

BOARD OF COUNSELING
QUARTERLY BOARD MEETING
Friday, January 27, 2017 – 10:00 a.m.
Second Floor – Perimeter Center, Board Room 1

10:00 a.m. Call to Order – Kevin Doyle, Ed.D., LPC, LSATP, Chairperson

- I. **Welcome and Introductions**
 - A. Emergency evacuation instructions
- II. **Adoption of Agenda**
- III. **Approval of Minutes***
 - A. Board meeting minutes of November 4, 2016
- IV. **Public Comment**
- V. **Agency Director's Report: David E. Brown, D.C.**
- VI. **Staff Reports**
 - A. Executive Director's Report: Jaime Hoyle
 - B. Deputy Executive Director's Report: Jennifer Lang
 - a. Discipline Report
 - C. Licensing Manager's Report: Charlotte Lenart
 - a. Licensing Report
 - D. Board Counsel Report: James Rutkowski
- VII. **Committee Reports**
 - A. Board of Health Professions Report: Kevin Doyle
 - B. Regulatory Committee Report: Charles Gressard, Ph.D., LPC, LMFT, LSATP
- VIII. **Unfinished Business**
 - A. Bylaws Review
- IX. **New Business**
 - A. Regulatory/Legislative Report: Elaine Yeatts, Senior Policy Analyst
 - B. Next Meeting
 - C. Closed Session – Consideration of recommended decisions

11:30a.m. Adjournment

Approval of Minutes
November 4, 2016

DRAFT
BOARD OF COUNSELING
QUARTERLY BOARD MEETING
Friday, November 4, 2016

- TIME AND PLACE:** The meeting was called to order at 10:10 a.m. on Friday, November 4, 2016, in Board Room 4 at the Department of Health Professions, 9960 Mayland Drive, Henrico, Virginia.
- PRESIDING:** Kevin Doyle, Ed.D., LPC, LSATP
- BOARD MEMBERS PRESENT:** Johnston Brendel, Ed.D., LPC, LMFT
Cinda Caiella, LMFT
Charles Gressard, Ph.D., LPC, LMFT, LSATP
Danielle Hunt, LPC
Jane Nevins, LPC, LSATP
Phyllis Pugh, LPC, LMFT, CSAC
Vivian Sanchez-Jones, Citizen Member
Terry R. Tinsley, Ph.D., LPC, LMFT, CSOTP, NCC
Holly Tracy, LPC, LMFT
- BOARD MEMBERS ABSENT:** Sandra Malawer, LPC, LMFT
Bev-Freda L. Jackson, Ph.D., MA, Citizen Member
- STAFF PRESENT:** Tracey Arrington-Edmonds, Licensing Specialist
David Brown, DC, DHP Director
Christy Evans, Discipline Case Specialist
Jaime Hoyle, Esq., Executive Director
Jennifer Lang, Deputy Executive Director
Charlotte Lenart, Licensing Manager
James Rutkowski, Assistant Attorney General
Elaine Yeatts, DHP Senior Policy Analyst
- WELCOME:** Dr. Doyle welcomed the Board members, staff and the general-public in attendance. Members of the public included representatives from Hampton University, Virginia Commonwealth University, and Virginia Tech.
- ORDERING OF AGENDA:** The rearranging of the agenda to hear the statement of allegations against Ms. Marie P. Donlan, LMFT, CSAC was accepted.
- PUBLIC COMMENT:** No public comment.
- APPROVAL OF MINUTES:** A motion was made by Dr. Gressard and seconded by Dr. Brendel to approve the minutes of the August 19, 2016 Board meeting. The motion passed unanimously. A motion was made by Dr. Gressard and seconded by Dr. Brendel to approve the minutes of the September 9, 2016 Supervisor Summit. The motion passed unanimously.

DISCIPLINE HEARING:

Mr. Halbleib presented a summary of evidence in disciplinary case #174799 for the Board's consideration of a summary suspension of the license and certification of Ms. Marie P. Donlan, LMFT, CSAC. See attachment A for hearing summary minutes.

DHP DIRECTOR'S REPORT:

Dr. Brown thanked the Board members for attending the board member training and discussed key points covered during the training. Dr. Brown commented on the presentation on the Freedom of Information Act (FOIA) clarifying that the meeting of three or more board members discussing Board issues is considered as an official meeting. Dr. Brown also discussed receiving an appropriate fee when providing public access to the Board's documentation. He highlighted the importance of board members' role to assist in probable cause review of discipline cases in order to meet the agency's performance standards. Dr. Brown suggested that the board members should consider attending periodic refresher board member trainings to stay abreast of agency and board members policies.

EXECUTIVE DIRECTOR'S REPORT:

Executive Director, Ms. Hoyle, thanked and welcomed the new board members and returning board members. Ms. Hoyle thanked the staff for their continued hard work in processing the heavy volume of applications. Ms. Hoyle indicated that the goal of the Department of Health Professions is to close all disciplinary cases within 250 days. The Board of Counseling's goal is to meet this requirement and she asked for the Board's help in reviewing cases to insure the Board is achieving this goal.

DEPUTY EXECUTIVE DIRECTOR'S REPORT:

Ms. Hoyle reported, on behalf of Ms. Lang, the backlog of disciplinary cases and asked for assistance from Board members to meet the agency's goals. Ms. Hoyle announced that the Board closed 44 cases in the first quarter of the 2017 Fiscal Year, which is great.

LICENSING MAMAGER'S REPORT:

Mrs. Lenart reported that as of the end of first quarter of the 2017 Fiscal Year (July 1, 2016 - September 30, 2016), the Board of Counseling regulated 7,444 licensees. As of the last Board meeting, the Board licensed 137 individuals. Ms. Lenart reported that the Board of Counseling staff is very dedicated and works diligently to process applications. Staffs' goal is to process all applications within 30 days. Ms. Lenart commented that the staff has been able to decrease the processing time from up to 90 days to under 30 days. Since the last Board meeting in August, staff has reviewed over 1,200 applications and additional documentation related to the application process. This includes a count for each time an application is incomplete and staff is required to follow up with an applicant, as well as complete applications that moved forward through the credentialing review process.

In addition, Ms. Lenart provided an update on the results of the NCAC1 exam

for CSAC certification. As of April 2016, 69 applicants have attempted to take the NCAC1 exam. Of the 69 applicants, 50 have passed and 19 have failed, which represents a 72.5% passing rate.

BOARD COUNSEL REPORT: No report.

BOARD OF HEALTH PROFESSIONS REPORT: Dr. Doyle indicated that he attended the Board of Health Professions meeting on August 18, 2016. They reviewed the proposed budget of \$33 million and reported that they considered a two year renewal period but stated that the two year renewal does not appear to be feasible due to the Board's current revenue and expenditures reports.

REGULATORY COMMITTEE REPORT: Dr. Gressard reported that the Regulatory meeting focused primarily on reviewing the CSAC-A regulations in preparation to bring the Regulations Governing the Certification of Substance Abuse Counselors and Substance Abuse Counseling Assistants current with present day standards. Dr. Gressard reported that representatives from the Southwest Virginia Community College (SWCC) attended the meeting and provided a copy of the school's program currently in use to train substance abuse counselors. The committee reviewed guidance documents for compliance with current laws and regulations. Dr. Gressard announced that the next Regulatory Committee meeting is scheduled for January 26, 2017 at 1:00 p.m.

Clarification regarding clinical experience for supervisors: Staff sought the committee's assistance to determine whether a licensee teaching in a graduate or higher degree academic counseling program setting (including providing supervision to students during the internship/practicum) meets the supervisory qualifications for clinical experience. Dr. Doyle made a motion to approve post-licensure professional teaching in a professional academic counseling program setting as clinical experience. Dr. Brendel seconded the motion, and it passed unanimously.

- Guidance Document 115-1.3 Guidance on Meeting Degree Program Requirements for Professional Counseling Licensure: A review was completed and the suggestion made to retire the document as it was no longer viable due to the revised regulations dated August 24, 2016 which addressed and revised the educational requirements. A motion was made to retire the document. The motion was seconded and passed unanimously.
- Guidance Document 115-1.7 Guidance for Applicants from Programs that do not Meet Degree Program Requirements of 18VAC115-20-49: A review was completed and the suggestion made to remove the document as it was no longer viable due to the revised regulations dated August 24, 2016 which addressed and revised the educational/program requirements. A motion was made to remove the document. The motion was seconded and passed unanimously.

