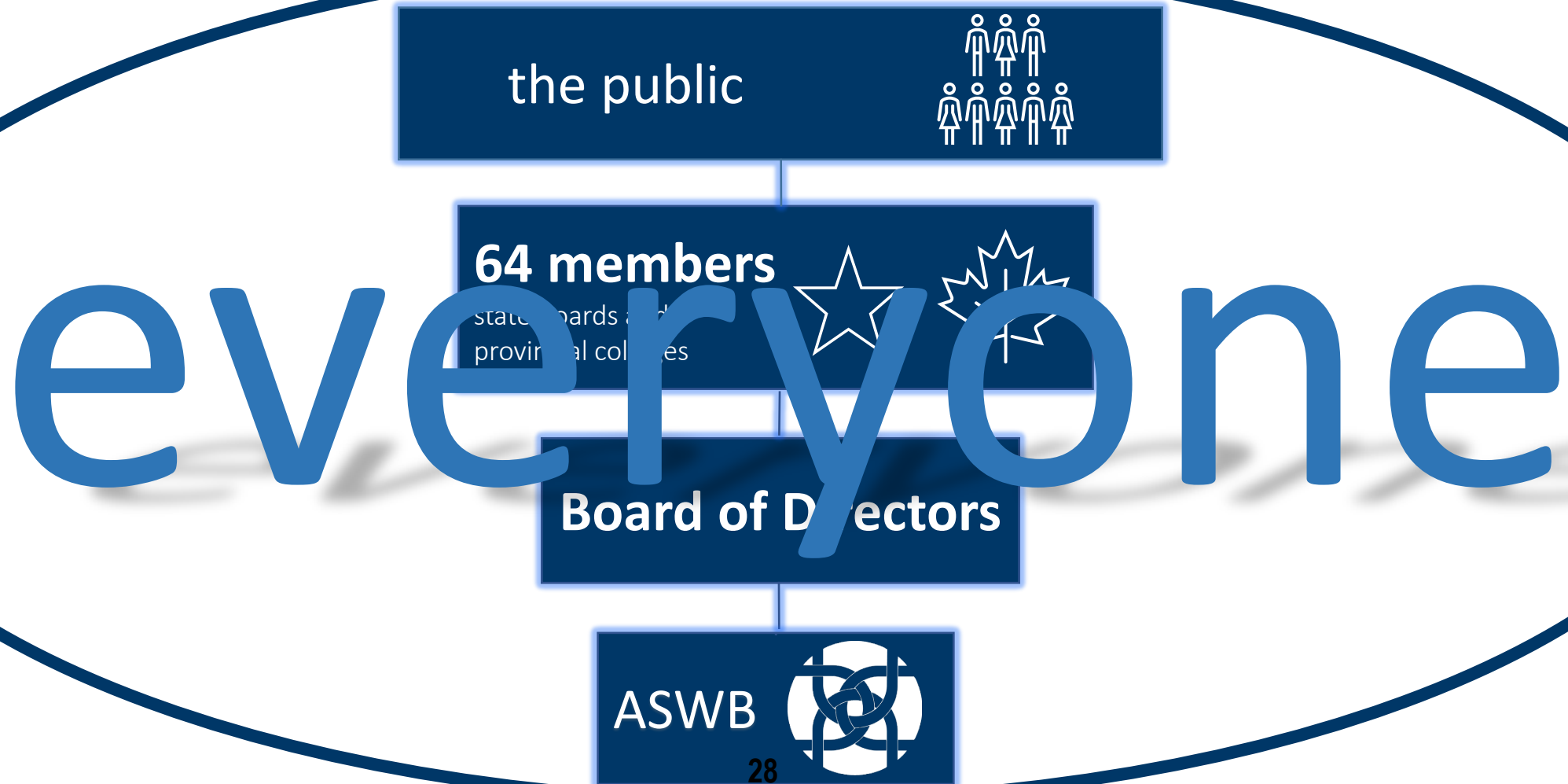
C. Criteria for an agency subordinate.

1. An agency subordinate authorized by the board to conduct an informal fact-finding proceeding may include board members and professional staff or other persons deemed knowledgeable by virtue of their training and experience in administrative proceedings involving the regulation and discipline of health professionals.

2. The executive director shall maintain a list of appropriately qualified persons to whom an informal fact-finding proceeding may be delegated.

3. The board may delegate 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 heard.

Accountability to the public

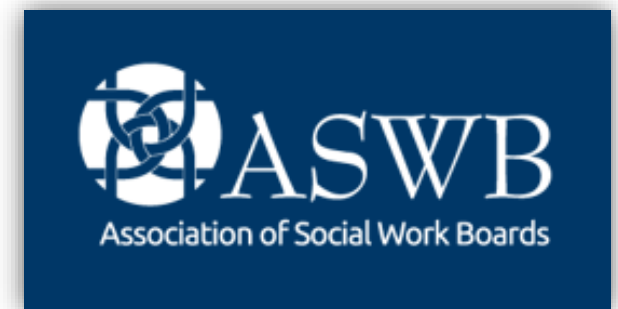
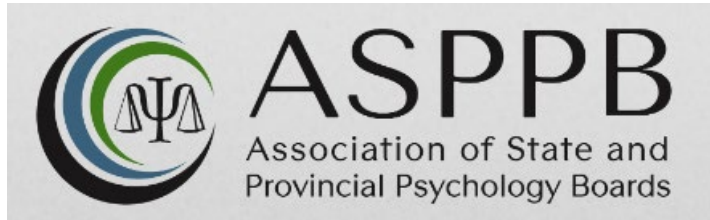


Exam categories

The regulatory board informs ASWB about the exam category that candidates are approved to take based on ASWB policy.

Category	Requirements	Purpose
Associate	Jurisdiction dependent	For use in jurisdictions that issue licenses to applicants who do not possess a social work degree
Bachelors	Bachelor's degree in social work	Basic generalist practice of baccalaureate social work
Masters	Master's degree in social work	Practice of master's social work including the application of specialized knowledge and advanced practice skills
Advanced Generalist	Master's degree in social work; two years (or commensurate experience as defined by the jurisdiction) of experience in nonclinical settings	Practice of advanced generalist social work that occurs in nonclinical settings and may include macro-level practice
Clinical	Master's degree in social work; two years (or commensurate experience as defined by the jurisdiction) of experience in clinical settings	Practice of clinical social work requiring the application of specialized clinical knowledge and advanced clinical skills

