



DRAFT
Virginia Board of Social Work
Ad Hoc Committee Meeting Minutes
Tuesday, September 2, 2025, at 3:00 p.m.
9960 Mayland Drive, Henrico, VA 23233
Board Room 4

- BOARD MEMBERS PRESENT:** Sherwood Randolph Jr., MSW, LCSW
Martha Meadows, MA, LCSW
- BOARD STAFF PRESENT:** Jaime Hoyle, JD, Executive Director
Charlotte Lenart, Deputy Executive Director
Sharniece Vaughan, Licensing & Operations Supervisor
Rebecca Walker, Licensing Specialist
- DHP STAFF PRESENT:** Yetty Shobo, Ph.D., Director, DHP Healthcare Workforce Data Center (*left meeting at 4:30pm*)
Barbara Hodgdon, Ph.D., Deputy Director, DHP Healthcare Workforce Data Center (*left meeting at 4:30pm*)
- STAKE HOLDER ATTENDEES:** Denise Daly Konrad, Virginia Health Care Foundation (VHCF)
Matthew DeCarlo, Ph.D., LCSW, MSW Program Director of Saint Joseph's University (*remote via Webex*)
Rebekah Glushefski, LMSW, Supervisee in Social Work
Joseph Lynch, LCSW (*remote via Webex*)
Rachel Mosunmade, LCSW (Oncology) Bon Secours Mercy Health
Ann Petersen, LMSW
Debra Riggs, National Association of Social Workers (NASW) Executive Director (*remote via Webex*)
Cara Sanner, Association of Social Work Boards (ASWB) Director of Regulatory Services (*remote via Webex*)
Peggy Scott, Supervisee in Social Work
Mark Smith, Greater Washington Society for Clinical Social Work (GWSCSW) and Virginia Society of Clinical Social Workers (VSCSW)
- CALL TO ORDER:** Mr. Randolph called the Committee Meeting to order at 3:10 p.m.
- MISSION STATEMENT:** Mr. Randolph read the mission statement of the Department of Health Professions, which was also the mission statement of the Board.
- APPROVAL OF MINUTES:** The Board reviewed the minutes from the last meeting held on June 25, 2025.
Motion: Mr. Randolph made a motion, which Ms. Meadows properly seconded, to approve the minutes as written from June 25, 2025.
- PUBLIC COMMENT:** Ms. Scott introduced herself and referenced a letter she previously submitted to the Board regarding exam alternatives (See Attachment A). She expressed a desire to share her personal history, noting that while many focus on statistics, it's important to recognize the individuals behind them. In her letter, she proposed three key recommendations:
1. Greater consideration of professional experience and continuing education
 2. Reviewing the role of the 20 unscored exam questions
 3. Implementing a provisional licensure model based on agency evaluation

Another commenter, Ms. Glushefski, introduced herself and described the field in which she works. She thanked Ms. Scott for her presentation and acknowledged that there are a number of hurdles to address. Ms. Glushefski also shared that when she began transitioning to clinical work, she was surprised to learn that Virginia requires advanced coursework before approving as a supervisee in social work.

Dr. DeCarlo noted that there was a follow-up item on the agenda from our last meeting. He stated that ASWB had changed the timing and break policy for their exams without providing adequate notice to test-takers. Additionally, there were issues related to the Quarter 2 exams being valid.

Ms. Petersen stated that she graduated with her MSW degree in 2011. She has taken the licensing exam but did not pass and expressed that she believes the exam could benefit from some restructuring.

PRESENTATION:

Dr. Hodgdon presented on the LCSW, LMSW and LBSW Examination Survey Findings (see Attachment B). The goal was to determine whether licensees, registrants, and applicants wanted to maintain the ASWB exam, if an alternative pathway should be created, and to understand the general perception of the exam.

She first discussed findings from the LCSW survey, which was conducted from late June to early July 2025. The survey included 15 questions and received 9,044 responses.

The LMSW and LBSW surveys were conducted from mid-August to late August 2025, with 21 questions and 2,532 responses.

Most respondents wanted to keep the ASWB exam; however, individuals under the age of 30 were less likely to support maintaining the exam. The majority agreed that an alternative pathway is needed. Regarding the use of additional supervision as an alternative, responses varied by age, education, race/ethnicity, and supervisory role. Approximately 70% of supervisors believe that the ASWB exam should be maintained.

Most agreed that the ASWB exam ensures minimum qualifications and helps build public trust. Additionally, there was a consensus that ASWB needs to provide documentation on the exam's reliability, validity, and fairness.

DISCUSSION WITH STAKEHOLDERS:

Mr. Randolph opened the floor for discussion and asked Dr. DeCarlo to elaborate on his submission that was included in the agenda. Dr. DeCarlo stated that the ASWB did not appropriately document their recent changes. He further explained that during testimony in Maryland, the ASWB disclosed certain information about the exam changes but omitted other details. Additionally, Dr. DeCarlo noted that the ASWB continues to sell practice exams based on outdated rules.

Mr. Randolph outlined some provisional recommendations, including increased ASWB transparency, maintaining the exam while introducing an alternative pathway, extending the exam duration, and mixed opinions regarding how many failed attempts should be permitted before considering an alternative pathway.

There was discussion about several states that have eliminated the requirement to take both the bachelor's and master's ASWB exams. Mr. Lynch noted that having an alternative pathway with additional supervision would hold supervisors accountable, particularly if it allows for targeted attention to problem areas.

Dr. DeCarlo further discussed the elimination of the exam to ensure that the

potential alternative pathway does not prolong the overall licensure process. Ms. Lenart clarified that Virginia requires only one exam for clinical licensure.

Ms. Mosunmade commented that requiring an additional 3,000 hours of clinical supervision as part of an alternative pathway could become costly, raising concerns about its financial feasibility.

UNFINISHED BUSINESS:

Ms. Hoyle explained that the Ad Hoc Committee was established to engage with stakeholders on the topic of exam alternatives. She stated that three other jurisdictions—Illinois, Utah, and Minnesota—all have exam alternatives in place.

NEXT STEPS:

Mr. Randolph will make a proposal for the Full Board to consider the implementation of alternative pathways to licensure, which would permit at least one failed examination attempt and require an additional 3,000 hours of clinical supervision. This recommendation is informed by comparable data from other states and is presented with the understanding that modifications may be incorporated through continued deliberation.

Mr. Randolph proposed that ASWB be called back for dialogue regarding the previous questions that were submitted to them from the stakeholders and current exam procedures.

ADJOURNMENT:

Mr. Randolph adjourned the meeting at 5:01 p.m.

Sherwood Randolph Jr., MSW, LCSW

Jaime Hoyle, JD, Executive Director

Peggy R. Scott, LCSW-S

Virginia Board of Social Work

Subject: Response to Examination Experience and Recommendations for Alternative Pathways to Licensure

Dear Members of the Virginia Board of Social Work,

Thank you for your attention to the evolving national conversation on licensure equity and for undertaking a review of examination requirements in response to the 2022 ASWB Exam Pass Rate Analysis.

I am writing to share my personal journey toward licensure, my experience with the ASWB Clinical Exam, and recommendations for your consideration as you explore alternative approaches to licensure that maintain more inclusive and equitable pathways.

Personal Journey

My path toward licensure as a clinical social worker has been long and filled with determination. After earning my MSW, I returned to Virginia in **1999** having completed clinical hours under the supervision of a Licensed Marriage and Family Therapist (LMFT). I was informed at that time that Virginia board of Social Work did not accept supervision by an LMFT, and thus those hours could not count toward licensure.

In the early 2000's, I pursued additional graduate coursework at **Norfolk State University**, as required by the Board, and began supervision under a Virginia LCSW. Life circumstances led me to broaden my focus into ministry—continuing my commitment to service in the helping profession, even as my path diverged from clinical social work for a period.

In **2020**, I returned to the mental health field and again (in 2022) I applied to the Board to complete clinical supervision. I was required to take another graduate course at **Virginia Commonwealth University** to meet updated educational standards and was approved to complete **3,600 clinical hours**, exceeding the standard 3,000 hours.

After completing these hours, I began serious preparation for the ASWB Clinical Exam in **March 2025**. I took the exam on **July 2, 2025**, and fell short by just **five points**. I attempted a second version of the exam on **August 4, 2025**, but again did not pass. These outcomes, despite rigorous study and practical experience, have been deeply discouraging. My **LCSW-S approval** is currently set to expire early **March 2026**, and ASWB requires a three-month wait between exam attempts (with limited exceptions). I am doing everything I can not to let all my efforts go to waste.

Recommendations for Alternative Licensure Pathways

As the Board considers alternatives to licensure pathways, I respectfully offer the following recommendations:

1. Greater Consideration for Professional Experience and Continuing Education

Candidates with years of relevant experience, completion of required education, and a record of ongoing professional development should be given more weight in the licensure process. A more holistic approach—valuing both formal learning and practical service—would better reflect a candidate’s readiness and competency to practice.

2. Review the Role of the 20 Unsourced Exam Questions

The ASWB Exam includes 20 unsourced questions. Reluctantly, I encourage the Board to explore whether these questions could be reviewed and scored; and be used to improve the candidates final score if needed to meet the standard pass score.

3. Implement a Provisional Licensure Model Based on Agency Evaluation

The Board to consider a **short-term provisional license** that could transition into full licensure upon satisfactory performance evaluations from employers. This pathway could function without legal liability to agencies but would rely on direct supervision, documented competency, and real-world impact.

A Call for Compassion and Pragmatism

The goal is not to dilute professional standards but to create equitable, effective, and sustainable ways for qualified individuals to meet pathways for licensure.

We are at a turning point in mental health care. The stigma surrounding treatment is diminishing, and more individuals are reaching out for help. By embracing innovative licensure models, the Board can strengthen the profession, address shortage of licensed mental health professionals, address rural and underserved regions’ gaps in service delivery and shortage of providers.

Although, I am disappointed and emotionally drained from this process, I cannot give up. I remain committed to this profession and to serving those in need. I hope the Board will take seriously the lived experiences of candidates like myself, whose qualifications and dedication are evident, even when a test score does not reflect them.

Thank you for your thoughtful consideration and for your leadership as we work together to build a more inclusive, effective, and compassionate system for licensure.

Respectfully Submitted,
Peggy R. Scott



2025 LCSW Requirements Survey Findings

Barbara Hodgdon, PhD and Yetty Shobo, PhD
Healthcare Workforce Data Center
and Data Analytics Division
Board of Social Work Ad Hoc Meeting
September 2nd, 2025



Methods

Survey

- Administered over 2-week period between late June and early July 2025
- 15 questions, self-report

Sample

- Pending and active LCSWs, LMSWs, LBSWs, and supervision registrants
- 9,044 respondents

Questions

- Maintaining ASWB Exam
- Alternative pathways to licensure
- General perceptions about the exam