- Guidance Document 115-6 Coursework Requirement Necessary to Begin Supervision for Licensed Professional Counselor: A review was completed and the suggestion was made keep the document as it was still relevant. The Committee Members concluded that there is no need to create a similar guidance document at this time for the Marriage and Family Therapy or Substance Abuse Treatment Practitioners licenses.
- Guidance Document 115-4.3 Direct Client Contact Hours in an Internship that can be Applied Towards the Residency: A review was completed, a suggestion was made to specify the *maximum* number of face-to-face hours in excess of 240 hours required in an internship that can be counted towards the 2,000 direct client contact hours required for the residency to be up to 120 hours. A motion was made to revise the document to include the maximum number of hours that could be accepted toward the face-to-face residency hour as up to 120 hours in excess of the required 240 hours it was seconded and passed with all in favor. Ms. Yeatts, DHP Senior Policy Analyst and Mr. Rutkowski, Assistant Attorney General, indicated the guidance document could not be amended unless the regulations were changed.

Ms. Hoyle brought to the attention of the Committee the need to revise and update the Bylaws. She discussed some possible changes that are consistent with other Boards under the Department of Health Professions. Ms. Hoyle will draft the Bylaws and send it to the Committee for review in advance of the next Regulatory Committee meeting.

UNFINISHED BUSINESS:

A vote was required to approve English Language Learner (ELL) applicants to be able to request special arrangement when taking the MFT National Examination. A motion was made to approve an ELL applicant request for special arrangement when taking the MFT National Examination. The motion was seconded and passed unanimously.

NEW BUSINESS:

Regulatory/Legislative Report – Ms. Yeatts provided a chart detailing the regulatory actions status of regulations for the Board as of October 21, 2016. No public comment on the Notice of Intended Regulatory Action (NOIRA) or proposed regulations and that the previously proposed regulations were adopted. Ms. Yeatts reported that the Behavioral Science Unit has been working on bill with the Department of Medical Assistance Services (DMAS) and the Virginia Department of Behavioral Health & Developmental Services (DBHDS) regarding Peer Recovery Specialist and Qualified Mental Health Professional (QMHP).

- 18VAC 115-11 Public Participation Guidelines Conforming to APA (Action 4631) – fast-track at Secretary's Office for 31 days (submitted to the Registrar and awaiting publication (11/28/2016).
- 18VAC 115-20 Regulations Governing the Practice of Professional

Counseling requirement for CACREP accreditation for educational programs -proposed *At Governor's Office*; CE for volunteer service – fast-track at Secretary's Office; Fee increase -Final - *At Secretary's Office*. Ms. Yeatts stated although the current case balance is ahead of projections, the cash balance for the Board continues to decrease and recommends the Board move forward with the fee increase changes for 2017.

- 18VAC 115-30 Regulations Governing the Certification of Substance Abuse Counselors updating and clarifying regulations –the NOIRA - *At Secretary's Office*

Ms. Caiella moved to approve the adoption of the final amendments to the regulation for a fee increase. The motion was seconded by Ms. Nevins and passed unanimously.

Supervisor Summit Overview/Comments – Dr. Doyle reported that the summit was well-attended, and staff has received positive feedback from the attendees. The date to hold another supervisor summit can be discussed at a later date.

Workforce Survey 2016 Results – Elizabeth Carter, Ph.D., Director, DHP Healthcare Workforce Data Center presented an overview of the data collected available on their website <http://www.dhp.virginia.gov/hwdc>. The Virginia Department of Health Professions provides voluntary surveys to Department of Health Professions' licensees through the Department's online application and renewal processes. Survey reports for each profession are released a few months after the end of each renewal cycle. DHP healthcare workforce data is provided online to ensure accessibility of the findings among healthcare decision makers, hospital systems, academic institutions and constituents statewide. The Healthcare Workforce Data Center's Virginia Healthcare Workforce Briefs provide timely indicators of the strength of Virginia's healthcare labor market in an accessible format. Information in these briefs is based on data provided by the US Department of Labor, Bureau of Labor Statistics and the US Department of Commerce, Bureau of Economic Analysis. Produced in collaboration with the Virginia Healthcare Workforce Development Authority, (VHWDA) our Regional CareForce Products provide an interactive guide to the CareForce in each of Virginia's eight AHEC regions. Regional Reports are updated each spring.

Next Meeting - Scheduled for January 27, 2017 at 10:00 a.m.

ADJOURN:

The meeting adjourned at 1:30 p.m.

Kevin Doyle, Ed.D., LPC, LSATP
Chairperson

Jamie Hoyle, Esq.
Executive Director

ATTACHMENT A

BOARD OF COUNSELING STATEMENT OF ALLEGATIONS MEETING Friday, November 4, 2016

- TIME AND PLACE:** Friday, November 4, 2016 10:10 a.m. in Board Room 4 at the Department of Health Professions, 9960 Mayland Drive, Henrico, Virginia.
- MEMBERS PRESENT:** Johnston Brendel, Ed.D., LPC, LMFT
Cinda Caiella, LMFT
Kevin Doyle, Ed.D., LPC, LSATP
Charles Gressard, Ph.D., LPC, LMFT, LSATP
Danielle Hunt, LPC
Jane Nevins, LPC, LSATP
Phyllis Pugh, LPC, LMFT, CSAC
Vivian Sanchez-Jones, Citizen Member
Terry R. Tinsley, Ph.D., LPC, LMFT, CSOTP, NCC
Holly Tracy, LPC, LMFT
- MEMBERS ABSENT:** Sandra Malawer, LPC, LMFT
Bev-Freda L. Jackson, Ph.D., MA, Citizen Member
- STAFF PRESENT:** Tracey Arrington-Edmonds, Licensing Specialist
Christy Evans, Discipline Case Specialist
Jaime Hoyle, Esq., Executive Director
Jennifer Lang, Deputy Executive Director
Charlotte Lenart, Licensing Manager
James Rutkowski, Assistant Attorney General
- PURPOSE OF THE MEETING:** Mr. Halbleib presented a summary of evidence in disciplinary case #174799 for the Board's consideration of a summary suspension of the license and certification of Marie Donlan, LMFT, CSAC.
- CLOSED MEETING:** Johnston Brendel, Ed.D., LPC, LMFT, moved that the Board convene in a closed meeting pursuant to § 2.2-3711(A)(27) of the Code of Virginia for the purpose of deliberation to reach a decision in the matter of Ms. Donlan. Additionally, he moved that James Rutkowski, Jaime Hoyle, Jennifer Lang, Christy Evans, Charlotte Lenart and Tracey Arrington-Edmonds attend the closed session because their presence in the closed meeting was deemed necessary and would aid the Board in its deliberations. The motion was seconded and passed unanimously.
- RECONVENE:** Having certified that the matters discussed in the preceding closed meeting met the requirements of § 2.2-3712 of the Code, the Board reconvened in open meeting and announced the decision.

DECISION:

Dr. Gressard motioned to summarily suspend with offer of consent order with no less than 12 months. The motion was seconded by Dr. Brendel and passed unanimously.

Executive Director's Report

Virginia Department of Health Professions
Cash Balance
As of December 31, 2016

	<u>109 Counseling</u>
Board Cash Balance as of June 30, 2016	\$ 674,099
YTD FY17 Revenue	129,665
Less: YTD FY17 Direct and In-Direct Expenditures	<u>491,904</u>
Board Cash Balance as December 31, 2016	<u><u>311,859</u></u>

Virginia Department of Health Professions
 Revenue and Expenditures Summary
 Department 10900 - Counseling
 For the Period Beginning July 1, 2016 and Ending December 31, 2016