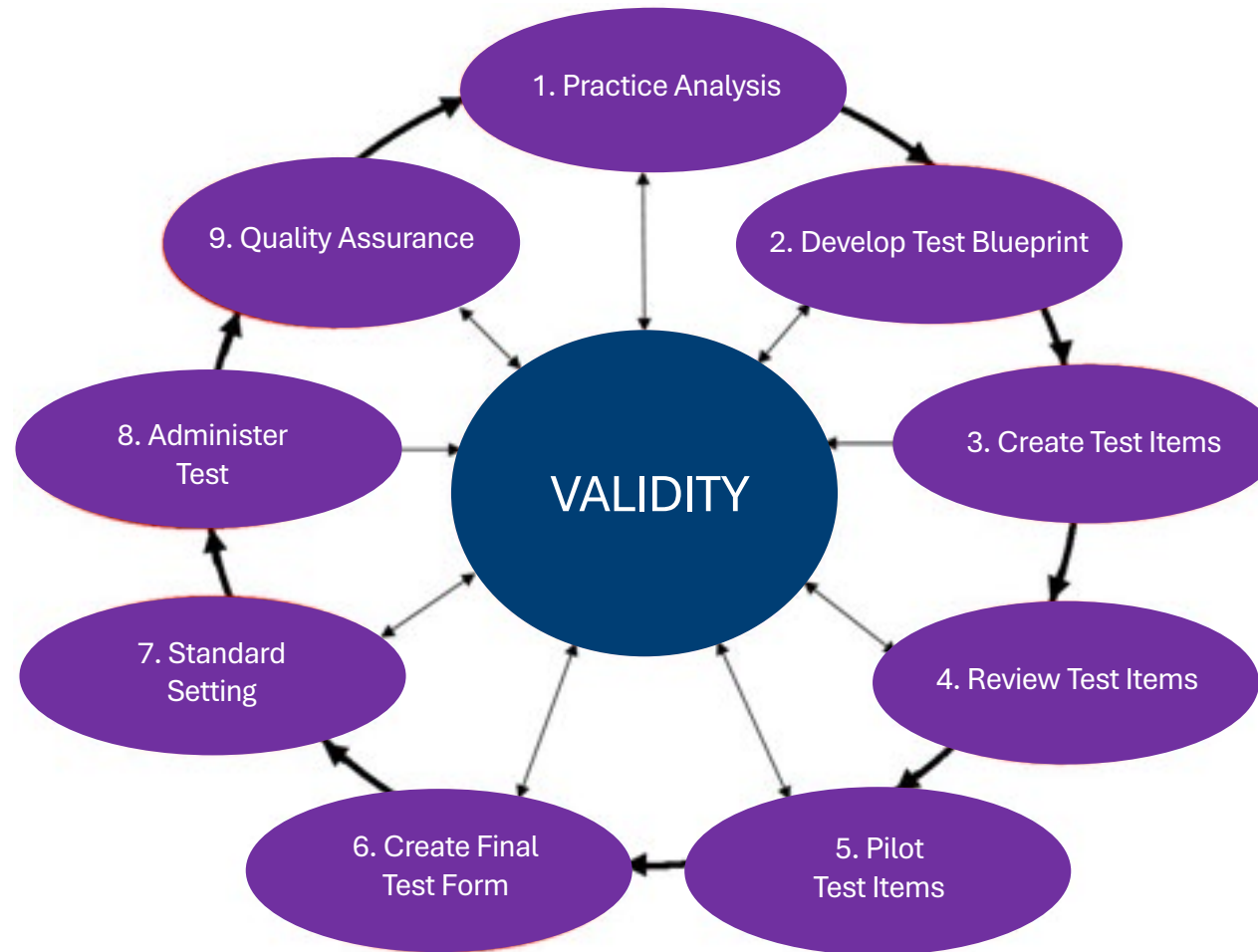
Healthcare Regulatory Associations



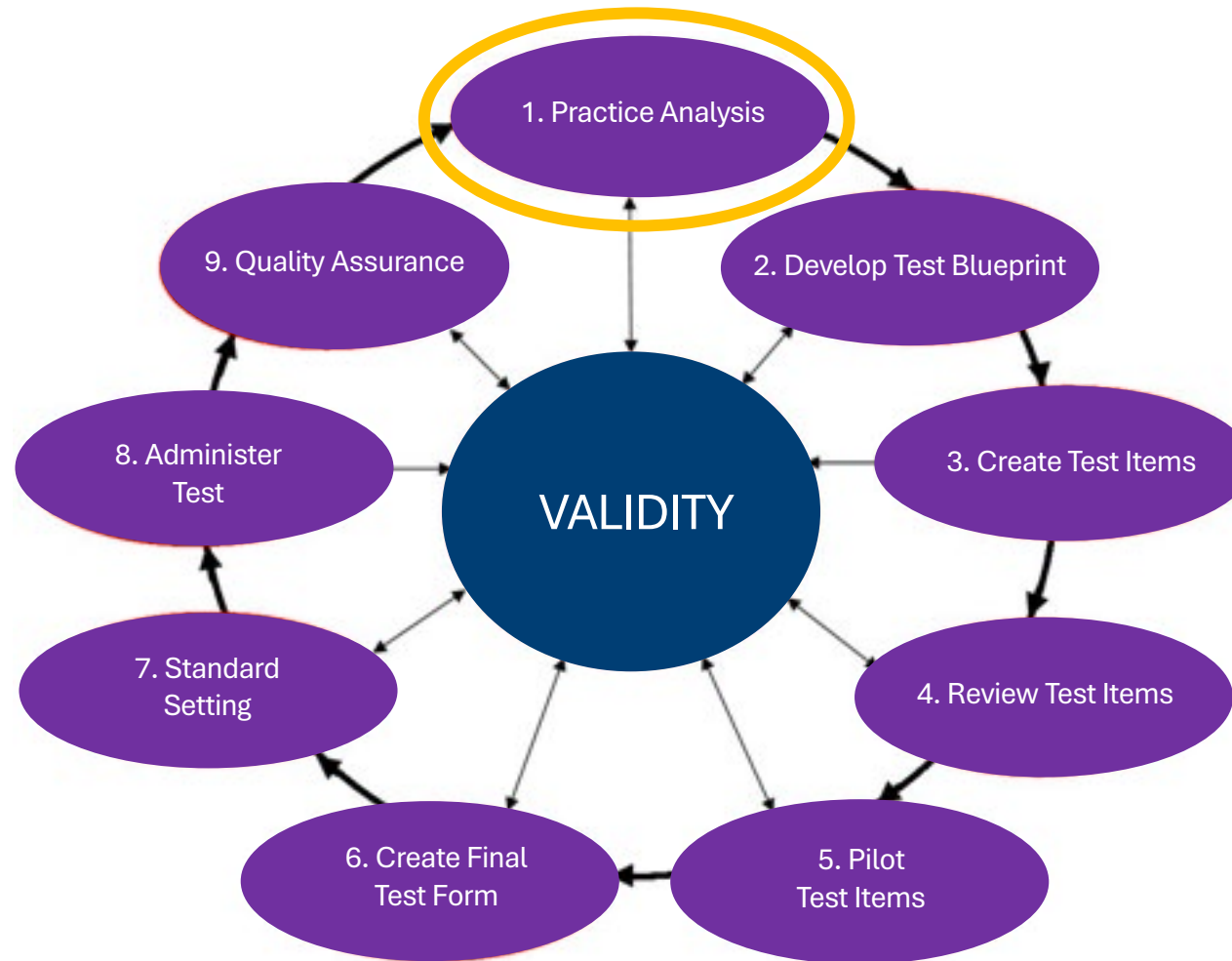
Validity

- “Does the test measure what it purports to measure?”
- Addresses the adequacy and appropriateness of the inferences made from test scores
 - Example: A medical school entrance exam purports to assess the foundational knowledge and skills needed to perform well in medical school and is designed to select students into medical programs.
 - Validity ensures the content of the exam is adequate (reflects medical knowledge and skills) and the use (selection into a medical program) is appropriate.
- Multiple ways validity can be established (depends on test context and use)