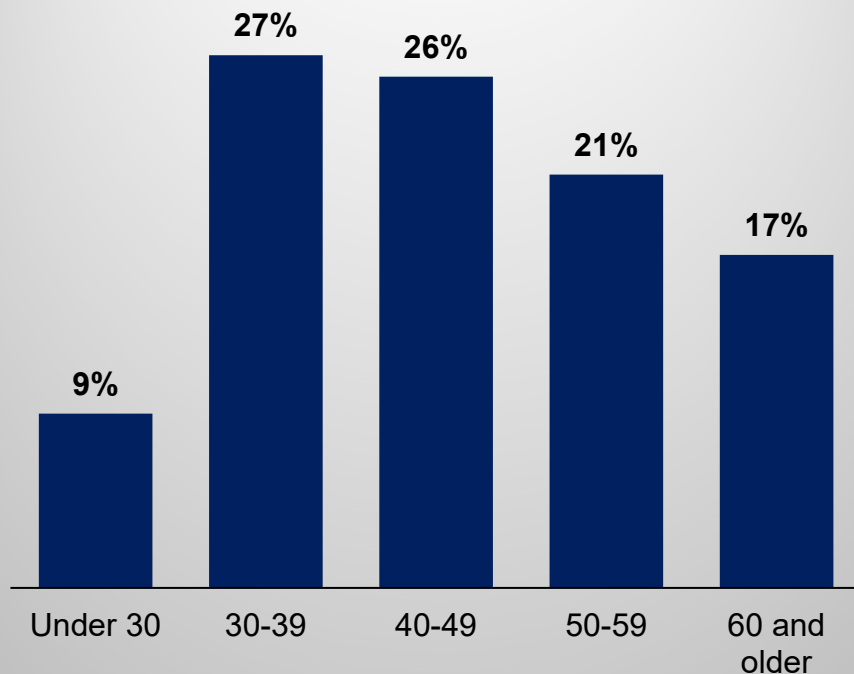


Demographics

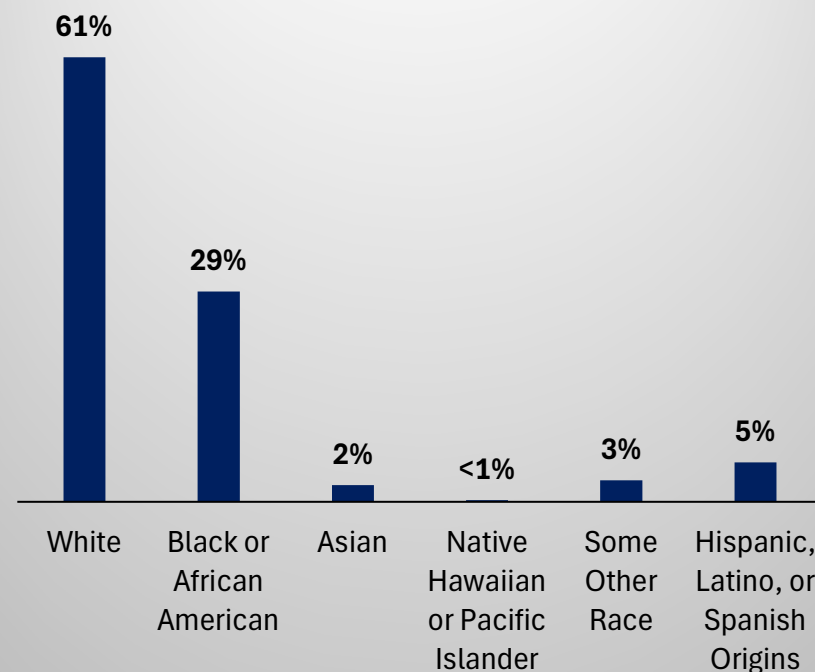


Median age between 40-49; 87% female; 3 in 5 were White

Age



Race and Ethnicity





Virginia Department of Health Professions

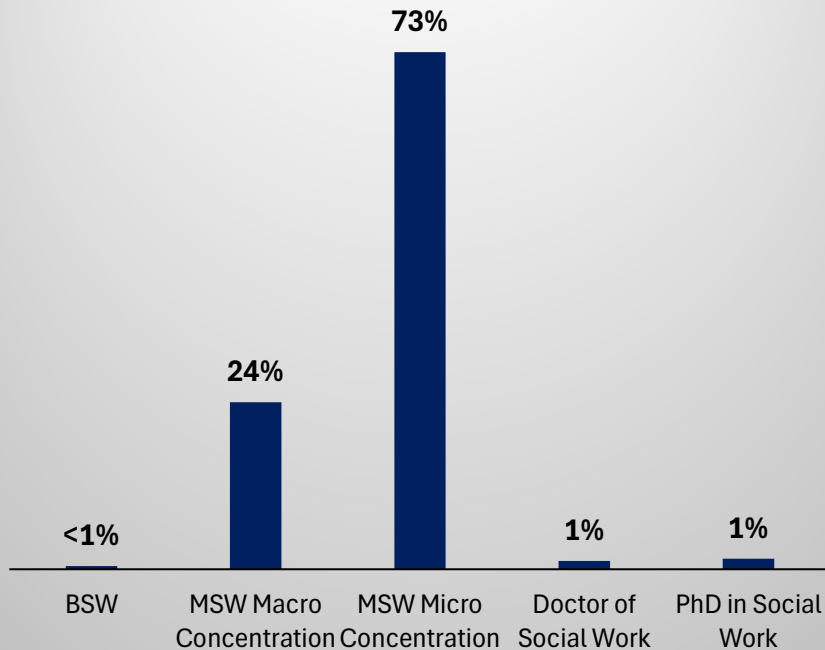


Education

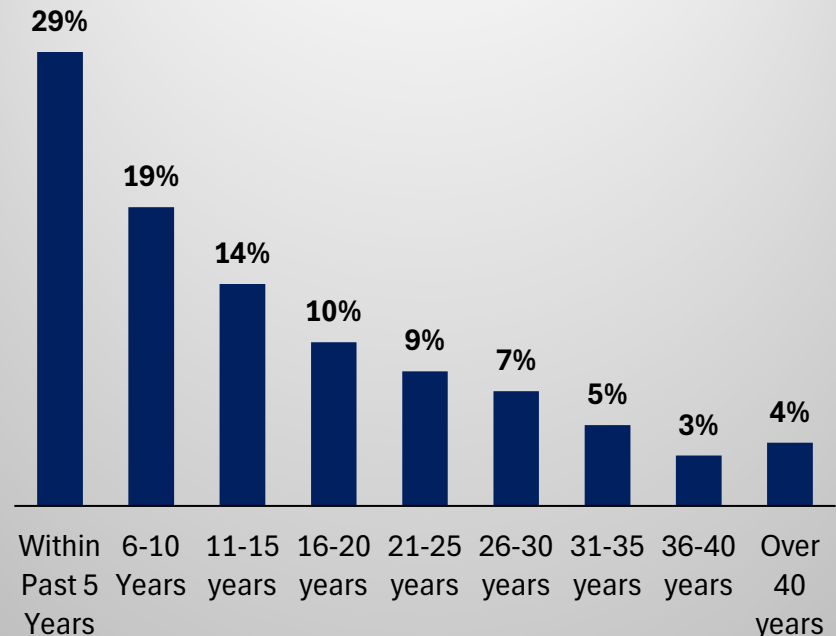


Most hold MSW w/ Micro Concentration; more than half earned degree within last 15 years

Highest Social Work Degree



Time Highest Degree Earned



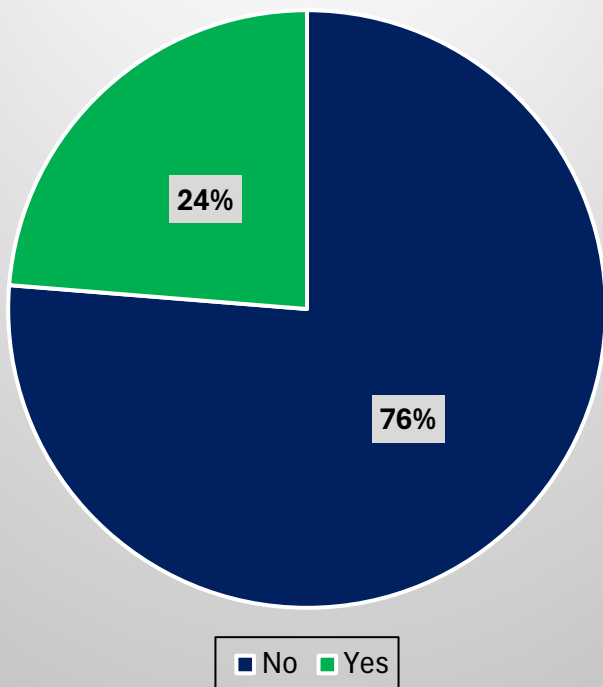


Supervisors

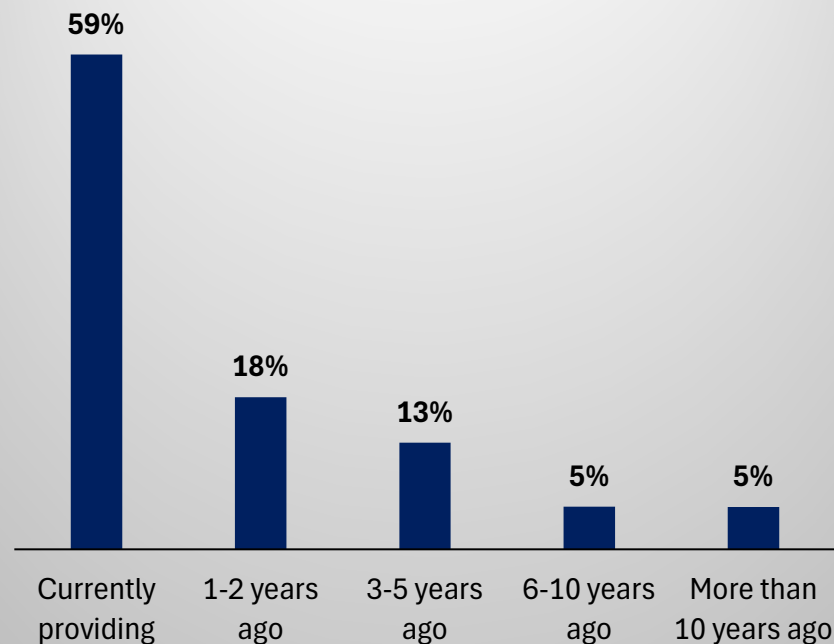


Almost 1 in 4 are supervisors; most of whom are currently providing supervision

Board-Approved Supervisor



Supervision Provided





Maintaining ASWB Exam as Requirement

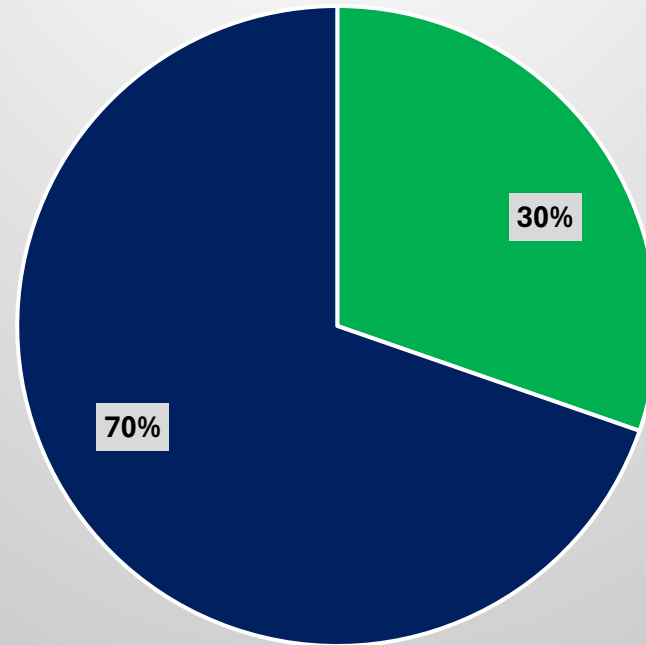


70% think
ASWB exam
should be
maintained as
requirement



3 in 10 against
ASWB as
requirement

ASWB Exam Maintained?