Account Number	Account Description	Amount	Budget	Amount	
				Under/(Over) Budget	% of Budget
4002400	Fee Revenue				
4002401	Application Fee	74,980.00	42,140.00	(32,840.00)	177.93%
4002406	License & Renewal Fee	33,045.00	661,645.00	628,600.00	4.99%
4002407	Dup. License Certificate Fee	395.00	450.00	55.00	87.78%
4002408	Board Endorsement - In	845.00	-	(845.00)	0.00%
4002409	Board Endorsement - Out	1,500.00	1,450.00	(50.00)	103.45%
4002421	Monetary Penalty & Late Fees	6,750.00	3,410.00	(3,340.00)	197.95%
4002430	Board Changes Fee	11,825.00	-	(11,825.00)	0.00%
4002432	Misc. Fee (Bad Check Fee)	35.00	140.00	105.00	25.00%
4002660	Administrative Fees	150.00	-	(150.00)	0.00%
	Total Fee Revenue	129,525.00	709,235.00	579,710.00	18.26%
4003000	Sales of Prop. & Commodities				
4003020	Misc. Sales-Dishonored Payments	140.00	-	(140.00)	0.00%
	Total Sales of Prop. & Commodities	140.00	-	(140.00)	0.00%
	Total Revenue	129,665.00	709,235.00	579,570.00	18.28%
5011110	Employer Retirement Contrib.	8,893.42	11,264.00	2,370.58	78.95%
5011120	Fed Old-Age Ins- Sal St Emp	5,876.21	6,388.00	511.79	91.99%
5011140	Group Insurance	891.35	1,094.00	202.65	81.48%
5011150	Medical/Hospitalization Ins.	10,091.50	37,512.00	27,420.50	26.90%
5011160	Retiree Medical/Hospitalizatn	801.97	986.00	184.03	81.34%
5011170	Long term Disability Ins	451.60	552.00	100.40	81.81%
	Total Employee Benefits	27,006.05	57,796.00	30,789.95	46.73%
5011200	Salaries				
5011230	Salaries, Classified	69,993.21	83,494.00	13,500.79	83.83%
5011250	Salaries, Overtime	9,079.75	-	(9,079.75)	0.00%
	Total Salaries	79,072.96	83,494.00	4,421.04	94.70%
5011300	Special Payments				
5011310	Bonuses and Incentives	1,000.00	-	(1,000.00)	0.00%
5011380	Deferred Compnstn Match Pmts	65.00	960.00	895.00	6.77%
	Total Special Payments	1,065.00	960.00	(105.00)	110.94%
5011600	Terminatn Personal Svce Costs				
5011660	Defined Contribution Match - Hy	365.23	-	(365.23)	0.00%
	Total Terminatn Personal Svce Costs	365.23	-	(365.23)	0.00%
5011930	Turnover/Vacancy Benefits				
	Total Personal Services	107,509.24	142,250.00	34,740.76	75.58%
5012000	Contractual Svs				
5012100	Communication Services				
5012110	Express Services	31.68	295.00	263.32	10.74%
5012140	Postal Services	4,901.18	8,232.00	3,330.82	59.54%
5012150	Printing Services	-	120.00	120.00	0.00%

Virginia Department of Health Professions
Revenue and Expenditures Summary
Department 10900 - Counseling
For the Period Beginning July 1, 2016 and Ending December 31, 2016

Account Number	Account Description	Amount			% of Budget
		Amount	Budget	Under/(Over)	
5012160	Telecommunications Svcs (VITA)	335.16	900.00	564.84	37.24%
5012190	Inbound Freight Services	16.67	-	(16.67)	0.00%
	Total Communication Services	5,284.69	9,547.00	4,262.31	55.35%
5012200	Employee Development Services				
5012210	Organization Memberships	-	500.00	500.00	0.00%
5012240	Employee Training/Workshop/Conf	365.00	-	(365.00)	0.00%
	Total Employee Development Services	365.00	500.00	135.00	73.00%
5012300	Health Services				
5012360	X-ray and Laboratory Services	-	140.00	140.00	0.00%
	Total Health Services	-	140.00	140.00	0.00%
5012400	Mgmt and Informational Svcs				
5012420	Fiscal Services	11,794.30	9,280.00	(2,514.30)	127.09%
5012440	Management Services	84.83	134.00	49.17	63.31%
5012460	Public Infrmtnl & Relatn Svcs	468.00	5.00	(463.00)	9360.00%
5012470	Legal Services	175.00	475.00	300.00	36.84%
	Total Mgmt and Informational Svcs	12,522.13	9,894.00	(2,628.13)	126.56%
5012500	Repair and Maintenance Svcs				
5012530	Equipment Repair & Maint Srvc	169.00	-	(169.00)	0.00%
5012560	Mechanical Repair & Maint Srvc	-	34.00	34.00	0.00%
	Total Repair and Maintenance Svcs	169.00	34.00	(135.00)	497.06%
5012600	Support Services				
5012630	Clerical Services	25,594.22	110,551.00	84,956.78	23.15%
5012640	Food & Dietary Services	1,793.72	1,075.00	(718.72)	166.86%
5012660	Manual Labor Services	796.76	1,170.00	373.24	68.10%
5012670	Production Services	5,129.88	5,380.00	250.12	95.35%
5012680	Skilled Services	8,070.69	16,764.00	8,693.31	48.14%
	Total Support Services	41,385.27	134,940.00	93,554.73	30.67%
5012800	Transportation Services				
5012820	Travel, Personal Vehicle	3,390.52	4,979.00	1,588.48	68.10%
5012830	Travel, Public Carriers	504.20	-	(504.20)	0.00%
5012850	Travel, Subsistence & Lodging	1,064.69	1,950.00	885.31	54.60%
5012880	Trvl, Meal Reimb- Not Rprtble	600.75	988.00	387.25	60.80%
	Total Transportation Services	5,560.16	7,917.00	2,356.84	70.23%
	Total Contractual Svs	65,286.25	162,972.00	97,685.75	40.06%
5013000	Supplies And Materials				
5013100	Administrative Supplies				
5013120	Office Supplies	675.52	597.00	(78.52)	113.15%
5013130	Stationery and Forms	24.01	-	(24.01)	0.00%
	Total Administrative Supplies	699.53	597.00	(102.53)	117.17%
5013600	Residential Supplies				
5013630	Food Service Supplies	-	183.00	183.00	0.00%
	Total Residential Supplies	-	183.00	183.00	0.00%

Virginia Department of Health Professions

Revenue and Expenditures Summary

Department 10900 - Counseling

For the Period Beginning July 1, 2016 and Ending December 31, 2016

Account Number	Account Description	Amount		Amount Under/(Over)	
		Amount	Budget	Budget	% of Budget
	Total Supplies And Materials	699.53	780.00	80.47	89.68%
5014000	Transfer Payments				
5014100	Awards, Contrib., and Claims				
5014130	Premiums	325.00	-	(325.00)	0.00%
	Total Awards, Contrib., and Claims	325.00	-	(325.00)	0.00%
	Total Transfer Payments	325.00	-	(325.00)	0.00%
5015000	Continuous Charges				
5015100	Insurance-Fixed Assets				
5015160	Property Insurance	-	46.00	46.00	0.00%
	Total Insurance-Fixed Assets	-	46.00	46.00	0.00%
5015300	Operating Lease Payments				
5015340	Equipment Rentals	224.17	540.00	315.83	41.51%
5015350	Building Rentals	30.78	-	(30.78)	0.00%
5015360	Land Rentals	-	60.00	60.00	0.00%
5015390	Building Rentals - Non State	5,750.66	11,046.00	5,295.34	52.06%
	Total Operating Lease Payments	6,005.61	11,646.00	5,640.39	51.57%
5015500	Insurance-Operations				
5015510	General Liability Insurance	-	170.00	170.00	0.00%
5015540	Surety Bonds	-	11.00	11.00	0.00%
	Total Insurance-Operations	-	181.00	181.00	0.00%
	Total Continuous Charges	6,005.61	11,873.00	5,867.39	50.58%
5022000	Equipment				
5022100	Computer Hrdware & Sftware				
5022170	Other Computer Equipment	199.00	-	(199.00)	0.00%
5022180	Computer Software Purchases	256.98	-	(256.98)	0.00%
	Total Computer Hrdware & Sftware	455.98	-	(455.98)	0.00%
5022200	Educational & Cultural Equip				
5022240	Reference Equipment	-	77.00	77.00	0.00%
	Total Educational & Cultural Equip	-	77.00	77.00	0.00%
5022600	Office Equipment				
5022610	Office Appurtenances	-	42.00	42.00	0.00%
5022620	Office Furniture	52.59	-	(52.59)	0.00%
	Total Office Equipment	52.59	42.00	(10.59)	125.21%
	Total Equipment	508.57	119.00	(389.57)	427.37%
	Total Expenditures	180,334.20	317,994.00	137,659.80	56.71%

Virginia Department of Health Professions
Revenue and Expenditures Summary
Department 10900 - Counseling
For the Period Beginning July 1, 2016 and Ending December 31, 2016