Validity



Validity



Practice Analysis Task Force 2022-2024



 HumRRO
HUMAN RESOURCES RESEARCH ORGANIZATION

2024 No. 164

2024 Analysis of the Practice of Social Work Final Report

Prepared for: Association of Social Work Boards
17126 Mountain Run Vista Ct.
Culpeper, VA 22701

Date: December 30, 2024

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2024 practice analysis

2026 Bachelors exam

2018 Comparison

- 20% Professional relationships, values, and ethics
- 25% Human development, diversity, and behavior in the environment
- 26% Interventions with clients/client systems
- 29% Assessment



2026 Masters exam

2018 Comparison

- 25% Professional relationships, values, and ethics
- 27% Human development, diversity, and behavior in the environment
- 24% Interventions with clients/client systems
- 24% Assessment and intervention planning



2026 Advanced Generalist exam

2018 Comparison

- 27% Professional relationships, values, and ethics
- 23% Human development, diversity, and behavior in the environment
- 32% Intervention processes and techniques for use across systems
- 18% Intervention processes and techniques for use with larger systems



2026 Clinical exam

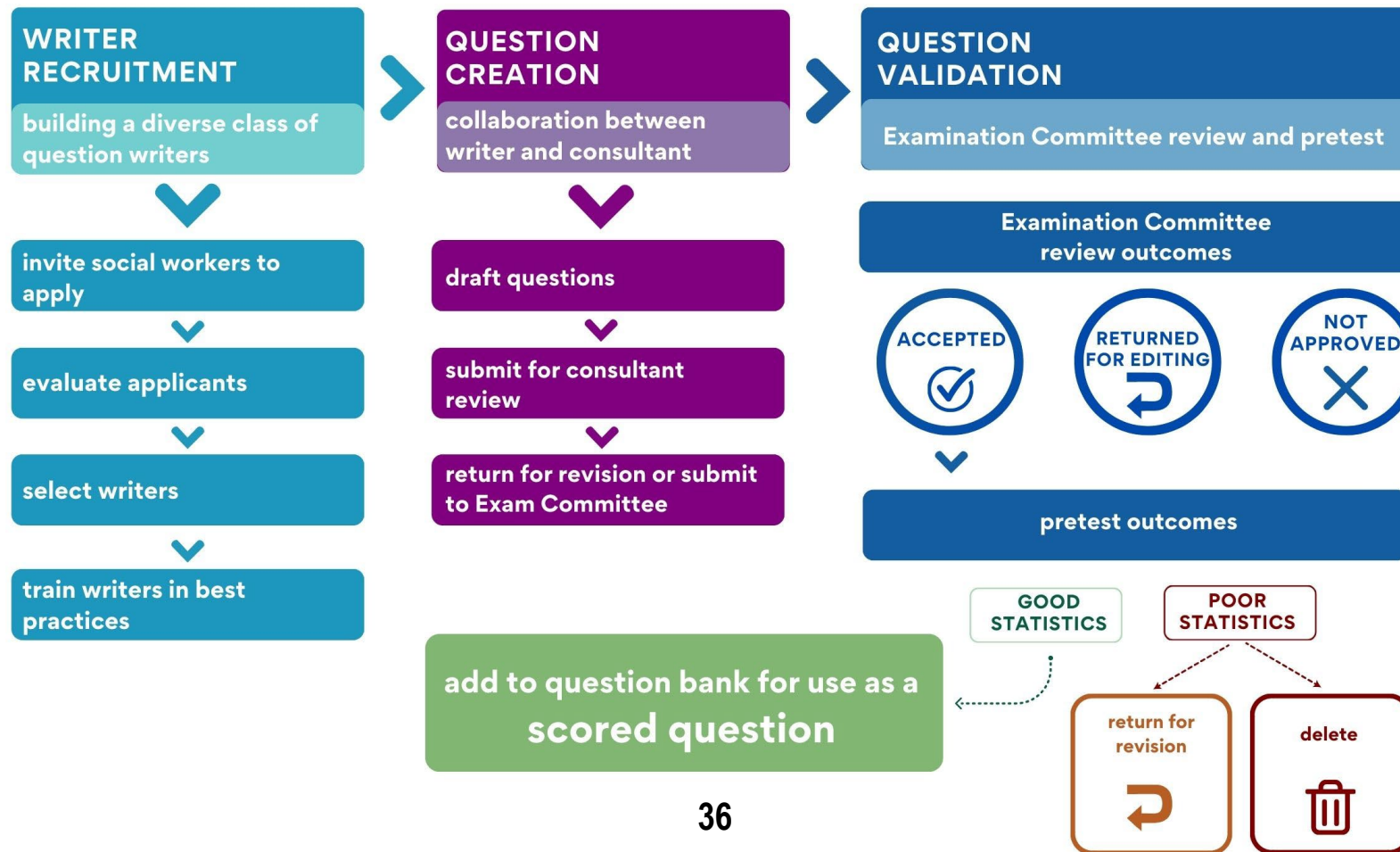
2018 Comparison

- 19% Professional values and ethics
- 24% Human development, diversity, and behavior in the environment
- 27% Psychotherapy, clinical interventions, and case management
- 30% Assessment, diagnosis, and treatment planning



Question development

ASWB examination question development process



Exam development personnel

Who is involved in exam development?

Nearly 150 individuals use input from >23,000 social workers to develop valid, reliable, and fair competence assessments.



6 staff shepherd the process



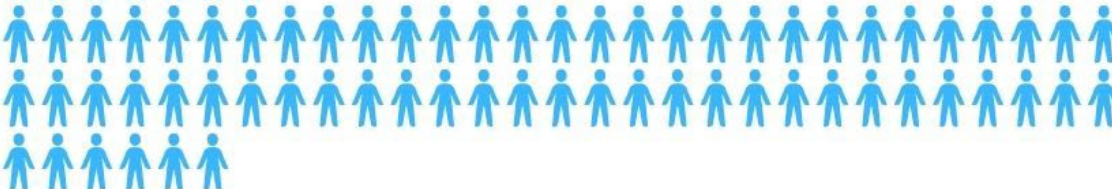
20 individuals from 3 vendor organizations support the program



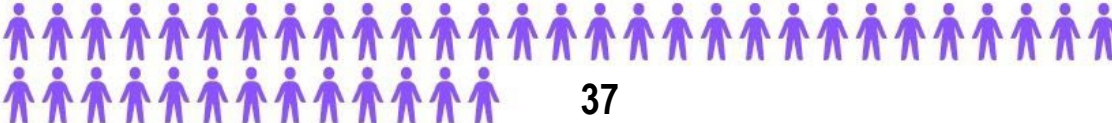
7 paid social workers with exam development expertise consult with staff, volunteers, and question writers



71 social work subject matter experts volunteer on exam committees and task forces