■ No ■ Yes



Allowing an Alternative Licensure Pathway



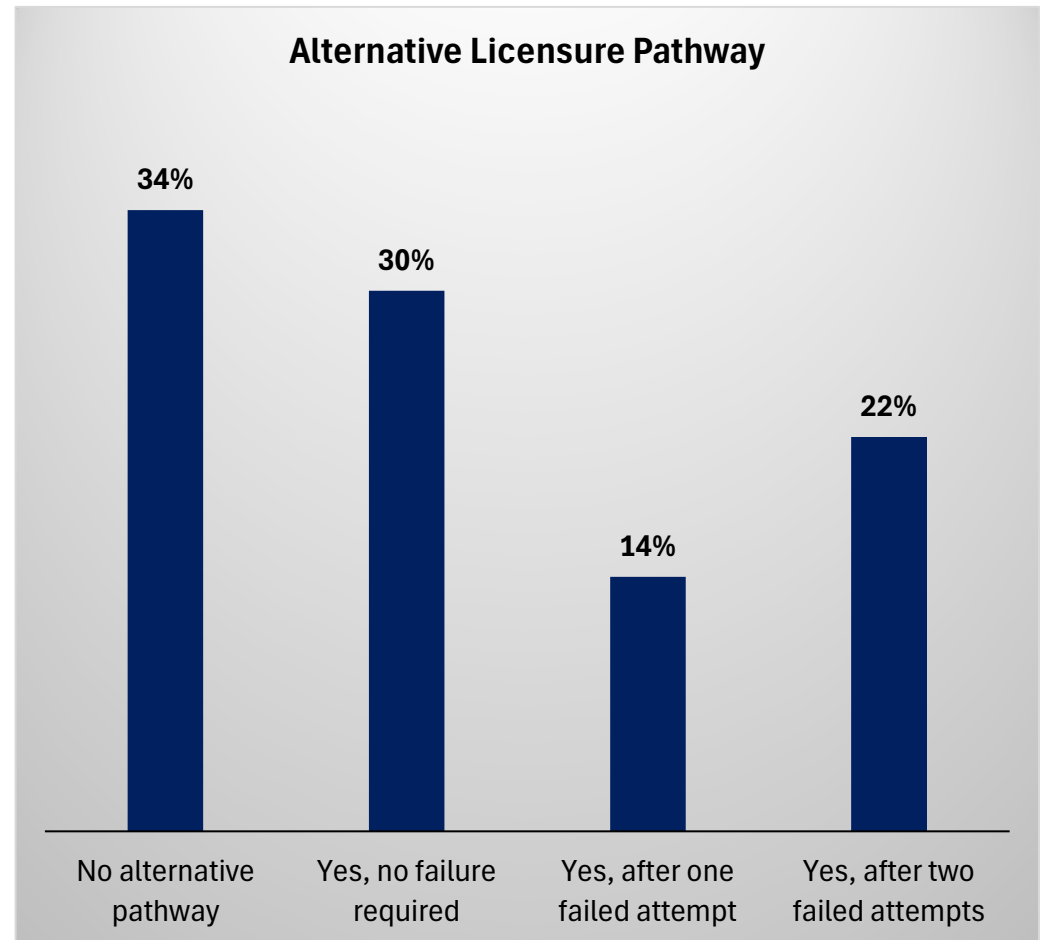
66% in favor of
some kind of alt.
pathway