Account Number	Account Description	July	August	September	October	November	December	Total
4002400	Fee Revenue							
4002401	Application Fee	12,100.00	13,820.00	14,835.00	11,965.00	11,145.00	11,115.00	74,980.00
4002406	License & Renewal Fee	20,830.00	3,850.00	1,335.00	1,390.00	895.00	4,745.00	33,045.00
4002407	Dup. License Certificate Fee	40.00	125.00	105.00	30.00	58.00	37.00	395.00
4002408	Board Endorsement - In	795.00	-	-	50.00	-	-	845.00
4002409	Board Endorsement - Out	100.00	350.00	400.00	175.00	300.00	175.00	1,500.00
4002421	Monetary Penalty & Late Fees	4,395.00	1,265.00	355.00	315.00	270.00	150.00	6,750.00
4002430	Board Changes Fee	2,125.00	2,175.00	1,750.00	1,925.00	2,025.00	1,825.00	11,825.00
4002432	Misc. Fee (Bad Check Fee)	-	-	35.00	-	-	-	35.00
4002660	Administrative Fees	150.00	-	-	-	-	-	150.00
	Total Fee Revenue	40,535.00	21,585.00	18,815.00	15,850.00	14,693.00	18,047.00	129,525.00
4003000	Sales of Prop. & Commodities							
4003020	Misc. Sales-Dishonored Payments	-	-	140.00	-	-	-	140.00
	Total Sales of Prop. & Commodities	-	-	140.00	-	-	-	140.00
	Total Revenue	40,535.00	21,585.00	18,955.00	15,850.00	14,693.00	18,047.00	129,665.00
5011000	Personal Services							
5011100	Employee Benefits							
5011110	Employer Retirement Contrib.	1,615.36	1,057.26	1,555.20	1,555.20	1,555.20	1,555.20	8,893.42
5011120	Fed Old-Age Ins- Sal St Emp	939.04	852.67	953.23	1,076.95	1,008.07	1,046.25	5,876.21
5011140	Group Insurance	153.77	105.74	157.96	157.96	157.96	157.96	891.35
5011150	Medical/Hospitalization Ins.	2,276.50	1,563.00	1,563.00	1,563.00	1,563.00	1,563.00	10,091.50
5011160	Retiree Medical/Hospitalizatn	137.61	95.24	142.28	142.28	142.28	142.28	801.97
5011170	Long term Disability Ins	79.92	53.28	79.60	79.60	79.60	79.60	451.60
	Total Employee Benefits	5,202.20	3,727.19	4,451.27	4,574.99	4,506.11	4,544.29	27,006.05
5011200	Salaries							
5011230	Salaries, Classified	12,108.12	10,065.41	11,643.46	12,058.74	12,058.74	12,058.74	69,993.21
5011250	Salaries, Overtime	861.36	593.72	1,329.95	2,532.19	1,631.79	2,130.74	9,079.75
	Total Salaries	12,969.48	10,659.13	12,973.41	14,590.93	13,690.53	14,189.48	79,072.96
5011310	Bonuses and Incentives	-	1,000.00	-	-	-	-	1,000.00
5011380	Deferred Compnsn Match Pmts	15.00	10.00	10.00	10.00	10.00	10.00	65.00
	Total Special Payments	15.00	1,010.00	10.00	10.00	10.00	10.00	1,065.00
5011600	Terminatn Personal Svce Costs							
5011660	Defined Contribution Match - Hy	47.49	31.66	71.52	71.52	71.52	71.52	365.23
	Total Terminatn Personal Svce Costs	47.49	31.66	71.52	71.52	71.52	71.52	365.23
	Total Personal Services	18,234.17	15,427.98	17,506.20	19,247.44	18,278.16	18,815.29	107,509.24
5012000	Contractual Svcs							
5012100	Communication Services							
5012110	Express Services	-	-	-	-	-	31.68	31.68
5012140	Postal Services	1,621.14	1,683.00	572.36	684.34	72.71	267.63	4,901.18
5012160	Telecommunications Svcs (VITA)	55.20	74.07	56.35	-	78.29	71.25	335.16
5012190	Inbound Freight Services	-	-	-	-	-	16.67	16.67
	Total Communication Services	1,676.34	1,757.07	628.71	684.34	151.00	387.23	5,284.69
5012200	Employee Development Services							
5012240	Employee Training/Workshop/Conf	-	-	-	-	-	365.00	365.00
	Total Employee Development Services	-	-	-	-	-	365.00	365.00
5012400	Mgmnt and Informational Svcs							
5012420	Fiscal Services	4,155.41	6,799.51	532.59	87.05	22.36	197.38	11,794.30
5012440	Management Services	-	48.16	-	27.23	-	9.44	84.83
5012460	Public Infrmnt & Relatn Svcs	195.00	99.00	108.00	-	-	66.00	468.00
5012470	Legal Services	-	175.00	-	-	-	-	175.00
	Total Mgmnt and Informational Svcs	4,350.41	7,121.67	640.59	114.28	22.36	272.82	12,522.13
5012500	Repair and Maintenance Svcs							

Virginia Department of Health Professions
Revenue and Expenditures Summary
Department 10900 - Counseling
For the Period Beginning July 1, 2016 and Ending December 31, 2016

Account Number	Account Description	July	August	September	October	November	December	Total
5012530	Equipment Repair & Maint Svc	-	169.00	-	-	-	-	169.00
	Total Repair and Maintenance Svcs	-	169.00	-	-	-	-	169.00
5012600	Support Services							
5012630	Clerical Services	4,282.98	5,769.93	7,069.79	-	-	8,471.52	25,594.22
5012640	Food & Dietary Services	265.78	63.33	45.75	-	-	1,418.86	1,793.72
5012660	Manual Labor Services	6.84	19.17	3.81	672.44	32.27	62.23	796.76
5012670	Production Services	60.20	90.22	23.75	4,489.88	160.16	305.67	5,129.88
5012680	Skilled Services	1,204.08	1,099.91	1,643.66	845.84	1,503.98	1,773.22	8,070.69
	Total Support Services	5,819.88	7,042.56	8,786.76	6,008.16	1,696.41	12,031.50	41,385.27
5012800	Transportation Services							
5012820	Travel, Personal Vehicle	69.12	362.88	1,121.44	393.12	1,443.96	-	3,390.52
5012830	Travel, Public Carriers	-	-	-	-	-	504.20	504.20
5012850	Travel, Subsistence & Lodging	-	-	349.77	201.68	513.24	-	1,064.69
5012880	Trvl, Meal Reimb- Not Rprtbl	-	-	239.50	87.25	274.00	-	600.75
	Total Transportation Services	69.12	362.88	1,710.71	682.05	2,231.20	504.20	5,560.16
	Total Contractual Svcs	11,915.75	16,453.18	11,768.77	7,488.83	4,100.97	13,560.75	65,286.25
5013000	Supplies And Materials							
5013100	Administrative Supplies							
5013120	Office Supplies	28.20	36.61	186.07	-	-	424.64	675.52
5013130	Stationery and Forms	-	-	-	-	-	24.01	24.01
	Total Administrative Supplies	28.20	36.61	186.07	-	-	448.65	699.53
	Total Supplies And Materials	28.20	36.61	186.07	-	-	448.65	699.53
5014000	Transfer Payments							
5014100	Awards, Contrib., and Claims							
5014130	Premiums	-	-	260.00	-	-	65.00	325.00
	Total Awards, Contrib., and Claims	-	-	260.00	-	-	65.00	325.00
	Total Transfer Payments	-	-	260.00	-	-	65.00	325.00
5015000	Continuous Charges							
5015300	Operating Lease Payments							
5015340	Equipment Rentals	46.00	44.08	44.08	-	-	90.01	224.17
5015350	Building Rentals	-	15.39	-	-	15.39	-	30.78
5015390	Building Rentals - Non State	914.20	1,054.53	914.20	914.20	1,037.39	916.14	5,750.66
	Total Operating Lease Payments	960.20	1,114.00	958.28	914.20	1,052.78	1,006.15	6,005.61
	Total Continuous Charges	960.20	1,114.00	958.28	914.20	1,052.78	1,006.15	6,005.61
5022000	Equipment							
5022170	Other Computer Equipment	-	-	-	-	-	199.00	199.00
5022180	Computer Software Purchases	-	-	-	-	-	256.98	256.98
	Total Computer Hrdware & Sftware	-	-	-	-	-	455.98	455.98
5022620	Office Furniture	-	-	-	-	-	52.59	52.59
	Total Office Equipment	-	-	-	-	-	52.59	52.59
	Total Equipment	-	-	-	-	-	508.57	508.57
	Total Expenditures	31,138.32	33,031.77	30,677.32	27,650.47	23,431.91	34,404.41	180,334.20
	Net Revenue in Excess (Shortfall) of							
	Expenditures Before Allocated Expenditures	\$ 9,396.68	\$ (11,446.77)	\$ (11,722.32)	\$ (11,800.47)	\$ (8,738.91)	\$ (16,357.41)	(50,669.20)

Deputy Executive Director's Report



CASES RECEIVED, OPEN, & CLOSED REPORT SUMMARY BY BOARD

FISCAL YEAR 2017, QUARTER ENDING 09/30/2016

Quarter Breakdown	
Quarter 1	July 1 st – September 30 th
Quarter 2	October 1 st – December 31 st
Quarter 3	January 1 st – March 31 st
Quarter 4	April 1 st – June 30 th

The “Received, Open, Closed” table below shows the number of received and closed cases during the quarters specified and a “snapshot” of the cases still open at the end of the quarter.