49 paid social workers write questions



Item writers

- Licensed social workers who represent the diversity of the profession
- Trained on standards, including avoiding bias/microaggression in questions
- Work with exam consultants to ensure every question is:
 - Fair
 - Accurate
 - Meaningful
 - Current
- Approved questions go before the Exam Committee for review



Examination Committee

- Former question writers
- Meets in-person
- Reviews every question written to ensure they are:
 - Fair
 - Accurate
 - Meaningful
 - Current
- Tweaks questions until they do meet criteria.
- Approved questions move on to pretest status to gather psychometric performance data

ASWB Examination Committee

2026

Bachelors exam



Nikki Barfield (FL)



Anita Arenson (MN)



Nelly Chow (AB)



Cole Hooley (UT)



Morgan McDowell (MN)



Marquita Thurman (MS)



Scott Wilkes (OH)

Masters exam



Alex Zamora (ID)



LeQuandra Hale-Banks (TN)



Keri Mabry (MN)



Chaundra Randle (MI)



Jodi Schollaardt (AB)



Amy Seese-Bieda (WA)



Betty Voltaire (NY)

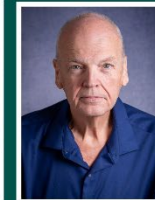
Clinical exam



Paul Perales (WI)



Olivia Fojas (CA)



Joseph Harper (IL)



Jean Leong (AB)



Catherine Simmons (CO)



Rhodalyn Thomas (CA)



Senetra Wallace (NC)

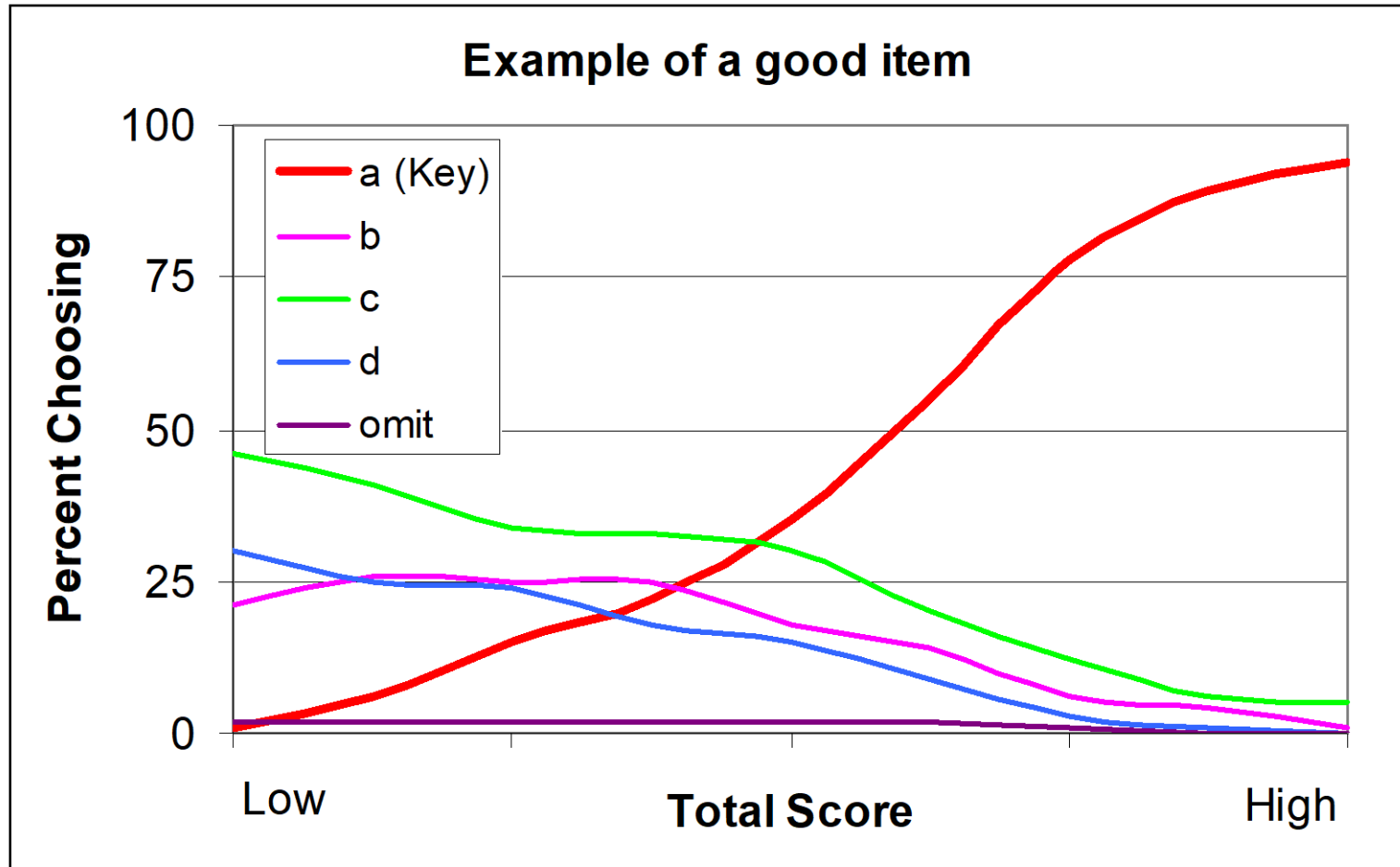
Item analysis

- All items (questions) are carefully evaluated before being included on an exam form (version), including pretested items and items that have previously appeared on an operational form.
 - Does each item behave as expected?
 - How difficult is the item?
 - How well does the item distinguish high from low ability?
 - How do the incorrect options behave?
 - Does the item have a single correct response?