3 in 10 endorse
an alt. pathway
with no exam
failure



1 in 5 think alt.
pathway allowed
after 2 failed
attempts





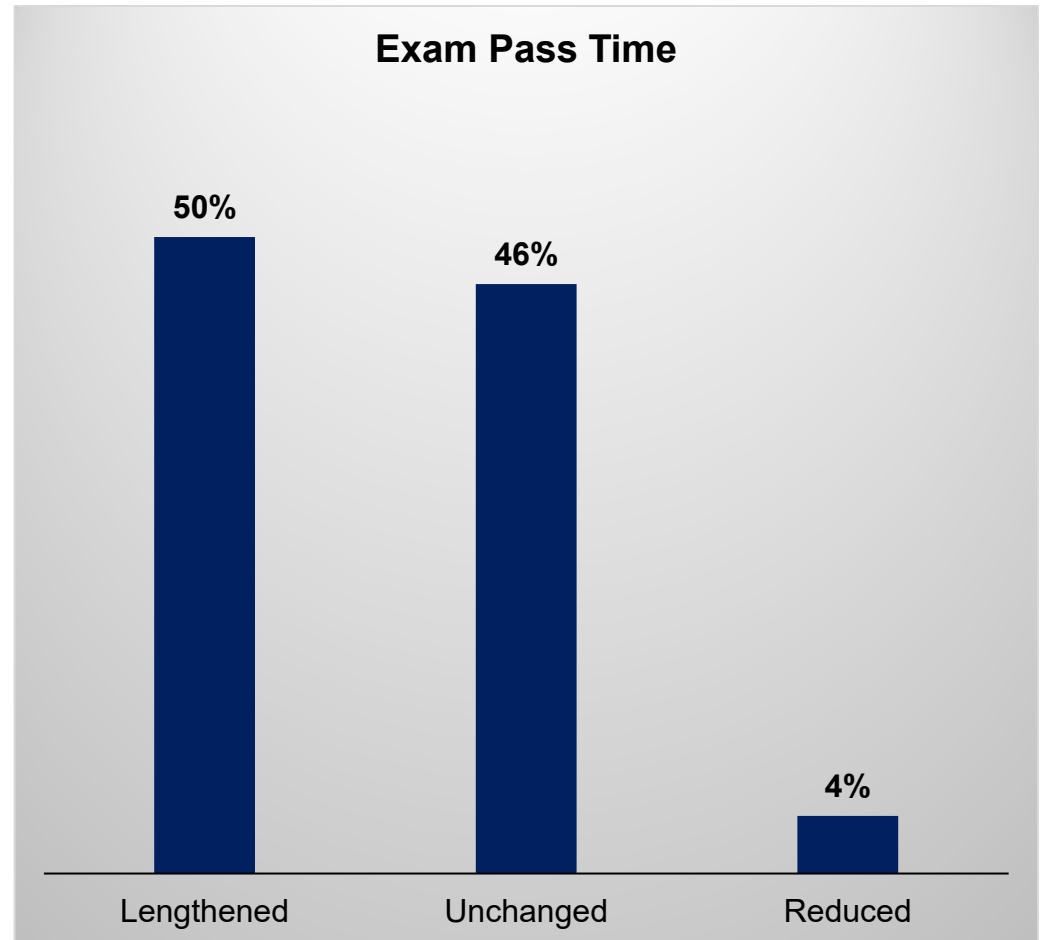
Timeline to Pass the ASWB Exam



Half think the
time to pass
exam should be
lengthened



Close to half think
time to pass
exam should
remain
unchanged



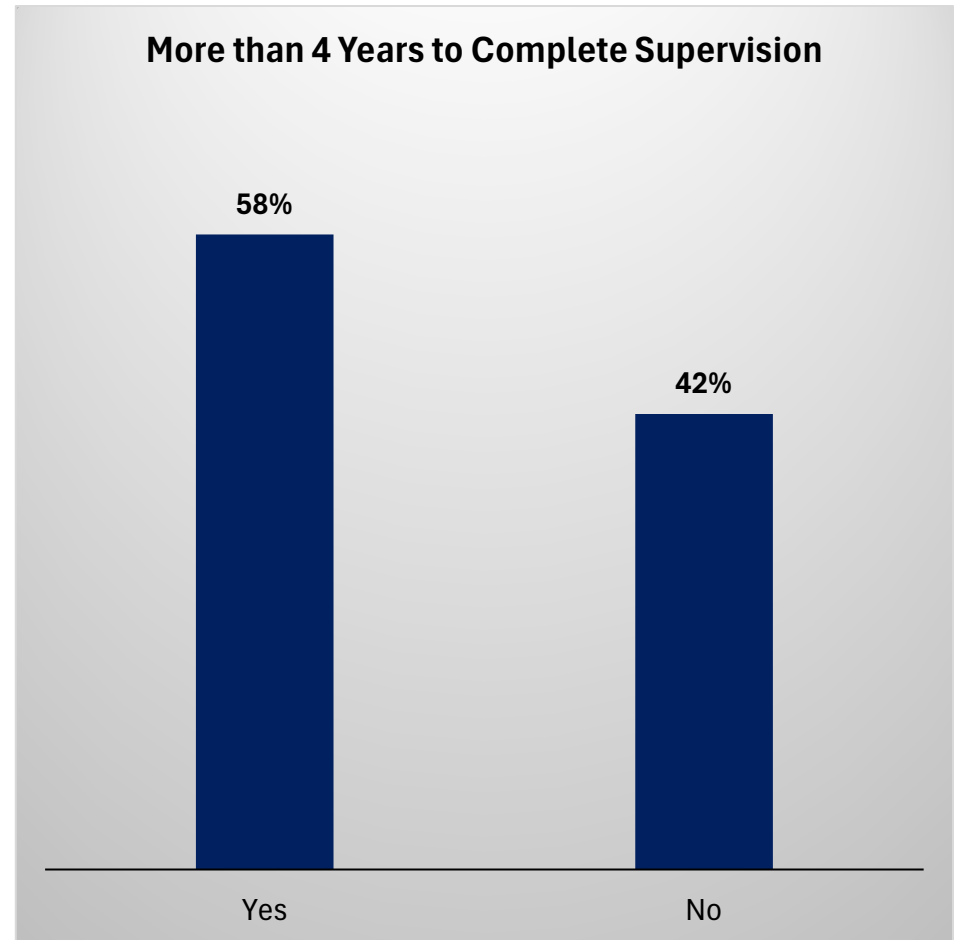


Timeline to Complete Supervision



Close to 3 in 5 think
time to complete
supervision should
be increased

More than 4 Years to Complete Supervision



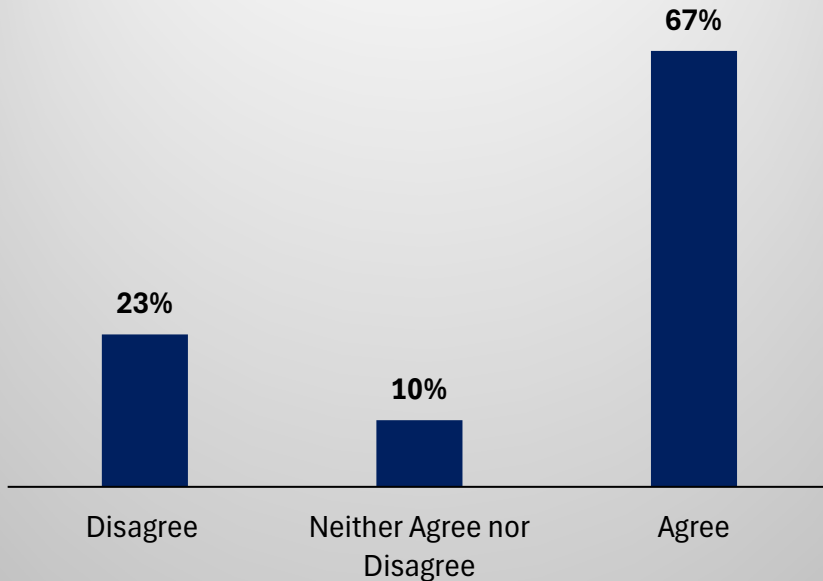


ASWB, Minimal Qualifications, and Public Trust

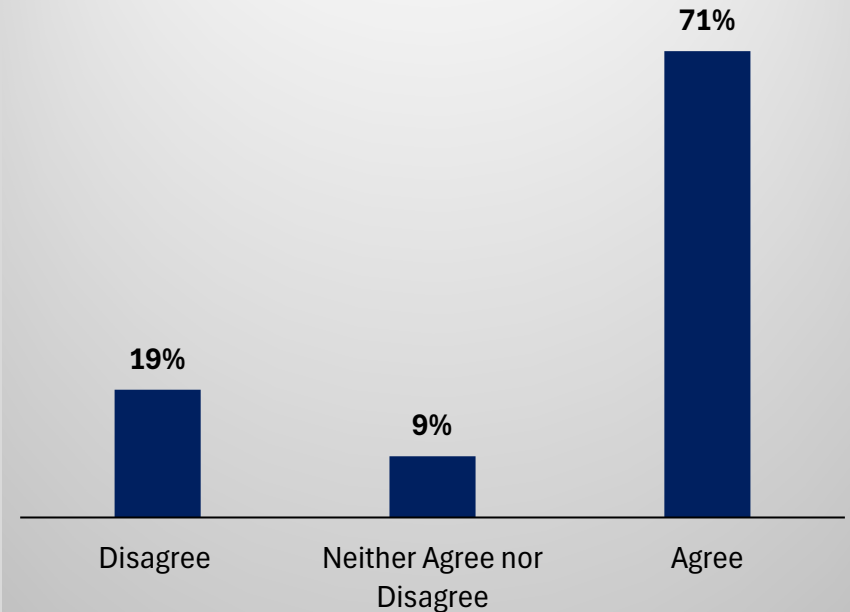


Majority agree that ASWB ensure minimal qualifications and builds public trust

ASWB Exam Ensures Minimal Qualifications



ASWB Exam Builds Public Trust



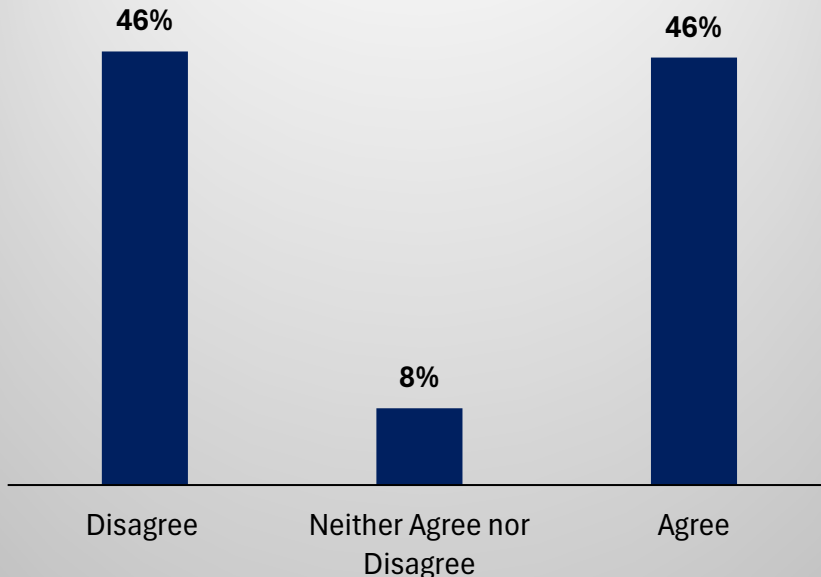


ASWB, Supervision, and Documentation

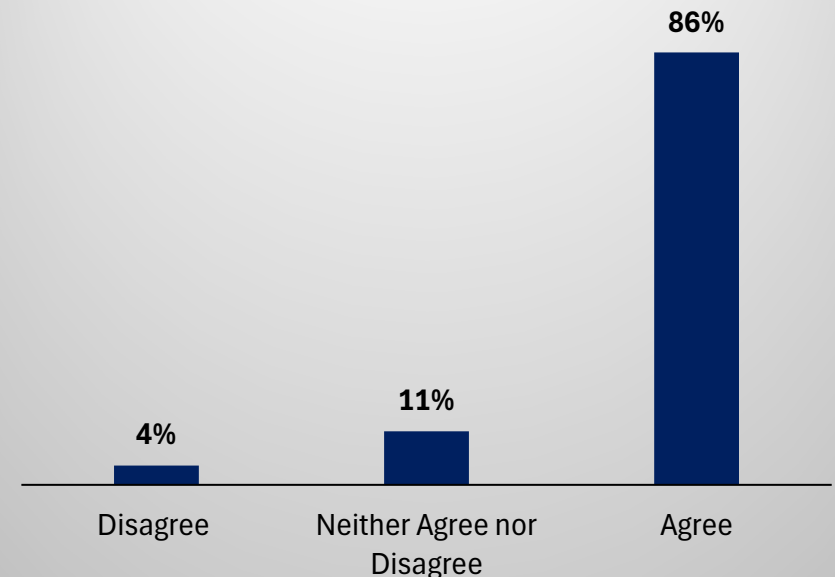


Even split in terms of supervision as an acceptable substitute

**Supervised Practice as Substitute for ASWB
Exam**



ASWB Provision of Documentation





Licensure Requirements: Breakdown by Important Factors



Virginia Department of Health Professions



Licensure Requirements by Age



Majority of those <30 want to remove ASWB exam requirement



As age increases so do % who want no alt. pathway;
half of those <30 want an alt. pathway with no failure required



Majority of those <60 want increased time to pass exam and to
complete supervision requirements



Majority of those under 40, and close to half of those 40-49,
agree that supervised practice can substitute the exam



Majority agree ASWB ensures minimal qualifications and
increases public trust; % increase as age categories increase



Virginia Department of Health Professions



Licensure Requirements by Sex



Majority of males and females think the ASWB exam should be maintained



Majority of males and females agree that an alternative pathway should be allowed



Majority endorse that time to pass exam and complete supervision be increased



Higher % of male respondents disagree that supervised practice can substitute the ASWB exam compared to female



Majority agree ASWB ensures minimal qualifications and increases public trust



Licensure Requirements by Race/Ethnicity



Majority think the ASWB exam should be maintained, a little over 2 in 5 respondents who selected Hispanic/Latino do not



Majority of respondents across all race/ethnicity categories agree that an alternative pathway should be allowed



Majority of Non-White respondents want more time to pass exam; most want more time to complete supervision reqs.



Majority of Non-White respondents agree that supervised practice can substitute ASWB exam



Majority of White and Non-White respondents agree that ASWB exam ensures minimal qualifications and builds public trust



Licensure Requirements by Education



Majority think the ASWB exam should be maintained; increase in % as degree level increases



Half of those with PhD want an alt. pathway; higher % among those with other degrees



Compared to other degree holders, higher % of BSWs want time requirement to pass the exam reduced



Majority of those with BSW and Macro Concentration MSW agree that supervised practice can substitute the ASWB exam



Majority agree that ASWB exam ensures minimal qualifications and builds public trust; increase in % as degree level increases



Licensure Requirements by Supervision



Majority agree with maintaining the ASWB Exam, higher % of supervisors agree with maintaining exam



Half of supervisors agree alt. pathway should be allowed



Higher % of supervisors think time to pass exam should remain unchanged and that 4 years is sufficient to complete supervision



Higher % of supervisors do not agree that supervised practice can substitute the ASWB exam



Majority agree that ASWB exam ensures minimal qualifications and builds public trust



Virginia Department of
Health Professions



LMSW and LBSW Licensure Requirements



Methods

Survey

- Administered over 2-week period between mid and late August 2025
- 21 questions, self-report

Sample

- Pending and active LCSWs, LMSWs, LBSWs, and supervision registrants
- 2,532 respondents

Questions

- Maintaining ASWB Exam
- Alternative pathways to licensure
- General perceptions about the exam

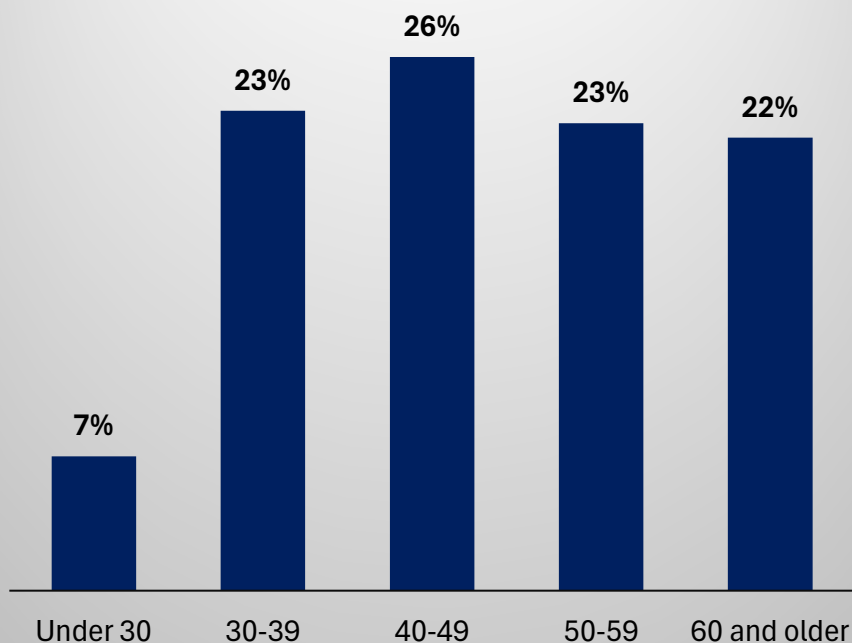


Demographics

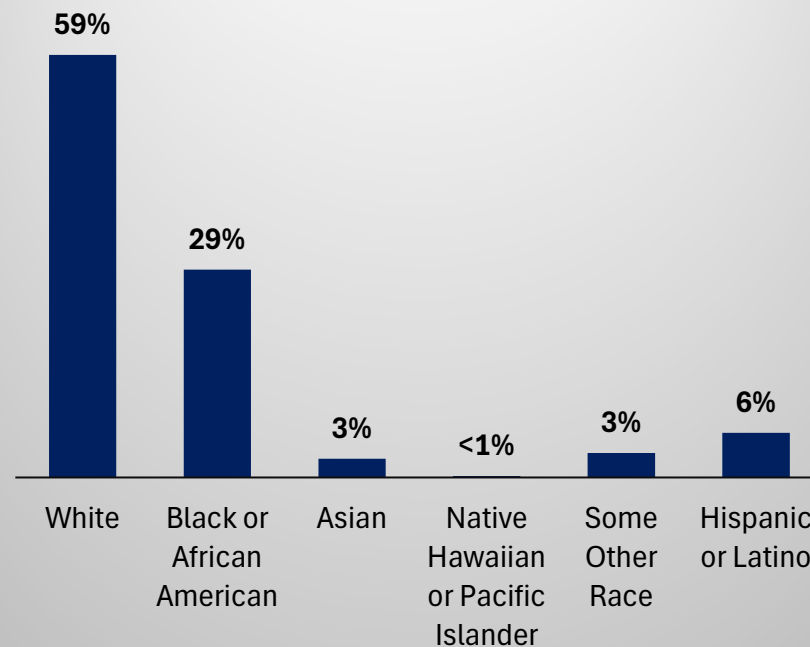


Median age between 40-49; 86% female; over half were White

Age



Race and Ethnicity



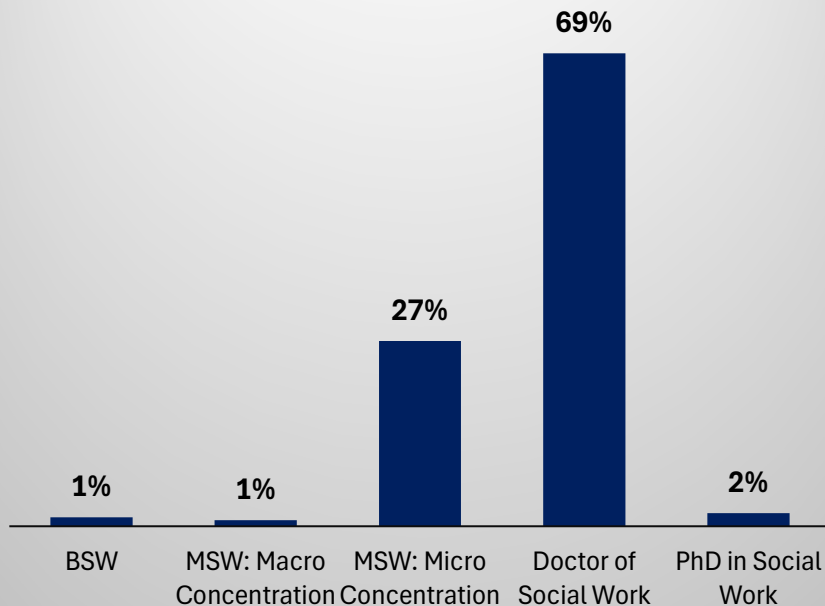


Education

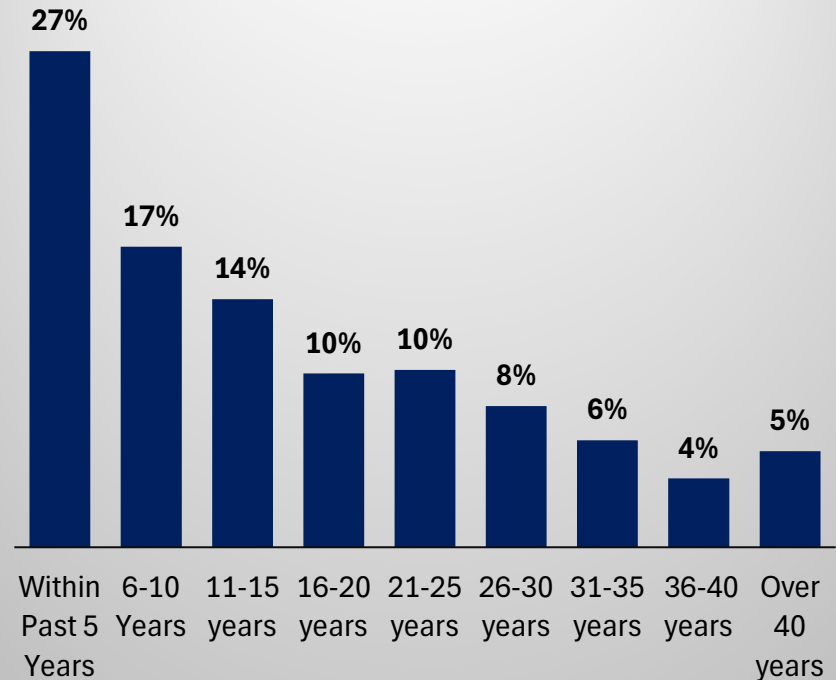


Most hold Doctor of Social Work; more than half earned degree within last 15 years