COUNSELING	Q2 2014	Q3 2014	Q4 2014	Q1 2015	Q2 2015	Q3 2015	Q4 2015	Q1 2016	Q2 2016	Q3 2016	Q4 2016	Q1 2017
Number of Cases Received	19	19	32	29	20	19	23	24	21	32	26	27
Number of Cases Open	19	55	59	73	80	87	94	91	108	117	116	98
Number of Cases Closed	19	20	31	15	14	12	21	31	11	25	27	44

PSYCHOLOGY	Q2 2014	Q3 2014	Q4 2014	Q1 2015	Q2 2015	Q3 2015	Q4 2015	Q1 2016	Q2 2016	Q3 2016	Q4 2016	Q1 2017
Number of Cases Received	24	10	19	23	16	19	8	19	18	19	14	18
Number of Cases Open	41	28	33	44	61	65	64	78	84	74	68	76
Number of Cases Closed	16	26	13	15	4	16	13	8	12	32	20	9

SOCIAL WORK	Q2 2014	Q3 2014	Q4 2014	Q1 2015	Q2 2015	Q3 2015	Q4 2015	Q1 2016	Q2 2016	Q3 2016	Q4 2016	Q1 2017
Number of Cases Received	14	29	50	24	25	11	15	22	31	19	15	19
Number of Cases Open	41	58	71	73	80	82	96	95	126	120	127	78
Number of Cases Closed	15	14	36	23	18	13	9	27	8	27	8	62



AVERAGE TIME TO CLOSE A CASE (IN DAYS) PER QUARTER

FISCAL YEAR 2017, QUARTER ENDING 09/30/2016

Quarter Breakdown	
Quarter 1	July 1 st – September 30 th
Quarter 2	October 1 st – December 31 st
Quarter 3	January 1 st – March 31 st
Quarter 4	April 1 st – June 30 th

*The average age of cases closed is a measurement of how long it takes, on average, for a case to be processed from entry to closure. These calculations include only cases closed within the quarter specified.

BOARD	Q2 2014	Q3 2014	Q4 2014	Q1 2015	Q2 2015	Q3 2015	Q4 2015	Q1 2016	Q2 2016	Q3 2016	Q4 2016	Q1 2017
Counseling	225.4	225.8	170.4	204.6	238.2	315.6	252.2	284.1	193.5	415.6	323.7	375.5
Psychology	177.5	149.5	176.5	210.0	129.0	171.1	181.1	216.0	287.0	437.0	287.3	380.0
Social Work	138.9	216.9	171.2	183.9	314.4	198.9	202.9	199.4	132.5	342.0	226.0	469.7
Agency Totals	179.9	175.9	170.1	178.3	187.6	207.2	186.7	200.1	190.8	201.6	188.5	202.7



PERCENTAGE OF CASES OF ALL TYPES CLOSED WITHIN 365 CALENDAR DAYS*

FISCAL YEAR 2017, QUARTER ENDING 09/30/2016

Quarter Breakdown	
Quarter 1	July 1 st – September 30 th
Quarter 2	October 1 st – December 31 st
Quarter 3	January 1 st – March 31 st
Quarter 4	April 1 st – June 30 th

*The percent of cases closed in fewer than 365 days shows, from the total of all cases closed during the specified period, the percent of cases that were closed in less than one year.

BOARD	Q2 2014	Q3 2014	Q4 2014	Q1 2015	Q2 2015	Q3 2015	Q4 2015	Q1 2016	Q2 2016	Q3 2016	Q4 2016	Q1 2017
Counseling	80.0%	89.5%	96.8%	86.7%	78.6%	75.0%	76.2%	64.3%	72.7%	36.0%	55.6%	45.5%
Psychology	94.1%	92.3%	100.0%	93.3%	100.0%	87.5%	100.0%	75.0%	50.0%	37.5%	50.0%	44.4%
Social Work	100.0%	85.7%	91.7%	95.7%	72.2%	92.3%	77.8%	65.5%	87.5%	46.2%	75.0%	30.7%
Agency Totals	89.6%	91.4%	97.4%	90.9%	88.6%	87.9%	88.3%	84.4%	85.8%	84.8%	85.6%	82.0%

Licensing Manager's Report

COUNT OF CURRENT LICENSES*
BOARD SUMMARY
 FISCAL YEAR 2017, QUARTER ENDING 09/30/2016

Quarter Breakdown	
Quarter 1	July 1st - September 30th
Quarter 2	October 1st - December 31st
Quarter 3	January 1st - March 31st
Quarter 4	April 1st - June 30th

*CURRENT LICENSES BY BOARD AND OCCUPATION AS OF THE LAST DAY OF THE QUARTER

	Q2 2014	Q3 2014	Q4 2014	Q1 2015	Q2 2015	Q3 2015	Q4 2015	Q1 2016	Q2 2016	Q3 2016	Q4 2016	CURRENT Q1 2017
Audiology/Speech Pathology	4093	3936	4104	4418	4674	4653	4840	4944	4992	4720	4802	4951
Counseling	6960	7098	6545	7026	7183	7256	7042	7249	7490	7597	7808	13237
Dentistry	13226	12617	13140	13390	13507	12782	13753	13999	14186	14319	14184	14382
Funeral Directing	2516	2379	2471	2521	2543	2313	2506	2540	2573	2618	2497	2526
Long Term Care Administrators	2079	1968	2054	2107	2176	1922	2058	2115	2165	2206	2087	2141
Medicine	61769	61910	61789	62714	62617	62816	64137	66337	65922	66177	67447	66941
Nurse Aide	53989	53751	53098	54250	54491	53695	53834	54568	54402	54374	54477	54044
Nursing	159067	159315	159974	162346	161891	161569	163058	164128	163594	163637	164199	166107
Optometry	1915	1852	1906	1927	1946	1866	1915	1931	1963	1874	1914	1936
Pharmacy	34800	33321	34398	35424	36750	34226	35476	36365	37218	34741	35972	37125
Physical Therapy	10390	10574	10901	11401	11647	10533	11000	10908	11075	11240	11702	12682
Psychology	3799	3888	3624	3893	4017	4093	3876	4028	4141	4253	4360	4994
Social Work	6076	6242	6350	6481	6590	6741	6306	6544	6690	6828	7057	8900
Veterinary Medicine	6882	6651	6897	7029	7108	6888	7187	7304	7370	7112	7376	7489
AGENCY TOTAL	367561	365502	367251	374927	377140	371343	376988	381960	383761	381696	385882	397455

COUNT OF CURRENT LICENSES
FISCAL YEAR 2017, QUARTER ENDING 09/30/2016

Quarter Breakdown	
Quarter 1	July 1st - September 30th
Quarter 2	October 1st - December 31st
Quarter 3	January 1st - March 31st
Quarter 4	April 1st - June 30th

*CURRENT LICENSES BY BOARD AND OCCUPATION AS OF THE LAST DAY OF THE QUARTER

Board	Occupation	CURRENT												
		Q2 2014	Q3 2014	Q4 2014	Q1 2015	Q2 2015	Q3 2015	Q4 2015	Q1 2016	Q2 2016	Q3 2016	Q4 2016	Q1 2017	
Audiology/Speech Pathology	Audiologist	500	480	486	506	613	491	501	517	519	497	507	517	
	Continuing Education Provider	0	11	12	0	12	13	14	14	14	14	15	15	
	School Speech Pathologist	127	124	130	221	334	431	475	506	513	475	484	507	
	Speech Pathologist	3466	3321	3476	3691	3815	3718	3850	3907	3946	3734	3796	3912	
Total		4093	3936	4104	4418	4674	4653	4840	4944	4992	4720	4802	4951	
Counseling	Certified Substance Abuse Counselor	1661	1680	1473	1617	1669	1679	1558	1617	1679	1691	1734	1662	
	Licensed Marriage and Family Therapist	825	838	775	817	828	832	808	825	845	856	870	836	
	Licensed Professional Counselor	3821	3944	3700	3950	4096	4123	4072	4188	4333	4435	4567	4512	
	Marriage & Family Therapist Resident												131	
	Registration of Supervision												5491	
	Rehabilitation Provider	337	307	311	312	313	280	285	286	288	259	266	270	
	Substance Abuse Counseling Assistant	135	146	117	151	157	162	152	163	169	179	192	164	
	Substance Abuse Treatment Practitioner	181	183	169	179	180	180	167	170	176	177	179	170	
	Substance Abuse Treatment Residents													1
	Total		6960	7098	6545	7026	7183	7256	7042	7249	7490	7597	7808	13237
	Dentistry	Conscious/Moderate Sedation	174	139	182	193	199	178	189	198	206	210	212	221
		Cosmetic Procedure Certification	30	29	30	30	32	31	32	33	34	32	36	37
		Deep Sedation/General Anesthesia	40	30	41	48	50	44	51	56	59	63	51	54
Dental Assistant II		3	3	3	3	4	6	10	10	10	12	11	11	
Dental Full Time Faculty		10	9	9	9	10	11	12	14	14	15	16	12	
Dental Hygienist		5508	5287	5465	5558	5596	5293	5575	5643	5687	5722	5719	5815	
Dental Hygienist Faculty		0	0	0	1	0	0	0	1	1	1	1	1	
Dental Hygienist Restricted Volunteer		0	0	1	0	1	1	1	1	1	1	1	16	
Dental Hygienist Temporary Permit		0	0	0	0	0	0	0	0	0	0	0	0	
Dental Hygienist Volunteer Registration		0	0	0	0	0	1	0	0	0	0	0	0	
Dental Restricted Volunteer		16	17	13	16	14	14	13	14	14	16	20	0	
Dental Teacher		0	0	0	0	0	0	0	0	0	0	0	0	
Dental Temporary Permit		1	1	0	0	0	0	0	0	0	0	0	0	
Dentist		6962	6668	6911	7022	7097	6713	7052	7152	7212	7292	7147	7249	
Dentist-Volunteer Registration	2	2	2	2	0	7	6	9	3	9	7	5		
Enteral Conscious/Moderate Sedation	156	113	157	163	164	150	152	163	175	180	166	174		