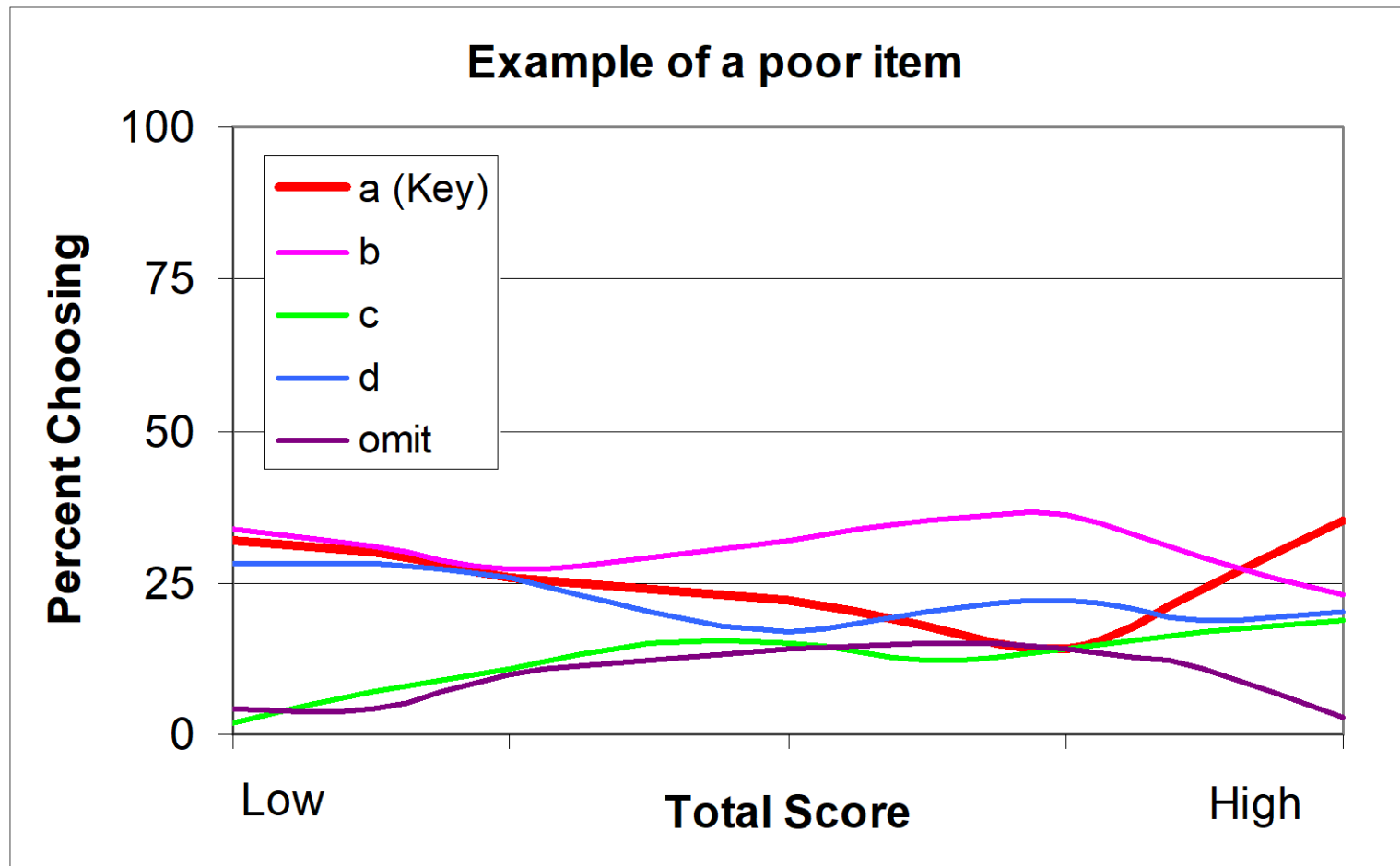
Item analysis

- We routinely monitor for the following:
 - Items that are too easy or too difficult
 - Low correlations between items and total score
 - Large proportion of high ability test-takers selecting an incorrect option
 - High rates of omission/skipping an item

Item analysis



Item analysis



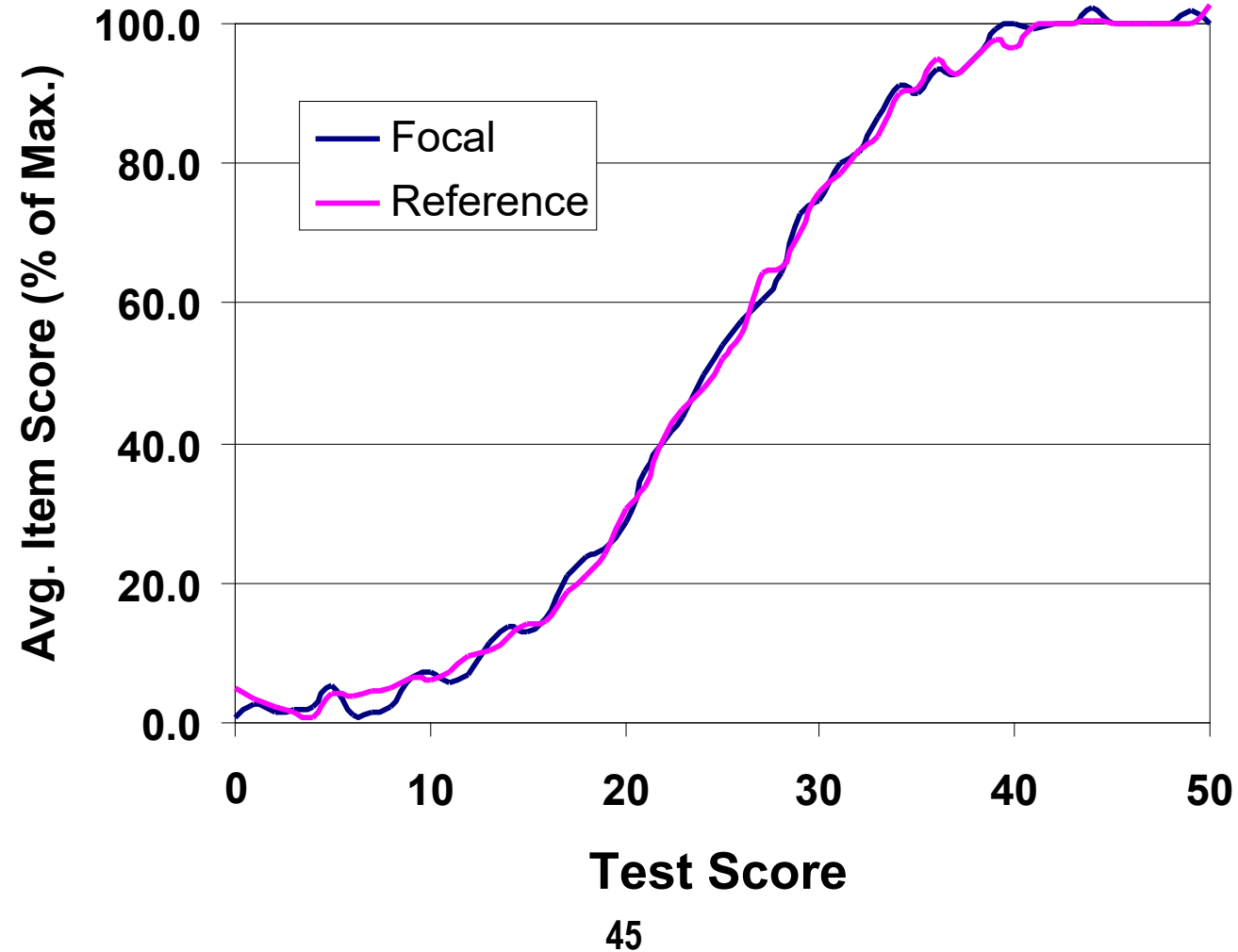
Differential Item Functioning (DIF)

- Does the item perform the same for all groups?