Highest Social Work Degree



Time Highest Degree earned



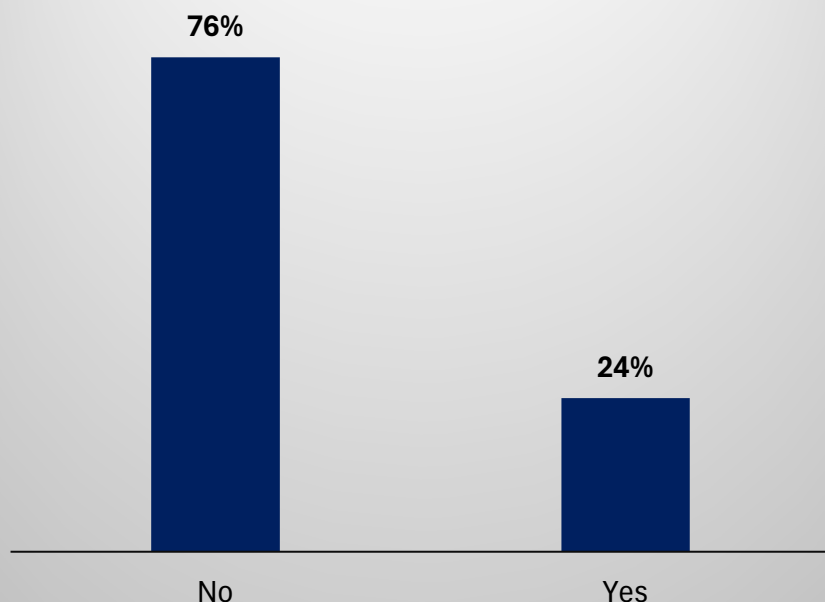


Supervisors

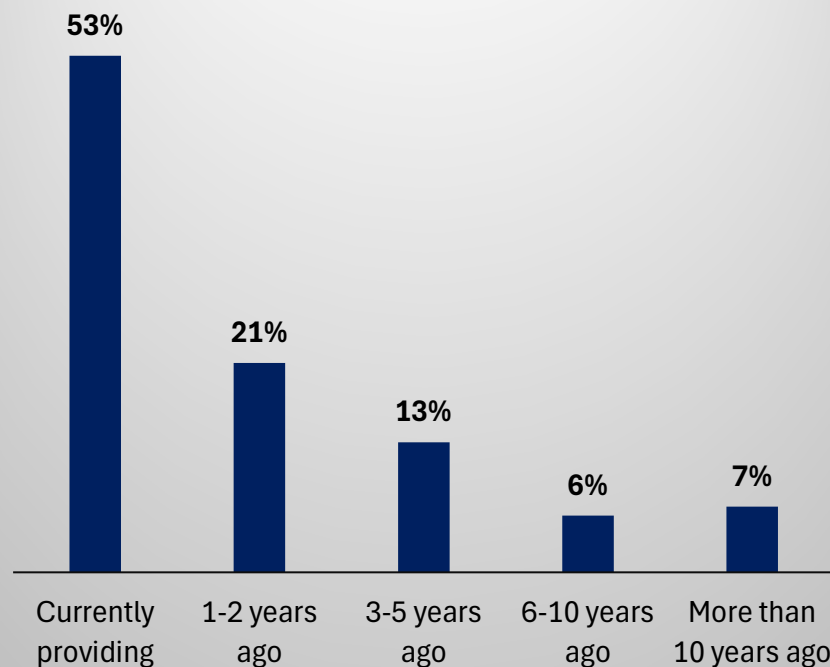


Almost 1 in 4 are supervisors; most of whom are currently providing supervision

Board-Approved Supervisor



Supervision Provided





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LMSW Licensure Requirements



Maintaining ASWB Master's Exam

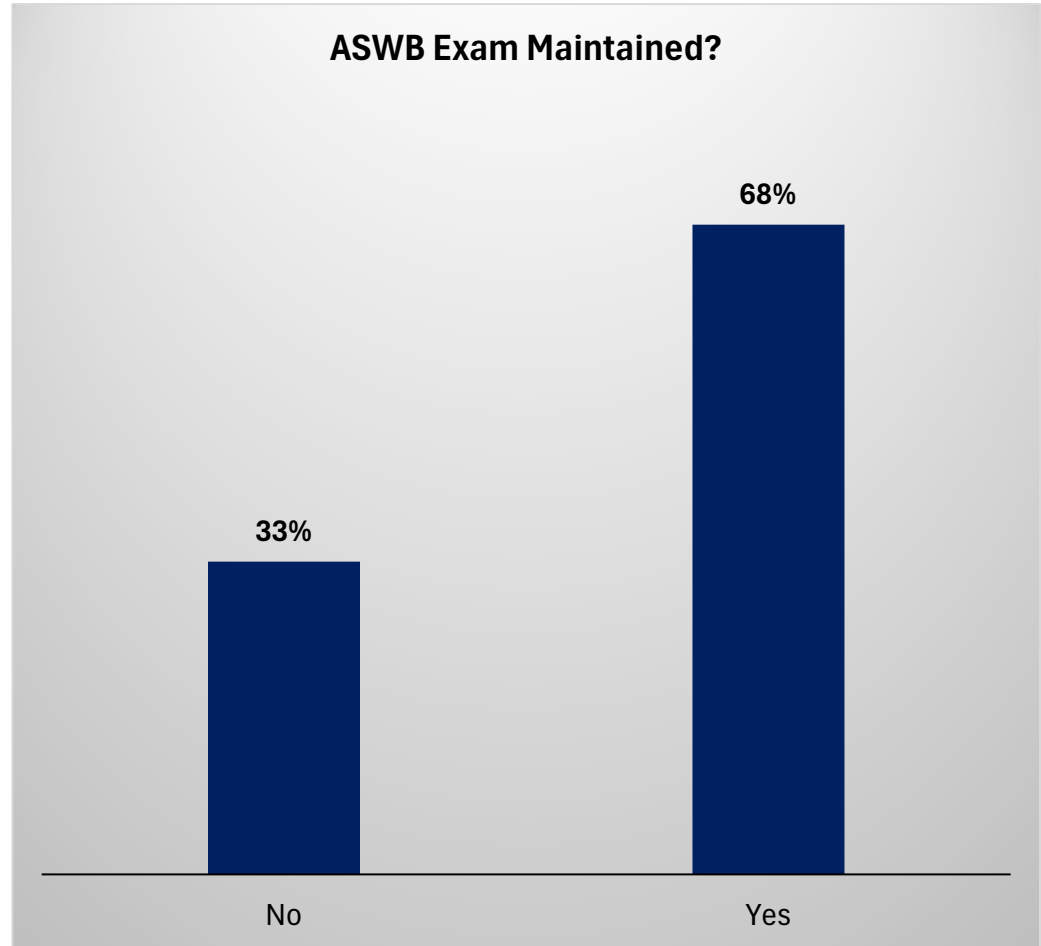


68% think exam
should be
maintained as
requirement



1 in 3 against
exam
requirement

ASWB Exam Maintained?





Allowing an Alternative Licensure Pathway



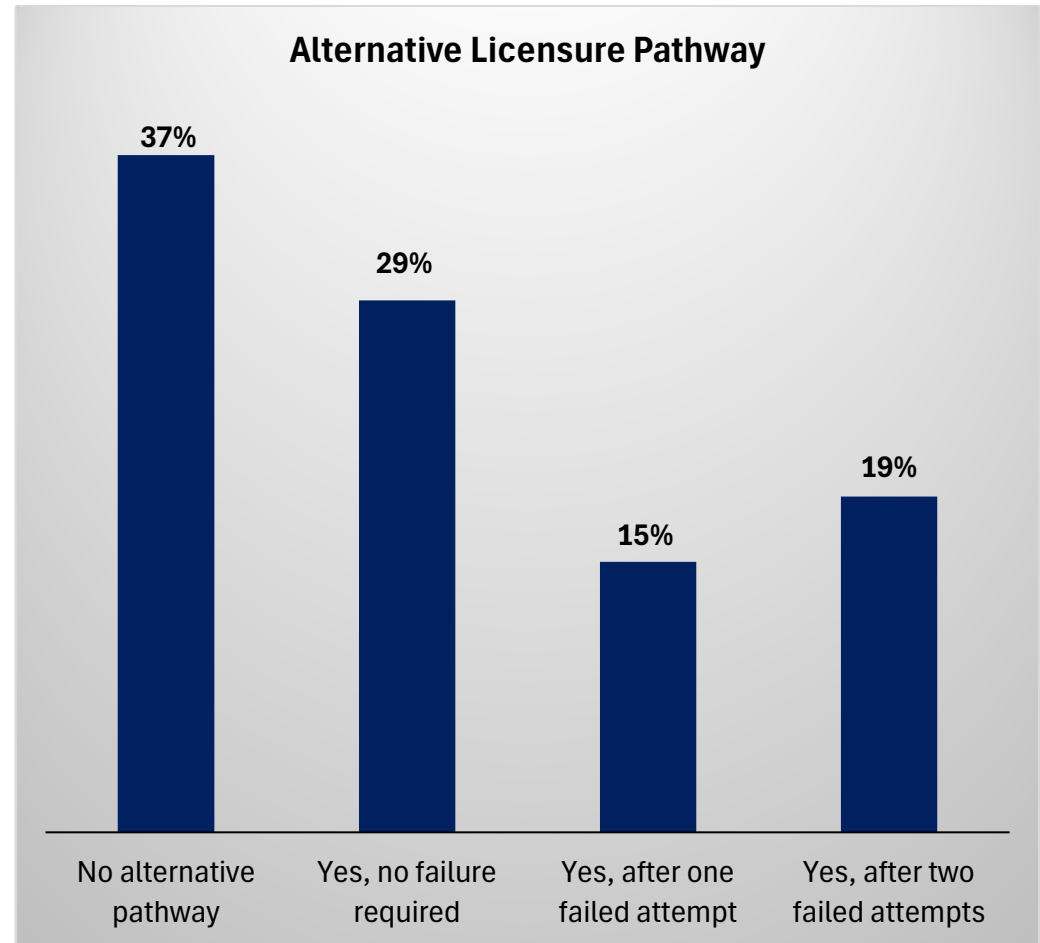
63% in favor of
some kind of alt.
pathway



Close to 3 in 10
endorse an alt.
pathway with no
exam failure.