COUNT OF CURRENT LICENSES *
LAST FIVE FISCAL YEARS

Quarter Breakdown	
Quarter 1	July 1st - September 30th
Quarter 2	October 1st - December 31st
Quarter 3	January 1st - March 31st
Quarter 4	April 1st - June 30th

*CURRENT LICENSES BY BOARD AND OCCUPATION AS OF THE LAST DAY OF THE FISCAL YEAR

Board	Occupation	FY12		Change Between FY13 & FY12		FY13		Change Between FY14 & FY13		FY14		Change Between FY15 & FY14		FY15		Change Between FY16 & FY15		FY16				
		Count	%	Count	%	Count	%	Count	%	Count	%	Count	%	Count	%	Count	%	Count	%			
Board	Occupation	Audiologist	451	3.8%	468	3.8%	486	3.1%	501	3.1%	507	1.2%	507	1.2%	507	1.2%	507	1.2%	507	1.2%		
		Continuing Education Provider	1	-	0	-	12	16.7%	14	11.7%	14	11.7%	15	7.1%	15	7.1%	15	7.1%	15	7.1%		
		School Speech Pathologist	110	5.5%	116	12.1%	130	265.4%	475	10.8%	475	1.9%	484	1.9%	484	1.9%	484	1.9%	484	1.9%		
		Speech Pathologist	3022	5.0%	3172	9.6%	3476	10.8%	3850	-1.4%	3796	-1.4%	3796	-1.4%	3796	-1.4%	3796	-1.4%	3796	-1.4%		
		Total	3584	4.8%	3756	9.3%	4104	17.9%	4840	-0.8%	4802	-0.8%	4802	-0.8%	4802	-0.8%	4802	-0.8%	4802	-0.8%	4802	-0.8%
Counseling	Certified Substance Abuse Counselor	1714	0.6%	1724	-14.6%	1473	5.6%	1338	11.3%	1734	11.3%	1734	11.3%	1734	11.3%	1734	11.3%	1734	11.3%	1734	11.3%	
	Licensed Marriage and Family Therapist	790	1.4%	801	-3.2%	775	4.3%	808	7.7%	870	7.7%	870	7.7%	870	7.7%	870	7.7%	870	7.7%	870	7.7%	
	Licensed Professional Counselor	3538	2.6%	3630	1.9%	3700	10.1%	4072	12.2%	4567	12.2%	4567	12.2%	4567	12.2%	4567	12.2%	4567	12.2%	4567	12.2%	
	Rehabilitation Provider	334	-0.3%	333	-6.6%	311	-8.4%	285	-6.7%	266	-6.7%	266	-6.7%	266	-6.7%	266	-6.7%	266	-6.7%	266	-6.7%	
	Substance Abuse Counseling Assistant	115	11.3%	128	-8.6%	117	29.9%	152	26.3%	192	26.3%	192	26.3%	192	26.3%	192	26.3%	192	26.3%	192	26.3%	
	Substance Abuse Treatment Practitioner	183	1.1%	185	-8.6%	169	-1.2%	167	7.2%	179	7.2%	179	7.2%	179	7.2%	179	7.2%	179	7.2%	179	7.2%	
	Total	6674	1.9%	6801	-3.8%	6545	7.6%	7042	10.9%	7808	10.9%	7808	10.9%	7808	10.9%	7808	10.9%	7808	10.9%	7808	10.9%	
	Dentistry	Conscious/Moderate Sedation	-	-	144	28.4%	182	3.6%	189	12.2%	212	12.2%	212	12.2%	212	12.2%	212	12.2%	212	12.2%	212	12.2%
		Cosmetic Procedure Certification	27	0.0%	27	11.1%	30	6.7%	32	12.5%	38	12.5%	38	12.5%	38	12.5%	38	12.5%	38	12.5%	38	12.5%
		Deep Sedation/General Anesthesia	-	-	32	28.1%	41	24.4%	51	0.0%	51	0.0%	51	0.0%	51	0.0%	51	0.0%	51	0.0%	51	0.0%
		Dental Assistant II	-	-	3	0.0%	3	233.3%	10	10.0%	11	10.0%	11	10.0%	11	10.0%	11	10.0%	11	10.0%	11	10.0%
		Dental Full Time Faculty	9	0.0%	9	0.0%	9	33.3%	12	33.3%	16	33.3%	16	33.3%	16	33.3%	16	33.3%	16	33.3%	16	33.3%
		Dental Hygienist	5021	2.0%	5122	6.7%	5465	2.0%	5575	2.6%	5719	2.6%	5719	2.6%	5719	2.6%	5719	2.6%	5719	2.6%	5719	2.6%
		Dental Hygienist Faculty	1	0.0%	1	-	0	-	0	-	1	-	1	-	1	-	1	-	1	-	1	-
		Dental Hygienist Restricted Volunteer	-	-	-	-	1	0.0%	1	0.0%	1	0.0%	1	0.0%	1	0.0%	1	0.0%	1	0.0%	1	0.0%
Dental Hygienist volunteer Registrations		-	-	-	-	0	-	0	-	0	-	0	-	0	-	0	-	0	-	0	-	
Dental Hygienist Temporary Permit		13	-	-	-	0	-	0	-	0	-	0	-	0	-	0	-	0	-	0	-	
Dental Restricted Volunteer		-	-	16	-18.8%	13	0.0%	13	53.8%	20	53.8%	20	53.8%	20	53.8%	20	53.8%	20	53.8%	20	53.8%	
Dental Teacher		3	-	4	-	0	-	0	-	0	-	0	-	0	-	0	-	0	-	0	-	
Dental Temporary Permit		3	-	2	-	0	-	0	-	0	-	0	-	0	-	0	-	0	-	0	-	
Dentist		6293	2.2%	6432	7.4%	6911	2.0%	7052	1.3%	7147	1.3%	7147	1.3%	7147	1.3%	7147	1.3%	7147	1.3%	7147	1.3%	
Dentist-Volunteer Registration		-	-	1	100.0%	2	200.0%	6	16.7%	7	16.7%	7	16.7%	7	16.7%	7	16.7%	7	16.7%	7	16.7%	
Enteral Conscious/Moderate Sedation	-	-	94	67.0%	157	-3.2%	152	9.2%	166	9.2%	166	9.2%	166	9.2%	166	9.2%	166	9.2%	166	9.2%		
Mobile Dental Facility	-	-	7	28.6%	9	44.4%	13	7.7%	14	7.7%	14	7.7%	14	7.7%	14	7.7%	14	7.7%	14	7.7%		

Bylaws Review

Current Bylaws

Revised November 15, 2013

VIRGINIA BOARD OF COUNSELING

BYLAWS

ARTICLE I: AUTHORIZATION

A. Statutory Authority

The Virginia Board of Counseling is established and operates pursuant to §§ 54.1-2400 and 54.1-3500 through 54.1-3515 of the *Code of Virginia*. Regulations promulgated by the Virginia Board of Counseling may be found in 18VAC115-20-10 et seq., Regulations Governing the Practice of Professional Counseling; 18 VAC 115-30-10, Regulations Governing the Certification of Substance Abuse Counselors and Substance Abuse Counseling Assistants; 18VAC115-40-10 et seq., Regulations Governing the Certification of Rehabilitation Providers; 18VAC115-50-10 et seq., Regulations Governing the Practice of Marriage and Family Therapy; and 18 VAC 115-60-10 et seq., Regulations Governing the Practice of Substance Abuse Treatment Practitioners.