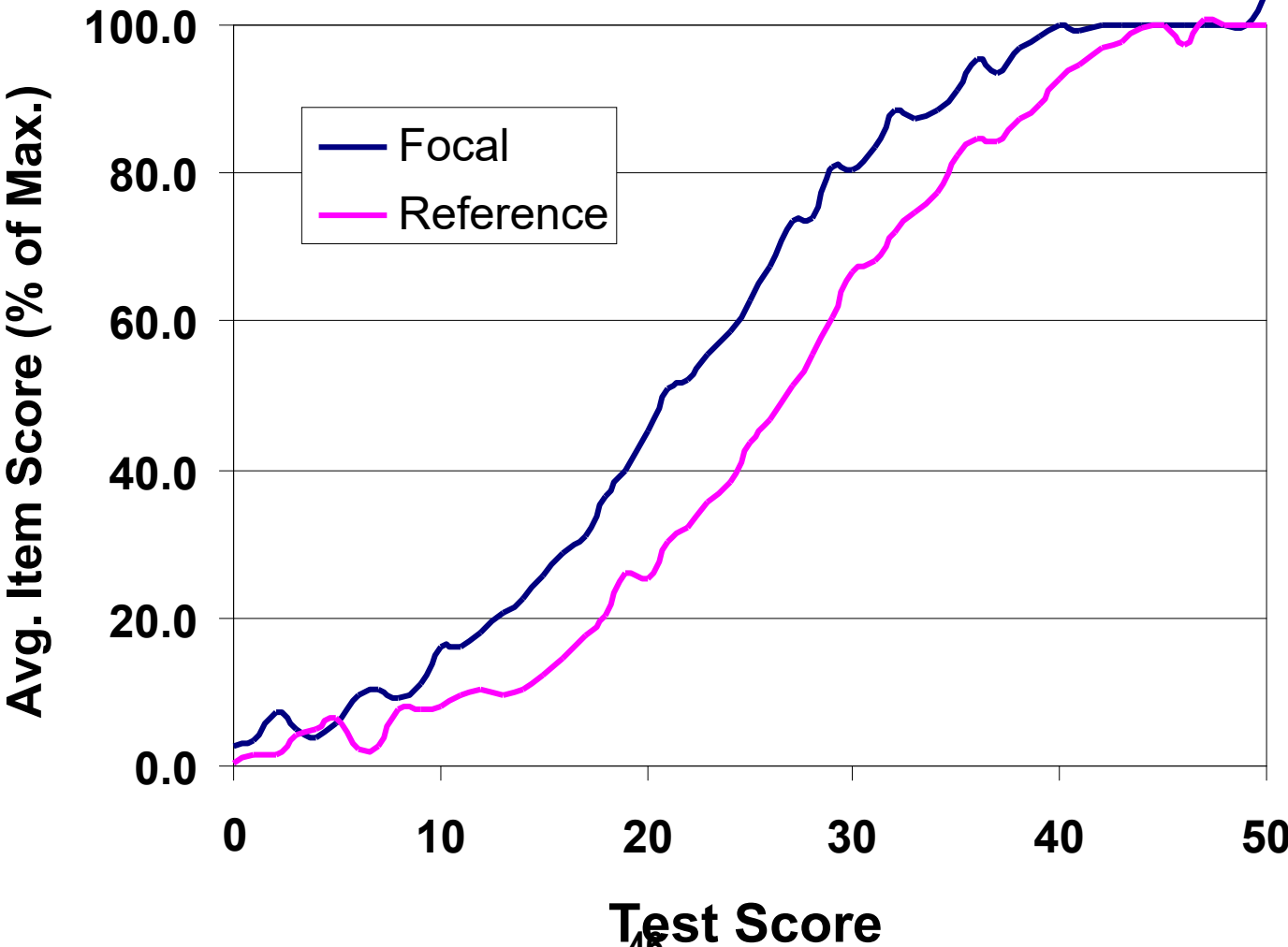
For example:

- Gender
- Race
- Language

Differential item functioning (DIF)



Differential item functioning (DIF)



Differential item functioning (DIF)

- DIF is not the same as impact.
- Impact = Difference in performance across groups
 - Often the result of group ability differences
 - Does not necessarily indicate test bias

Differential Item Functioning (DIF)

- DIF is not the same as bias.
- “Items . . . may function differently for different groups of similarly scoring test-takers. This indicates a kind of multidimensionality that may . . . conform to the test framework.” *(Standards, 2014)*

Differential Item Functioning (DIF)

- How to address DIF?
 - Testing programs often rely on SMEs to carefully review and (where possible) revise items.
 - ASWB's approach is to remove the item from the pool (the most conservative approach).

Standard setting

- Form a panel of SMEs.
- SMEs discuss the qualifications of the Minimally Competent Candidate (MCC).
- SMEs estimate how MCCs would perform on the exam.

Minimally Competent Candidate



Standard setting

The January 2026 standard setting workshop was facilitated by psychometricians.