Almost 1 in 5 think
alt. pathway
allowed after 2
failed attempts





Virginia Department of Health Professions



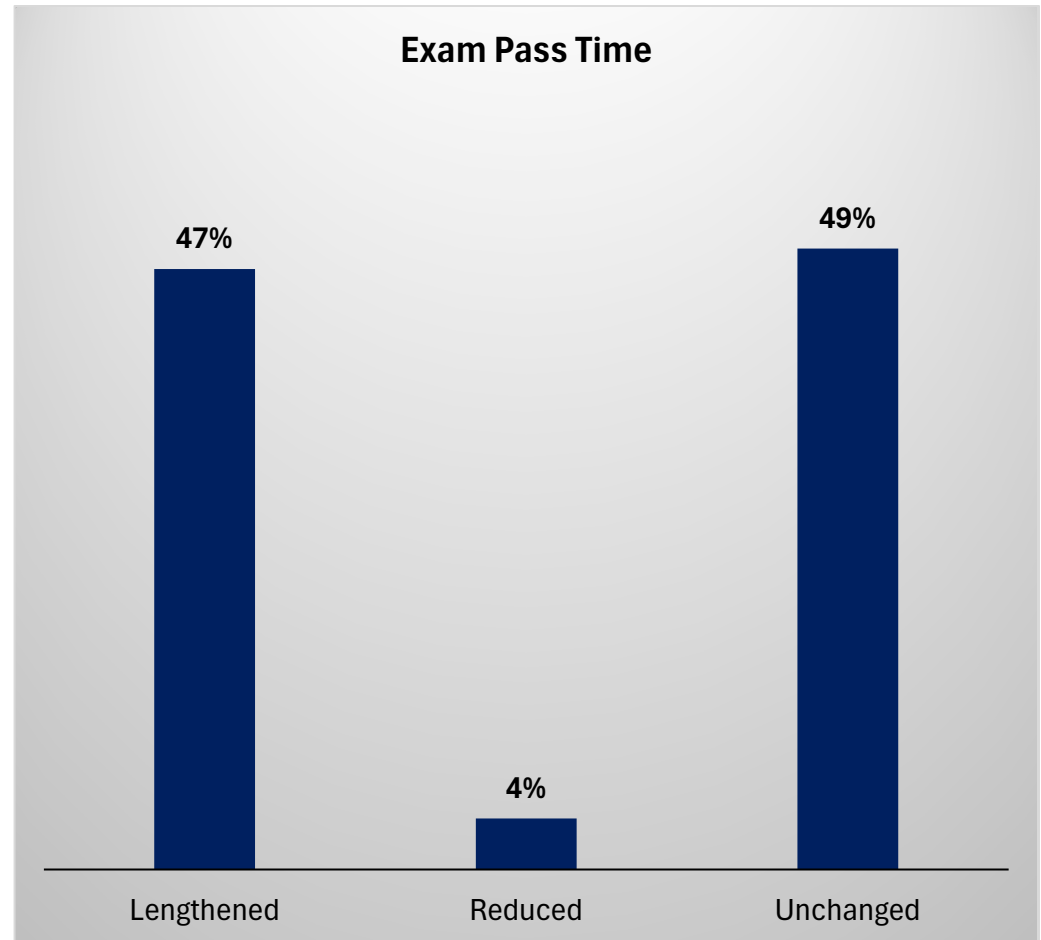
Timeline to Pass the Exam



47% think the time to pass exam should be lengthened



Close to half think time to pass exam should remain unchanged



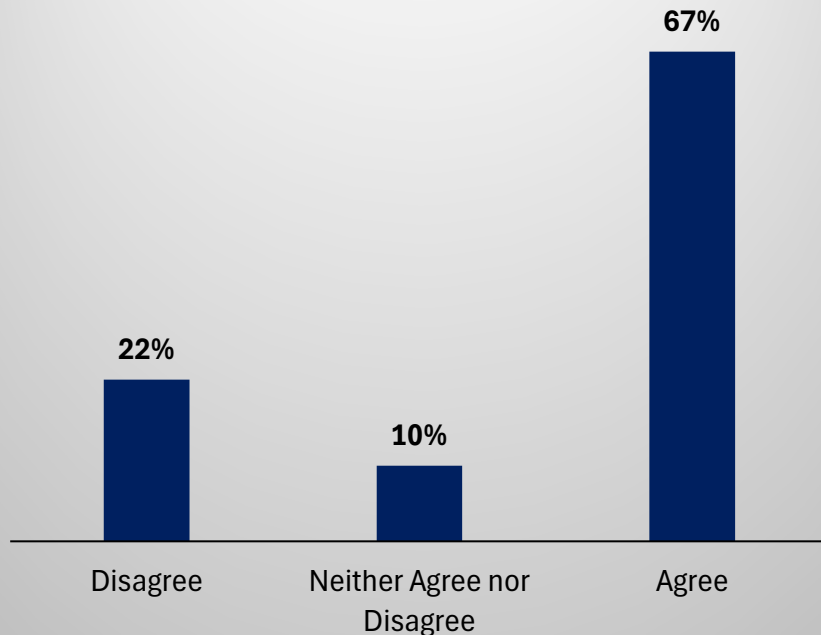


Exam, Minimal Qualifications, and Public Trust

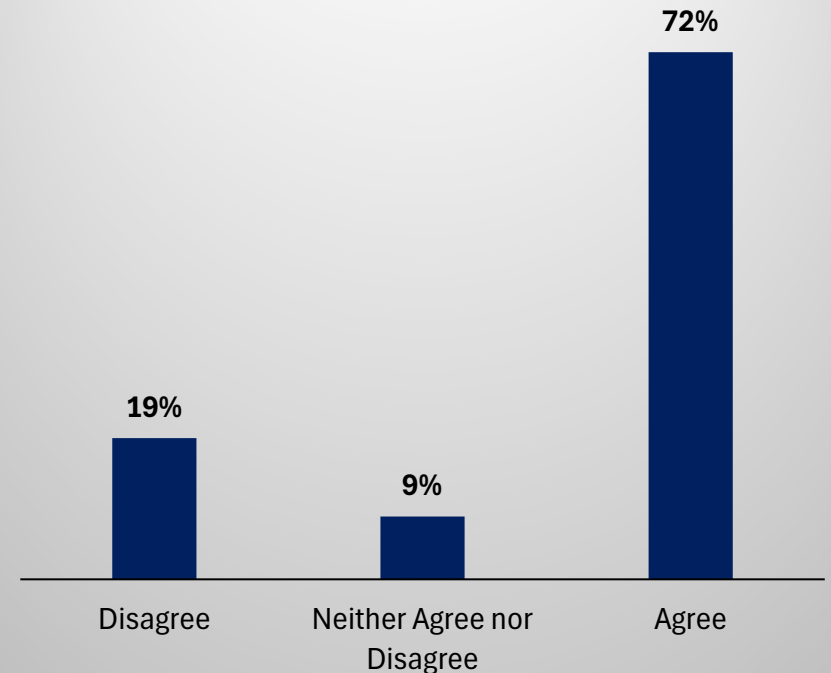


Majority agree that exam ensures minimal qualifications and builds public trust

Exam Ensures Minimal Qualifications



Exam Builds Public Trust



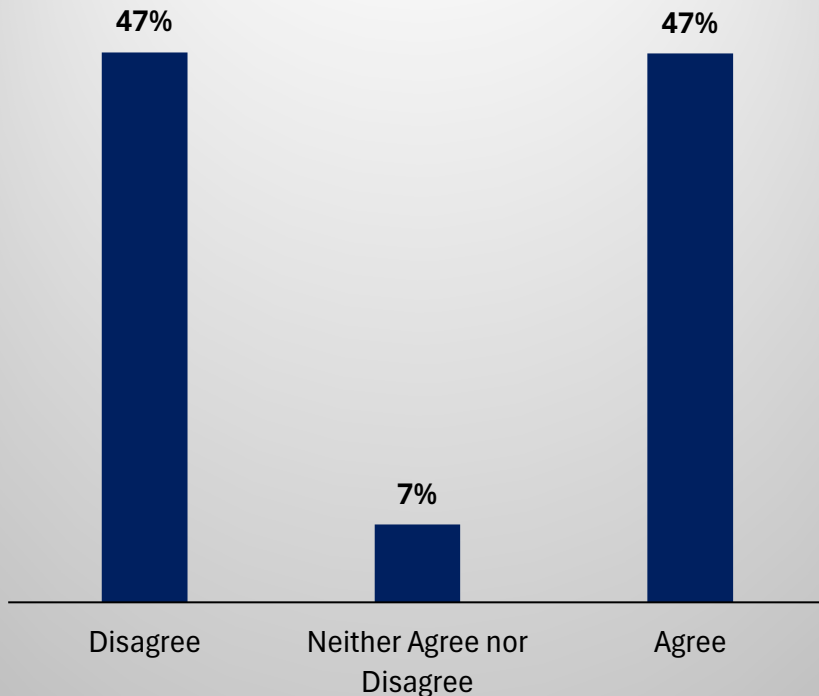


Exam, Supervision, and Documentation

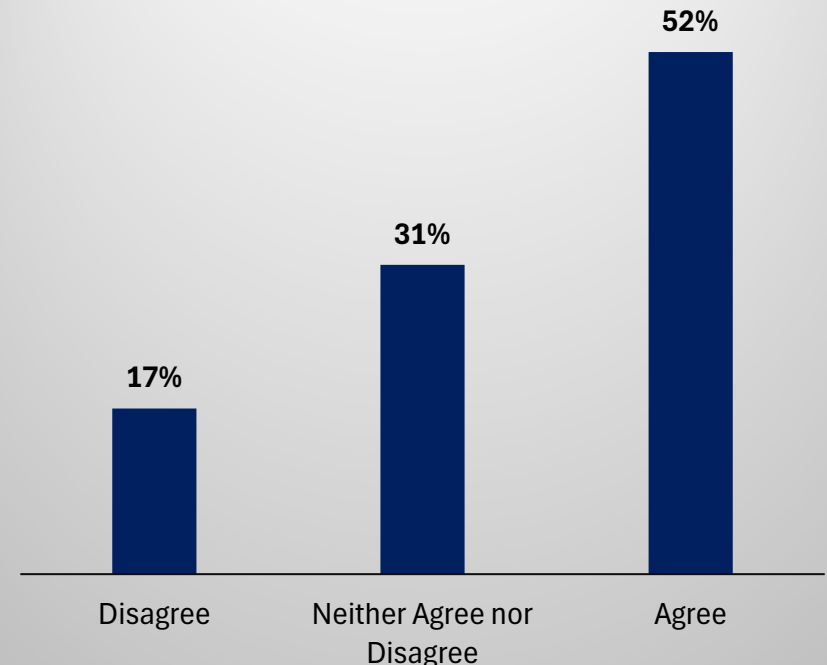


Even split in terms of supervision as an acceptable substitute; over half think it improves public protection