B. Duties

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

ARTICLE II: THE BOARD

A. The membership of the Board shall consist of fourteen (14) members, appointed by the Governor and subject to confirmation by the General Assembly in accordance with § 54.1-3503 of the *Code of Virginia*. Twelve shall be professionals licensed in Virginia, who shall represent the various specialties recognized in the profession, and two shall be citizen members. Of the 12 professional members, six shall be professional counselors, three shall be clinical fellows of the American Association for Marriage and Family Therapy, and three shall be licensed substance abuse treatment practitioners. At least two members representing each specialty shall have been in active practice for at least four years.

B. The terms of the members of the Board shall be four years.

C. Members of the Board of Counseling holding a voting office in any related professional association or one that takes a policy position on the regulations of the Board shall abstain from voting on issues where there may be a conflict of interest present.

D. Officers of the Board

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

ARTICLE III: ELECTION OF OFFICERS

- A. Officers shall be elected at a meeting of the Board with a quorum present. A simple majority shall prevail with the current Chairperson casting a vote only to break a tie. Voting shall be by voice unless otherwise decided by a vote of the members present. Special elections to fill an unexpired term shall be held in the event of a vacancy of an officer at the subsequent Board meeting following the occurrence of an office being vacated.
- B. The election of officers shall occur at the first scheduled Board meeting following July 1 of each odd year, and elected officers shall assume their duties at the end of the meeting. All officers shall be elected for a term of two years and may serve no more than two consecutive terms.

ARTICLE IV: MEETINGS

- A. Frequency of Meetings. The full Board shall meet quarterly, unless a meeting is not required to conduct Board business.
 - B. Order of Business at Meetings
 - Period of Public Comment
 - Approval of Minutes of preceding regular Board meeting and any called meeting since the last regular meeting of the Board.
 - Reports of Officers and staff
 - Reports of Committees
 - Election of Officers (as needed)
 - Unfinished Business
 - New Business
- The order of business may be changed at any meeting by a majority vote.

ARTICLE V: COMMITTEES

A. General. Members appointed to a committee shall faithfully perform the duties assigned to the committee.

B. The standing committees of the Board shall consist of the following:

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

C. Frequency of Meetings. All standing committees shall meet as necessary to conduct the business of the Board.

D. Regulatory/Legislative Committee

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

E. Credentials Committee

The Credentials Committee shall consist of at least two Board members appointed by the Chairperson of the Board with the Chairperson of the Committee to be appointed by the Chairperson of the Board. The Committee shall review applicants' credentials for licensure or certification if they do not appear to meet the requirements of the Board or if there may be information indicating the Board has grounds for denial. The Committee may conduct an informal fact-finding conference at the request of the applicant in accordance with § 2.2-4019 of the Code of Virginia.

F. Special Conference Committee

The Special Conference Committee shall consist of two board members who shall review information regarding alleged violations of the laws and regulations of the Board and, in consultation with the Executive Director, determine if probable cause exists to proceed with possible disciplinary action. The Special Conference Committees shall meet as necessary to adjudicate cases in a timely manner in accordance with agency standards for case resolution. The Chairperson of the Board shall also designate another board member as an alternate on this committee in the event one of the standing committee members becomes ill or is unable to attend a scheduled conference date. Further, should the caseload increase to the level that additional special conference committees are needed, the Chairperson may appoint additional committees.

ARTICLE VI: GENERAL DELEGATION OF AUTHORITY

The Board delegates the following functions:

1. The Board delegates to Board staff the authority to issue and renew licenses or certificates and to approve supervision applications for which regulatory and statutory qualifications have been met. If there is basis upon which the Board could refuse to issue or renew the license or certification or to deny the supervision application, the Executive Director may only issue a license or certificate or grant approval in accordance with delegated authority provided in a guidance document of the Board.
2. The Board delegates to the Executive Director the authority to reinstate a license or certificate when the reinstatement is due to the lapse of the license or certificate rather than a disciplinary action and there is no basis upon which the Board could refuse to reinstate.
3. The Board delegates to Board staff the authority to develop and approve any and all forms used in the daily operations of Board business, to include, but not be limited to, licensure and certification applications, renewal forms, and documents used in the disciplinary process.
4. The Board delegates to the Executive Director the authority to sign as entered any Order or Consent Order resulting from the disciplinary process or other administrative proceeding.
5. The Board delegates to the Executive Director, who may consult with a special conference committee member, the authority to provide guidance to the agency's Enforcement Division in situations wherein a complaint is of questionable jurisdiction and an investigation may not be necessary.
6. The Board delegates to the Executive Director the authority to review information regarding alleged violations of law or regulations and, in consultation with a member of a special conference committee, make a determination as to whether probable cause exists to proceed with possible disciplinary action.
7. The Board delegates to the Executive Director authority to grant an extension for good cause of up to one year for the completion of continuing education requirements upon written request from the licensee or certificate holder prior to the renewal date.
8. The Board delegates to the Executive Director authority to grant an exemption for all or part of the continuing education requirements due to circumstances beyond the control of the licensee or certificate holder, such as temporary disability, mandatory military service, or officially declared disasters.
9. The Board delegates to the Executive Director the authority to grant an accommodation of additional testing time or other requests for accommodation to candidates for Board-required examinations pursuant to the Americans with Disabilities Act, provided the candidate provides documentation that supports such an accommodation.

ARTICLE VII: AMENDMENTS

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

Adopted: June 3, 2005

Revised: November 15, 2013

Suggested Revisions to Bylaws

VIRGINIA BOARD OF COUNSELING

BYLAWS

ARTICLE 1: AUTHORIZATION

A. Statutory Authority

The Virginia Board of Counseling ("Board") is established and operates pursuant to §§ 54.1-2400 and 54.1-3500 through ~~54.1-3545 et seq.~~ of the Code of Virginia. Regulations promulgated by the Virginia Board of Counseling may be found in 18VAC115-20-10 et seq., Regulations Governing the Practice of Professional Counseling; 18 VAC 115-30-10 et seq., "Regulations Governing the Certification of Substance Abuse Counselors and Substance Abuse Counseling Assistants"; 18VAC115-40-10 et seq., "Regulations Governing the Certification of Rehabilitation Providers"; 18VAC115-50-10 et seq., "Regulations Governing the Practice of Marriage and Family Therapy"; and 18 VAC 115-60-10 et seq., "Regulations Governing the Practice of Substance Abuse Treatment Practitioners".

B. Duties

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

C. Mission

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

ARTICLE II: THE BOARD

A. Membership

~~1. The membership of the Board shall consist of fourteen (14) members, appointed by the Governor as follows:~~

~~a. and subject to confirmation by the General Assembly in accordance with § 54.1-3503 of the Code of Virginia. Twelve (12) shall be professionals licensed in Virginia, who shall represent the various specialties recognized in the profession, and~~ The licensed professionals shall be

- i. Six (6) professional counselors
- ii. Three (3) licensed marriage and family therapists who have passed the examination for licensure as a marriage and family therapist, and
- iii. One (1) licensed substance abuse treatment practitioner

~~b. Two (2) shall be citizen members. Of the 12 professional members, six shall be professional counselors, three shall be clinical fellows of the American Association for Marriage and Family Therapy, and three shall be licensed substance abuse treatment practitioners. At least two members representing each specialty shall have been in active practice for at least four years.~~

~~B. 2. The terms of the members of the Board shall be four (4) years.~~

~~C. 3. Members of the Board of Counseling holding a voting office in any related professional association or one that takes a policy position on the regulations of the Board shall abstain from voting on issues where there may be a conflict of interest present.~~

~~D. B. Officers of the Board~~

1. The Chairperson or designee shall preserve order and conduct all proceedings according to parliamentary rules, the Virginia Freedom of Information Act, and the Administrative Process Act. Roberts Rules of Order will guide parliamentary procedure for the meetings. Except where specifically provided otherwise by the law or as otherwise ordered by the Board, the Chairperson shall appoint all committees, and shall sign as Chairperson to the certificates authorized to be signed by the Chairperson.

2. The Vice-Chairperson shall act as Chairperson in the absence of the Chairperson and assume the duties of Chairperson in the event of an unexpired term.