More panelists =
increased inclusion of
perspectives

Year	Applied	Appointed
2017	1,365	50
2026	1,700+	75+



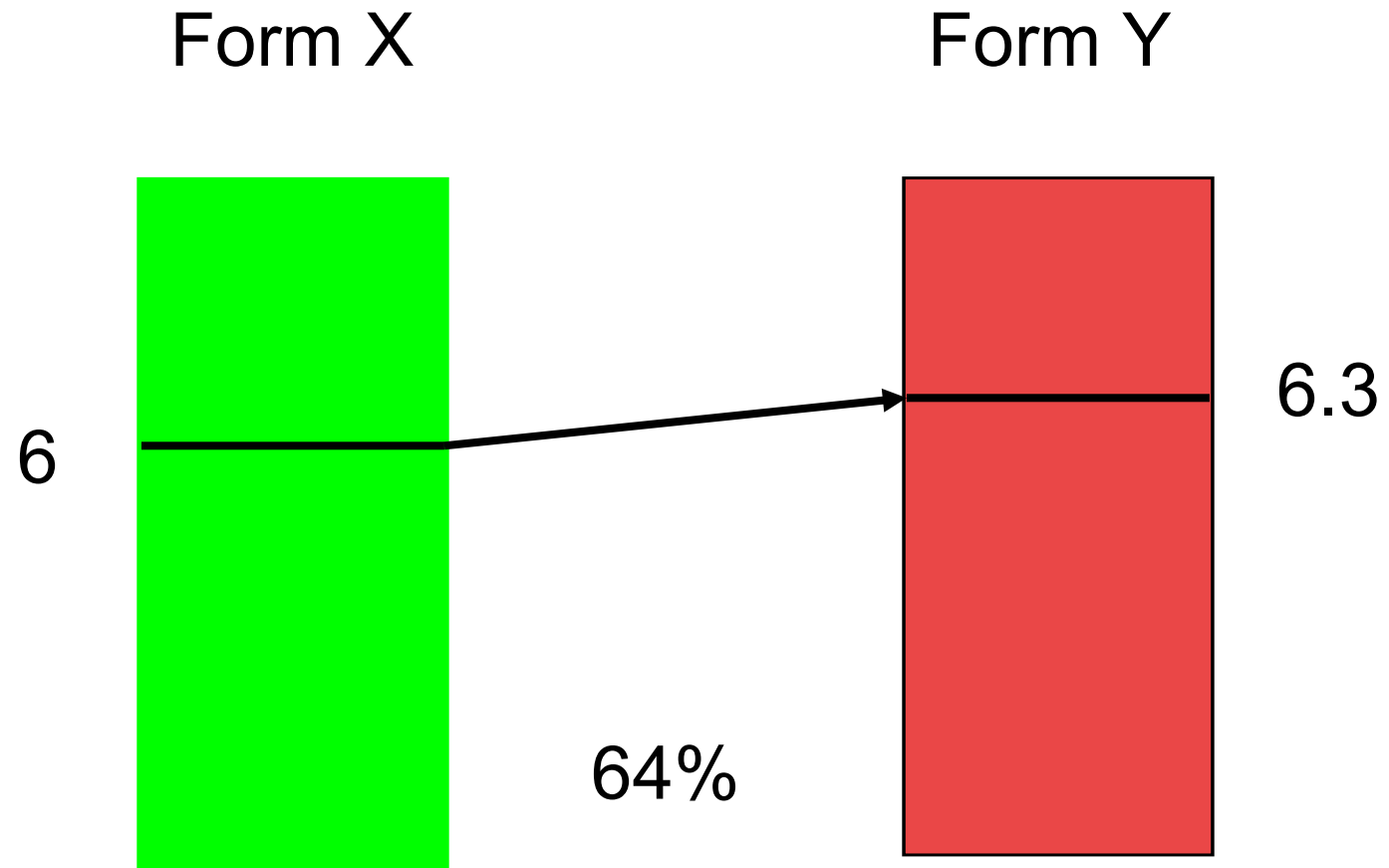
Standard setting panel, 2026 exams

- Review anchor exams
- Rate and discuss each question
- Generate important information needed to compute the passing score

Equating

- Ensures reported scores are comparable, regardless of test form (version) that is taken
- Removes score differences based on form difficulty
- Ensures only ability differences are reflected in resulting scores

Equating



Innovations and enhancements



Scheduled Break



Well-received by test-takers



Three-option multiple choice



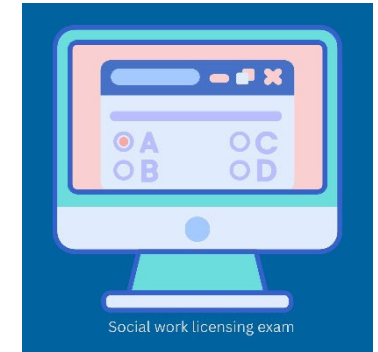
Began in 2023, gradually adding more



Secure remote online proctoring



Plan to pilot with a limited group of candidates in 2026




Exam format innovations



Currently in exploration phase

Exam administration updates



Create or sign in to your ASWB Central account!

Log in

Log in to access your account

Username

Password

Remember my username

[I forgot my username](#) | [I forgot my password](#)
[Register new account](#)

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ASWB Central allows candidates to:

- Request nonstandard testing arrangements
- Register for the social work licensing exam
- Schedule an exam appointment with Pearson VUE
- Purchase the Online Practice Test
- View and send past exam results to another jurisdiction

ASWB Central allows members to:

- Enter exam approvals
- Access official score reports
- Access score transfers

Nonstandard testing arrangements

ADA accommodations

- Disability
- Other health conditions

Nonstandard testing arrangements

- English as a second language
- Lactation

Arrangements may include:

- Extra time
- Private room
- Lactation arrangements
- Braille/Screen reader
- ASL interpreter
- Reader/Recorder
- ESL arrangements (word-to-word and/or English dictionary)



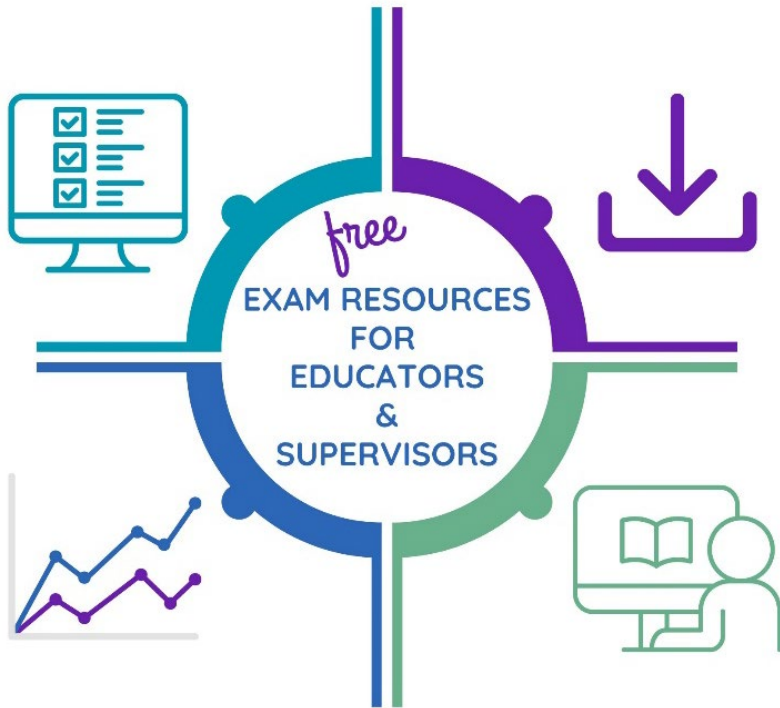
Improving access through nonstandard testing arrangements

Open-ended approvals for arrangements

- Responsive to feedback
- Applies to long-term or permanent disabilities or conditions



Exam resource development



- The free, downloadable **ASWB Examination Guidebook** makes exam information accessible, enhancing candidate understanding and preparedness.
- Faculty and supervisor resources, including a set of **group review practice questions**, are available for free to accredited schools of social work and social work supervisors.

Research initiatives

The **Community Conversations**, a series of focus groups, invited social workers to offer input and share their social work journeys.



The **Social Work Census**:

- The **Analysis of the Practice of Social Work** updated exam content for the 2026 social work licensing exams to ensure relevance and currency.
- The **Social Work Workforce Study** helped define the social work workforce and produced data for use by the profession.

Other assessment research:

- **FifthTheory Test Mastery Inclusion** program
- **Pass Rates in Context** exam report series
- Alignment study



Test-taker support

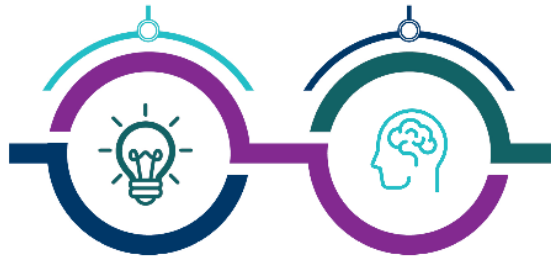


The Test Mastery Inclusion program is:

- A valid and reliable **self-development program** for test-takers preparing for a high-stakes exam
- Delivered by an **independent, minority-owned** firm with industrial-organizational psychology experts in social science research, assessment development, and coaching
- Designed to improve **equity and opportunity**
- Composed of a self-assessment tool followed by an **individualized report and resources**