Supervision as a Substitute for Exam



Exam Improves Public Protection



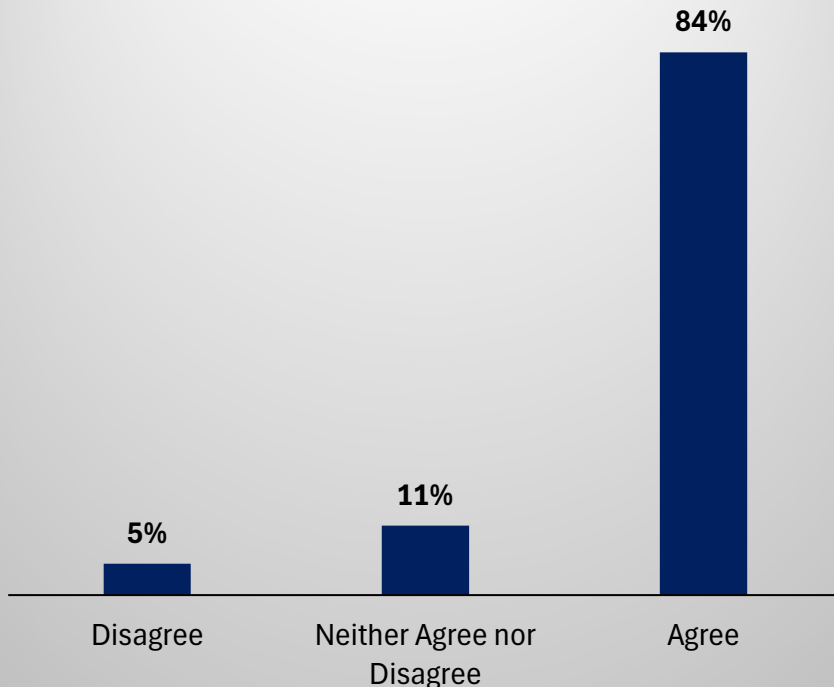


Exam, Documentation, and NASW Release

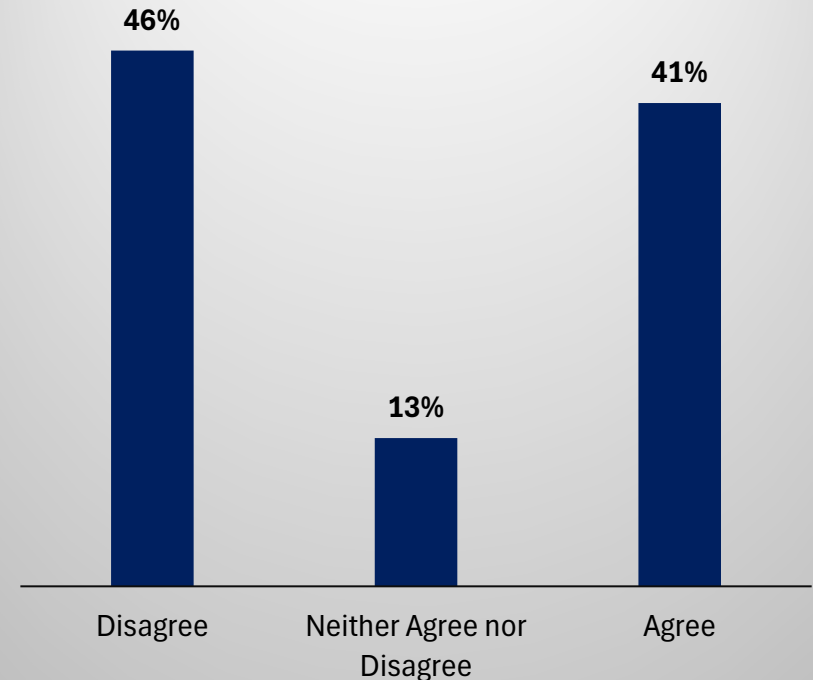


Most agree that ASWB must provide documentation;
slightly higher % disagrees with the NASW press release