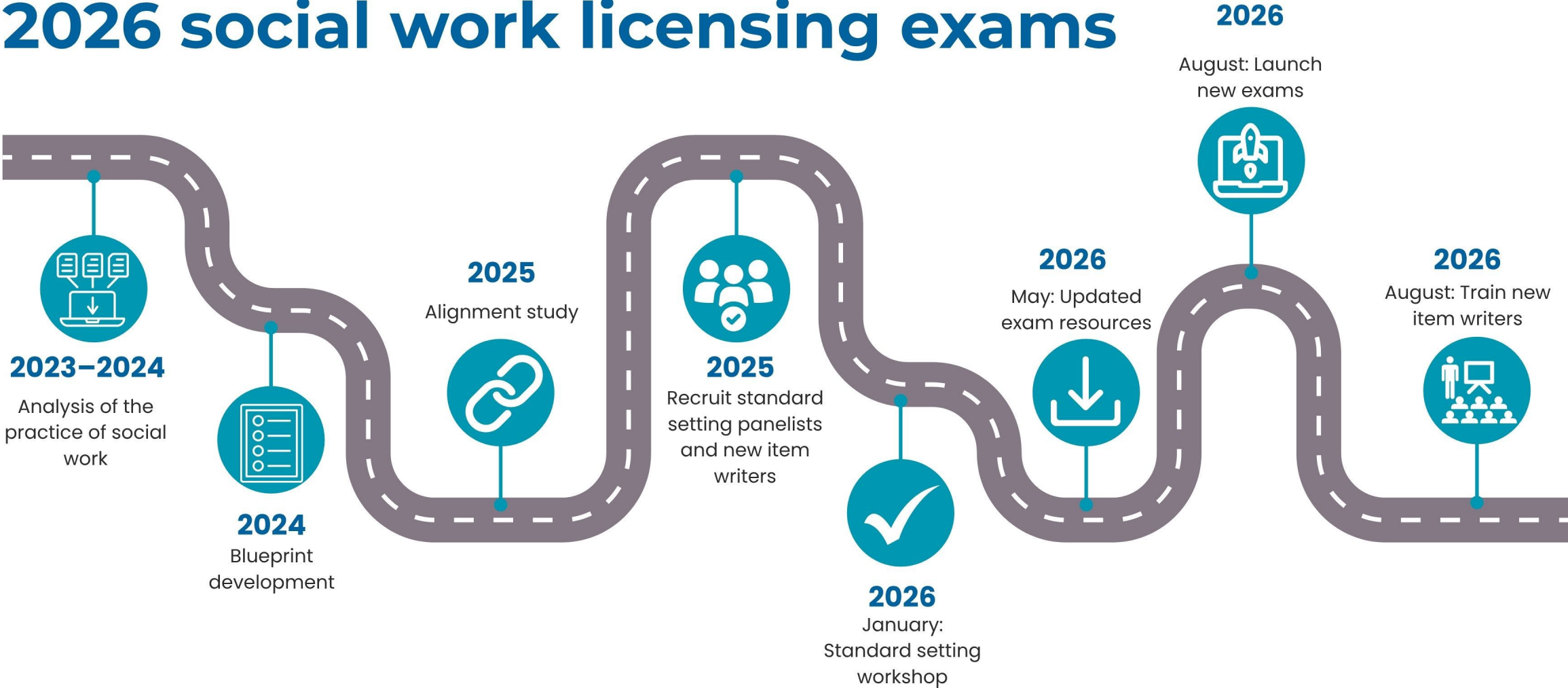
Exams for the future of social work

reenvisioning COMPETENCE ASSESSMENT



The **2026 social work licensing exams**, based on the new blueprints and using a new exam structure, launch in 2026.

The road to the **2026 social work licensing exams**



Alignment study

Social work educators compare educational standards and examination content

An alignment study was facilitated by experts from HumRRO.

Subject matter experts, all of whom are social work educators, evaluated each applied knowledge statement on the ASWB Masters exam and determined whether it was covered by one or more of the competencies outlined in the EPAS.

[Read When Standards Align and download the full report](#)



The volunteer participants were, left to right, Tammy Sung, MSSW, LMSW, Texas A&M University-Commerce; Patricia Desrosiers, Ph.D., LCSW, Western Kentucky University (retired); Dianna Cooper-Bolinskey, DHSc, MSW, ACSW, LCSW, Campbellsville University; Victoria Gray, MSW, LCSW, Florida International University; Lindsey Rinehart, MSW, LICSW, West Virginia University; Veronica Knowles, MSW, LCSW, Mississippi State University; Kiana Dibo-Armstrong, DSW, MSW, LMSW, Savannah State University; Nancy Sidell, Ph.D., LGSW, Mansfield University of Pennsylvania, emeritus, Capella University; Amanda Duffy Randall, Ph.D., LICSW, University of Nebraska Omaha, emeritus; Cheryl Fergerson, DSW, LMSW, ACHP-SW, University of Mississippi; and Stephanie Washington, Ed.D., MSW, LCSW, Steven F. Austin State University.

2026 social work licensing exams

reenvisioning COMPETENCE ASSESSMENT



Exam structure

The 2026 social work licensing exam structure will:

- Include more three-option multiple-choice questions
- Include fewer questions
- Expand emphasis on applying knowledge, problem-solving, and reasoning
- Allow for the addition of innovative question types (e.g., case scenarios)
- Continue to offer four hours to complete the exam



2026 social work licensing exams

Current exams: 150 operational (scored) items, 20 pretest (unscored)

New exams: 110 operational items, 12 pretest

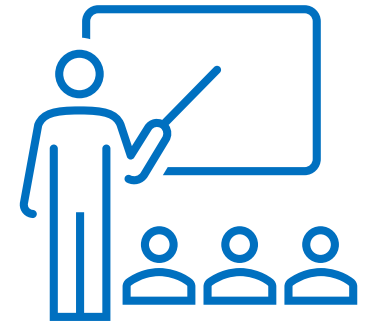
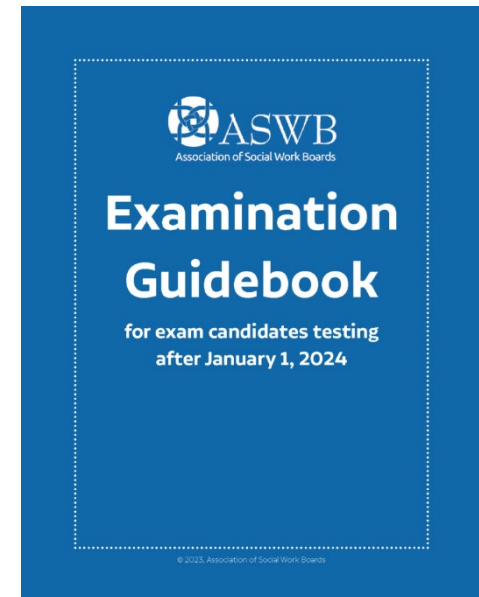
New exams will launch in August 2026.



Exam resources

Exam resources will be updated about three months before exams launch in August.

- *ASWB Examination Guidebook*
- Guide to the Exams for Educators and Supervisors
- Online practice tests



Let's stay
connected



Quarterly
Newsletter



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LinkedIn



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info@aswb.org

a social work journey

**FURTHERING THE
PROFESSION**



COMPETENT PRACTICE



ENTRY TO PRACTICE



SOCIAL WORK EDUCATION



**CARRIED
THROUGHOUT
THE JOURNEY**

Thank you!