ASWB Provision of Documentation



NASW Press Release





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Health Professions



LBSW Licensure Requirements



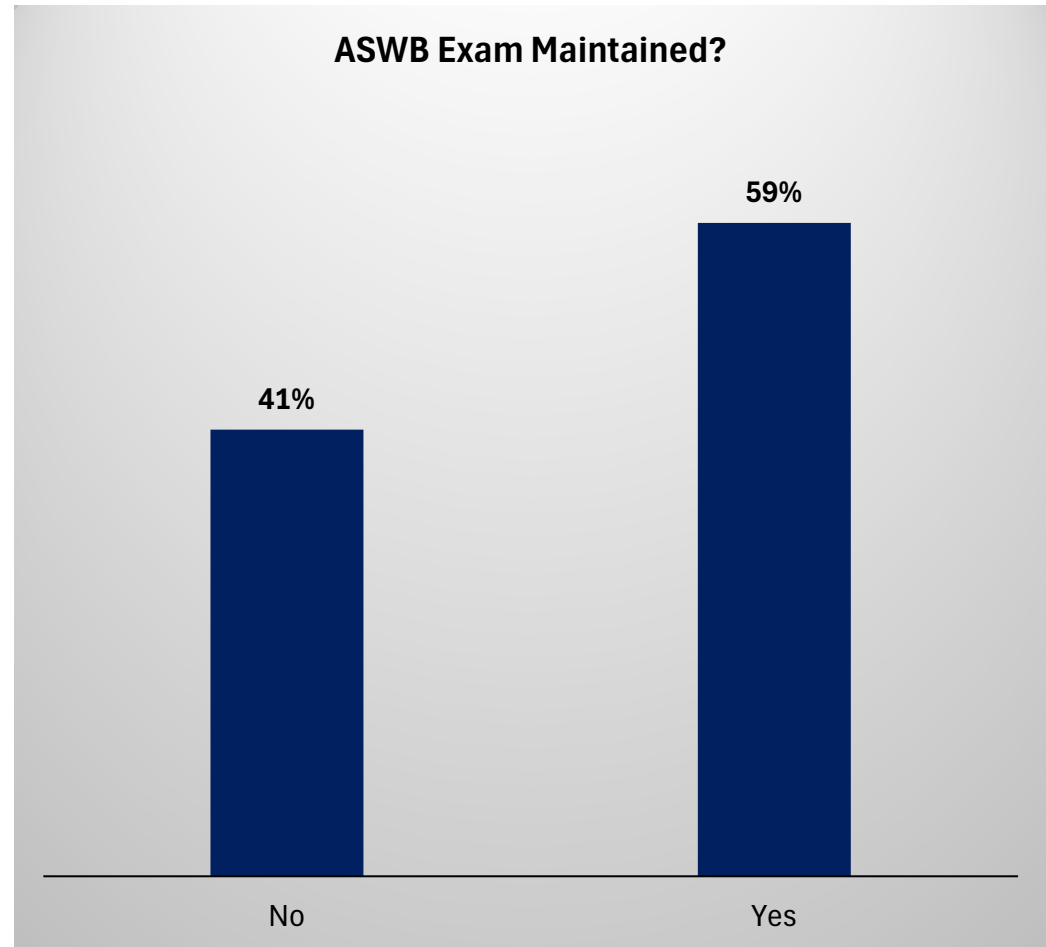
Maintaining ASWB Bachelor's Exam



59% think ASWB exam should be maintained as requirement



A little over 2 in 5 against ASWB exam requirement





Allowing an Alternative Licensure Pathway



64% in favor of
some kind of alt.
pathway

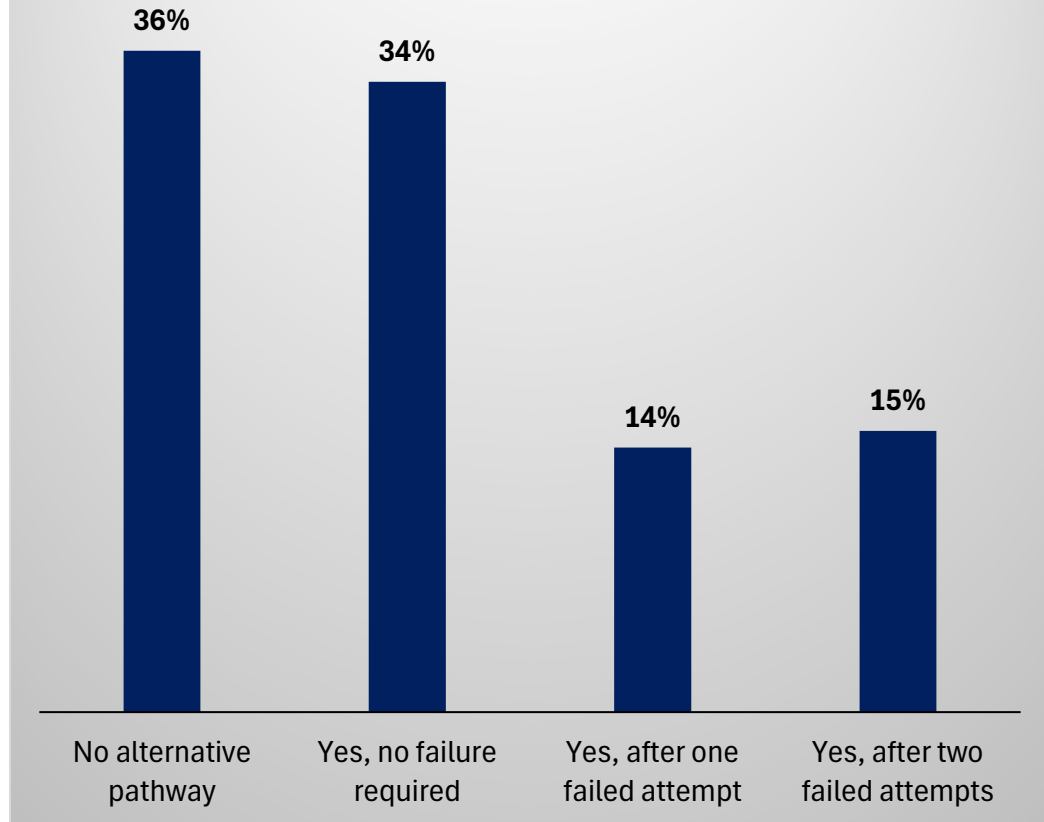


More than 1 in 3
endorse an alt.
pathway with no
exam failure



15% think alt.
pathway allowed
after 2 failed
attempts

Alternative Licensure Pathway





Virginia Department of Health Professions



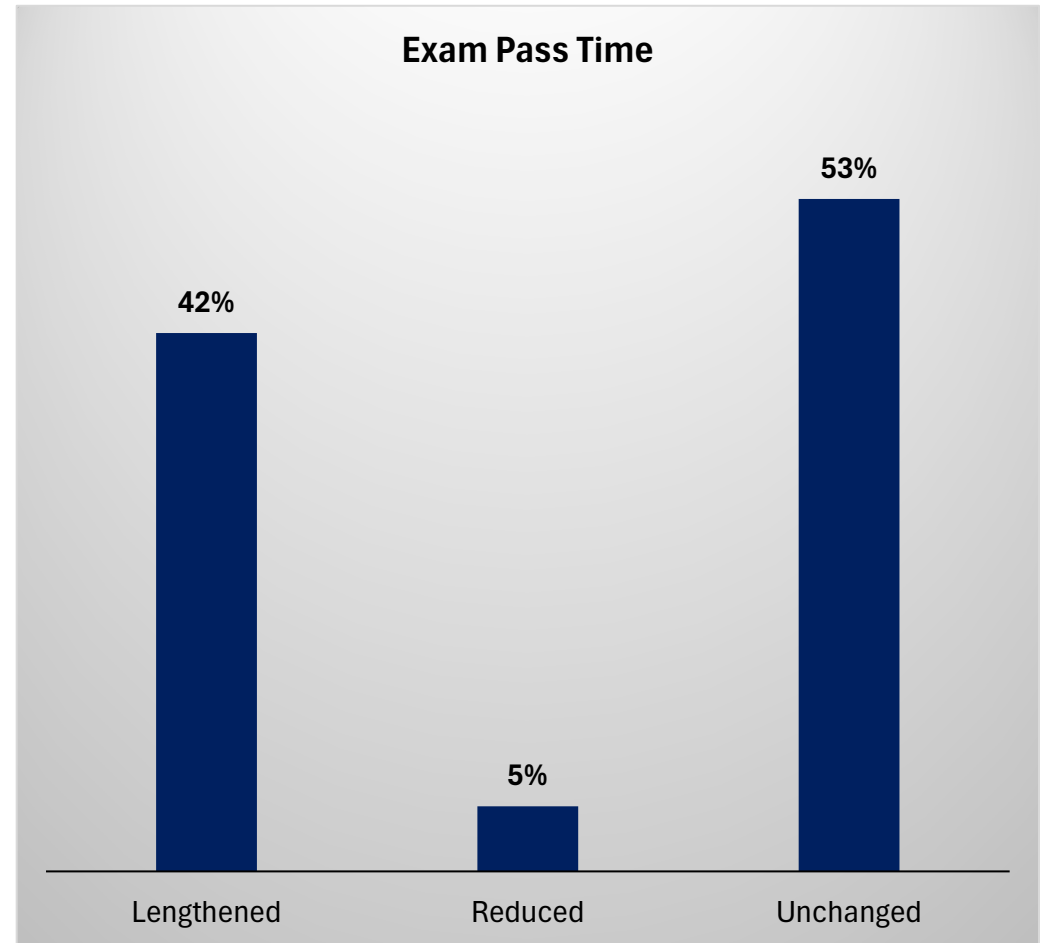
Timeline to Pass the Exam



2 in 5 think the
time to pass
exam should be
lengthened



Over half think
time to pass
exam should
remain
unchanged





Virginia Department of Health Professions

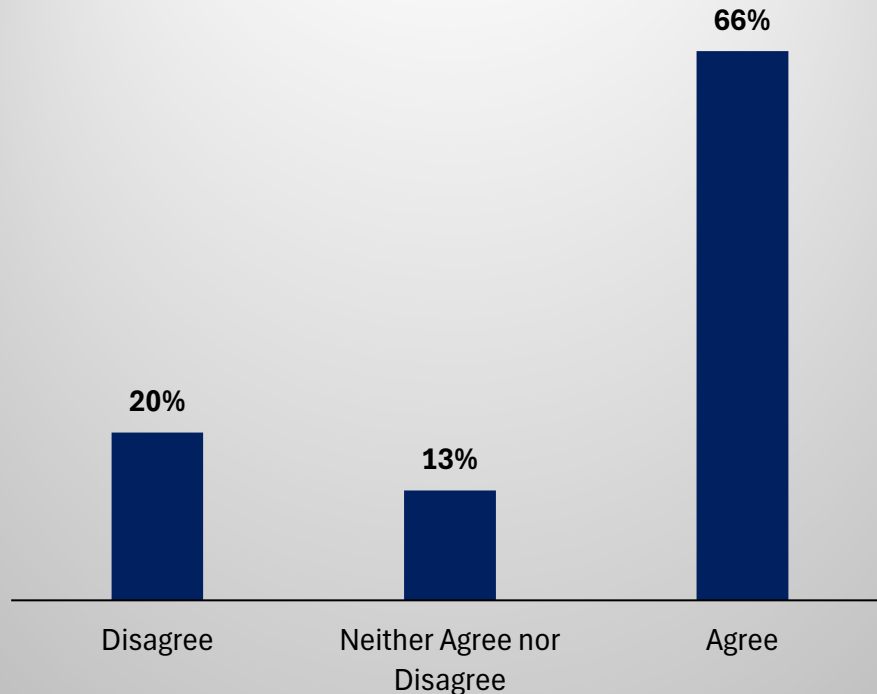


Exam, Minimal Qualifications, and Public Trust

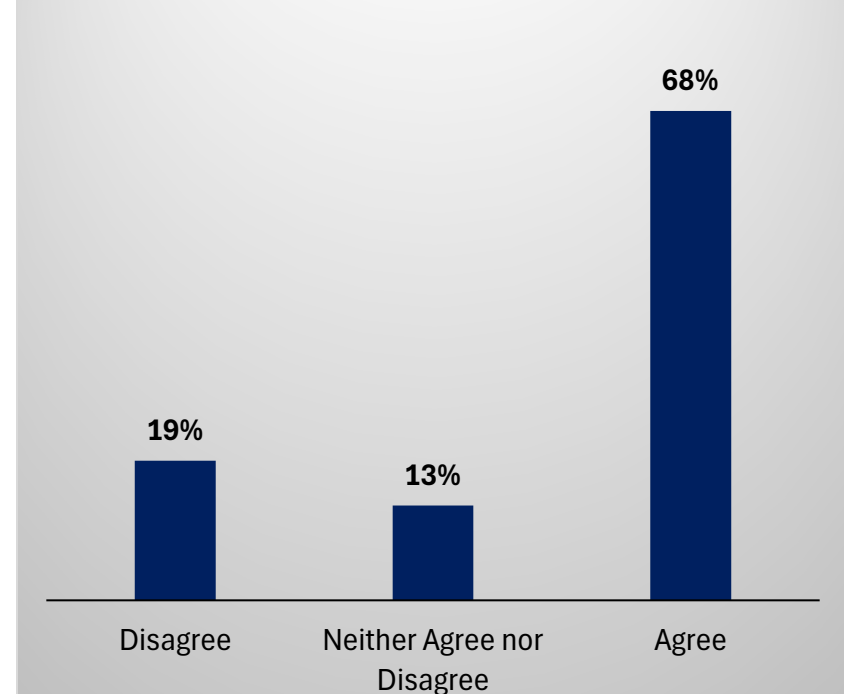


Majority agree that exam ensures minimal qualifications and builds public trust

Exam Ensures Minimal Qualifications



Exam Builds Public Trust



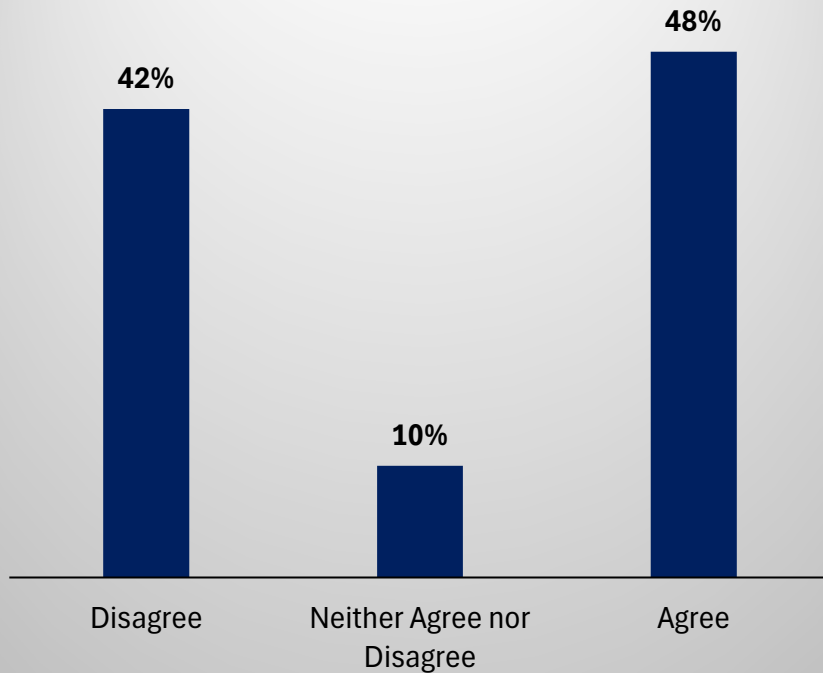


Supervision and Public Protection

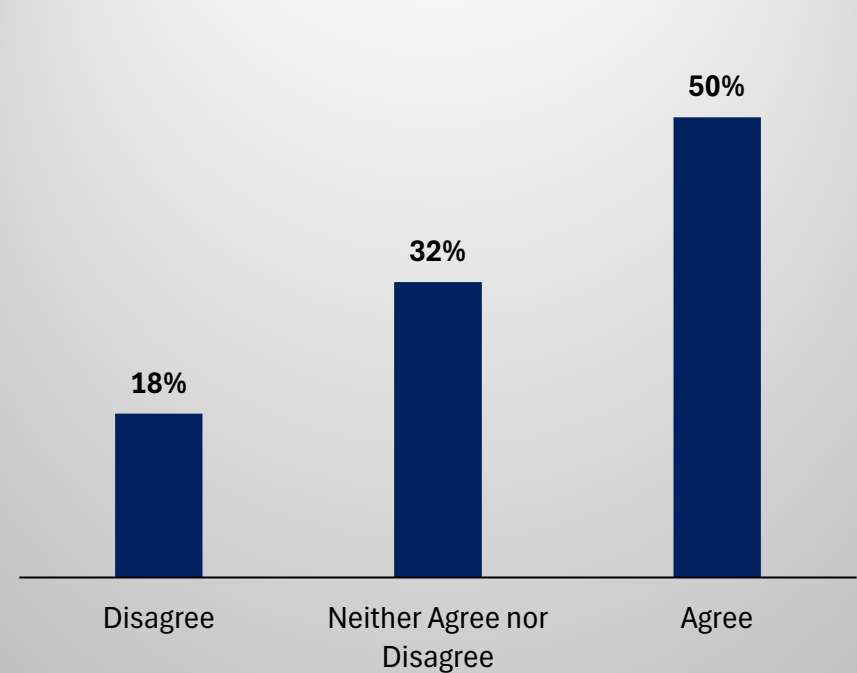


Slightly higher % agree that supervision can be an acceptable substitute to exam; half agree it improves public protection

Supervision can Substitute ASWB Exam



Exam Improves Public Protection



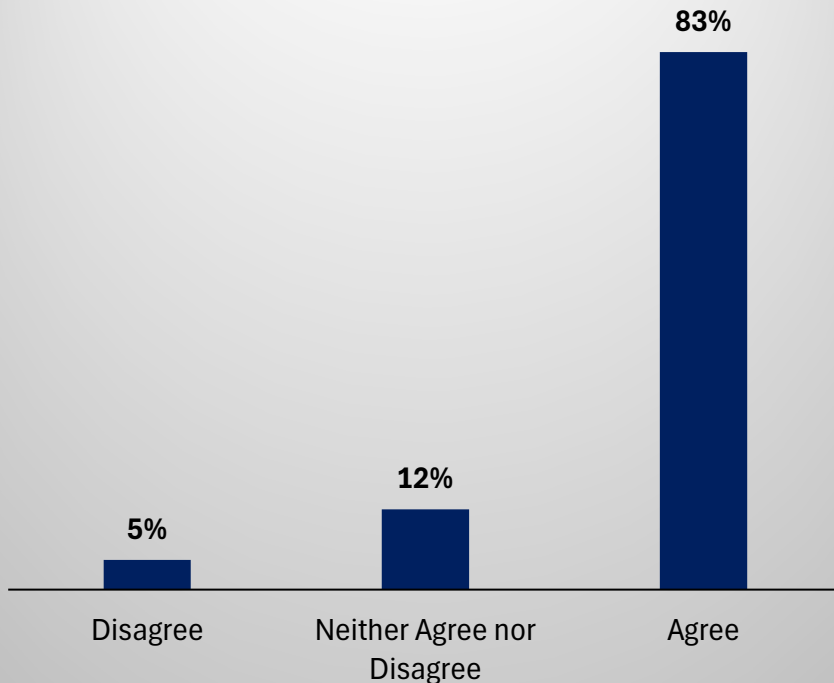


ASWB Documentation and NASW Release

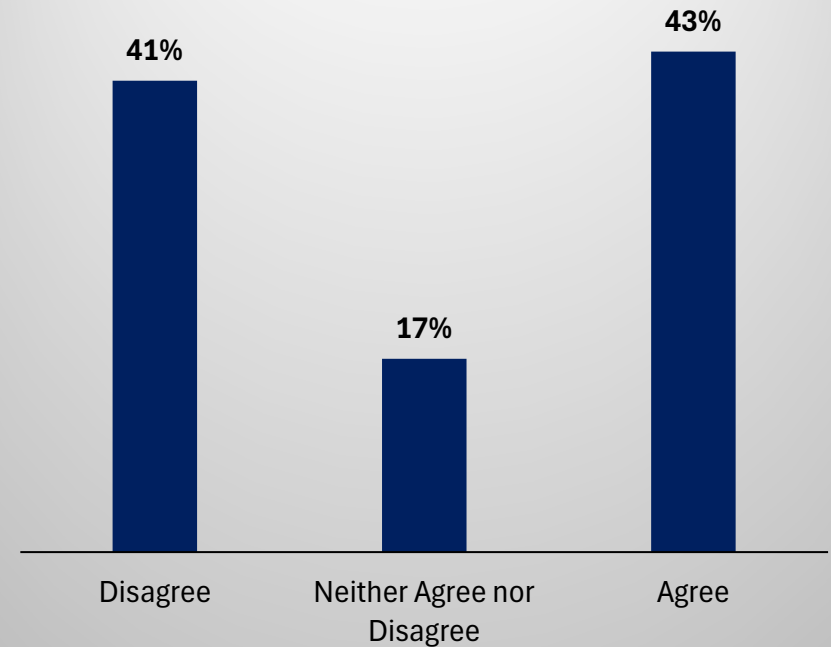


Majority agree that ASWB should provide documentation;
Slightly higher % agree with NASW press release

ASWB Provision of Documentation



NASW Press Release





Virginia Department of Health Professions



Conclusion



Majority agree that ASWB exam should be kept as a requirement; under 30 are less likely to support requirement



Most agree that some alternative pathway to licensure should be allowed



In terms of supervision substituting the exam, responses vary by age, education, race/ethnicity, and supervisory role



Most agree that ASWB Exam ensures minimal qualifications and builds public trust; some variation by race/ethnicity



Majority agree that the ASWB needs to provide documentation on reliability, validity, and fairness



Similar patterns of preliminary findings among LMSW and LBSW requirements