~~3. In the absences of the Chairperson and Vice-Chairperson, the Chairperson shall appoint another board member to preside at the meeting and/or formal administrative hearing.~~

~~4. The Executive Director shall be the custodian of all Board records. He/she shall preserve a correct list of all applicants and licensees, shall manage the correspondence of the Board, and shall perform all such other duties as naturally pertain to this position.~~

C. Duties of Members

1. Each member shall participate in all matters before the Board.

2. Members shall attend all regular and special meetings of the Board unless prevented by illness or similar unavoidable cause. In the event of two (2) consecutive unexcused absences at any meeting of the Board or its committees, the Chairperson shall make a recommendation to the Director of the Department of Health Professions for referral to the Secretary of Health and Human Resources and Secretary of the Commonwealth.

3. The Governor may remove any Board member for cause, and the Governor shall be sole judge of the sufficiency of the cause for removal pursuant to § 2.2-10B.

~~ARTICLE III: ELECTION OF OFFICERS~~

D. Election of Officers

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

~~2. The election of officers shall occur at the first scheduled Board meeting following July 1 of each odd year, and elected officers shall assume their duties at the end of the meeting.~~

a. ~~Officers shall be elected at a meeting of the Board with a quorum present.~~

b. ~~The Chairperson shall ask for nominations from the floor by office. A simple majority shall prevail with the current Chairperson casting a vote only to break a tie.~~

c. ~~Voting shall be by voice unless otherwise decided by a vote of the members present. The results shall be recorded in the minutes.~~

d. ~~A simple majority shall prevail with the current Chairperson casting a vote only to break a tie.~~

e. ~~Special elections to fill an unexpired term shall be held in the event of a vacancy of an officer at the subsequent Board meeting following the occurrence of an office being vacated.~~

f. ~~The election shall occur in the following order: Chairperson, Vice-Chairperson~~

~~B. The election of officers shall occur at the first scheduled Board meeting following July 1 of each odd year, and elected officers shall assume their duties at the end of the meeting. All officers shall be elected for a term of two years and may serve no more than two consecutive terms.~~

ARTICLE IV: MEETINGS

E. Meetings

A. Frequency of Meetings.

1. ~~The full Board shall meet quarterly, unless a meeting is not required to conduct Board business.~~

B. 2. Order of Business at Meetings:

a. Adoption of Agenda

b. Period of Public Comment

c. Approval of Minutes of preceding regular Board meeting and any called meeting since the last regular meeting of the Board.

d. Reports of Officers and staff

e. Reports of Committees

f. Election of Officers (as needed)

g. Unfinished Business

h. New Business

3. The order of business may be changed at any meeting by a majority vote.

ARTICLE V III: COMMITTEES

A. General Duties and Frequency of Meetings.

1. Members appointed to a committee shall faithfully perform the duties assigned to the committee.

~~2. All standing committees shall meet as necessary to conduct the business of the Board.~~

B. Standing Committees

The ~~s~~Standing committees of the Board shall consist of the following:

Regulatory/Legislative Committee

~~Credentials Committee~~

Special Conference Committee

~~Discipline Review Committee~~

Any other Standing Committees created by the Board.

~~C. Frequency of Meetings. All standing committees shall meet as necessary to conduct the business of the Board.~~

D. 1. Regulatory/Legislative Committee

~~a. The Chairperson of the Committee shall be appointed by the Chairperson of the Board.~~

b. The Regulatory/Legislative Committee shall consist of at least two (2) Board members appointed by the Chairperson ~~with the Chairperson of the Committee to be appointed by the Chairperson of the Board.~~

c. The Committee shall consider all questions bearing upon state legislation and regulation governing the professions regulated by the Board.

- d. ~~The Regulatory/Legislative Committee shall recommend to the Board changes in law and regulations as it may deem advisable and, at the direction of the Board, shall take such steps as may further the desire of the Board in matters of legislation and regulation.~~
- e. ~~The Chairperson of the Committee shall submit proposed changes in applicable laws and to the regulations of the Board in writing to the Board prior to any scheduled meeting.~~

~~E. Credentials Committee~~

~~The Credentials Committee shall consist of at least two Board members appointed by the Chairperson of the Board with the Chairperson of the Committee to be appointed by the Chairperson of the Board. The Committee shall review applicants' credentials for licensure or certification if they do not appear to meet the requirements of the Board or if there may be information indicating the Board has grounds for denial. The Committee may conduct an informal fact-finding conference at the request of the applicant in accordance with § 2.2-4019 of the Code of Virginia.~~

F. 2. Special Conference Committee

- a. The Special Conference Committee shall:
 - i. consist of two (2) Board members,
 - ii. conduct informal conferences pursuant to §§ 2.2-4019, 2.2-4021, and 54.1-2400 of the Code of Virginia as necessary to adjudicate cases in a timely manner in accordance with the agency standards for case resolution.
 - iii. hold informal conferences at the request of the applicant or licensee to determine if Board requirements have been met.
- b. who shall review information regarding alleged violations of the laws and regulations of the Board and, in consultation with the Executive Director, determine if probable cause exists to proceed with possible disciplinary action. The Special Conference Committees shall meet as necessary to adjudicate cases in a timely manner in accordance with agency standards for case resolution. The Chairperson of the Board shall also designate another board member as an alternate on this committee in the event one of the standing committee members becomes ill or is unable to attend a scheduled conference date.
- c. Further, should the caseload increase to the level that additional special conference committees are needed, the Chairperson of the Board may appoint additional committees.

3. Discipline Review Committee

- a. The Discipline Review Committee shall:
 - i. Consist of at least two (2) Board members.
 - ii. Review investigative reports resulting from complaints against licensees and determine if probable cause exists to proceed with possible disciplinary action.

iii. Direct the disposition of disciplinary cases at the probable cause review stage.

b. The Committee members may review and decide any action to be taken regarding applications for supervision, licensure, or certification when the application includes information about criminal activity, practice history, medical conditions, or other issues contained in the application packet.

ARTICLE ~~VI~~ IV: GENERAL DELEGATION OF AUTHORITY

The Board delegates the following functions:

1. The Board delegates to Board staff the authority to issue and renew licenses or certificates and to approve supervision applications for which regulatory and statutory qualifications have been met. If there is basis upon which the Board could refuse to issue or renew the license or certification or to deny the supervision application, the Executive Director may only issue a license, ~~or certificate, or registration or grant approval~~ upon consultation with a member of the Discipline Review Committee, or in accordance with delegated authority provided in a guidance document of the Board.

~~2. 6.~~ The Board delegates to the Executive Director the authority to reinstate a license or certificate when the reinstatement is due to the lapse of the license or certificate rather than a disciplinary action and there is no basis upon which the Board could refuse to reinstate.

~~3. 2.~~ The Board delegates to ~~Board staff~~ the Executive Director the authority to develop and approve any and all forms used in the daily operations of Board business, to include, but not be limited to, licensure, ~~and certification, and registration~~ applications, renewal forms, and documents used in the disciplinary process.

~~4. 7.~~ The Board delegates to the Executive Director the authority to sign as entered any Order or Consent Order resulting from the disciplinary process or other administrative proceeding.

~~5. 9.~~ The Board delegates to the Executive Director, who may consult with a ~~special conference Discipline Review~~ eCommittee member, the authority to provide guidance to the agency's Enforcement Division in situations wherein a complaint is of questionable jurisdiction and an investigation may not be necessary.

~~6. 10.~~ The Board delegates to the Executive Director, ~~or Deputy Executive Director,~~ the authority to review information regarding alleged violations of law or regulations and, in consultation with a member of a ~~special conference~~ the Discipline Review eCommittee, make a determination as to whether probable cause exists to proceed with possible disciplinary action.

~~7. 4.~~ The Board delegates to the Executive Director authority to grant an extension for good cause of up to one (1) year for the completion of continuing education requirements upon written request from the licensee or certificate holder prior to the renewal date.

~~8. 5.~~ The Board delegates to the Executive Director authority to grant an exemption for all or part of the continuing education requirements due to circumstances beyond the control of the licensee or

certificate holder, such as temporary disability, mandatory military service, or officially declared disasters.

3. The Board delegates to the Executive Director the authority to grant an accommodation of additional testing time or other requests for accommodation to candidates for Board-required examinations pursuant to the Americans with Disabilities Act, provided the candidate provides documentation that supports such an accommodation.

9. The Board delegates authority to the Executive Director to close non-jurisdictional cases and fee dispute cases without review by a Board member.

11. The Board delegates to the Executive Director, or Deputy Executive Director, the determination of probable cause, for the purpose of offering a confidential consent agreement, a pre-hearing consent order, or for scheduling an informal conference in accordance with established Board guidance documents.

12. The Board delegates to the Executive Director the selection of the agency subordinate who is deemed appropriately qualified to conduct a proceeding based on the qualifications of the subordinate and the type of case being convened.

13. The Board delegates to the Executive Director or the Deputy Executive Director the convening of a quorum of the Board by telephone conference call, for the purpose of considering the summary suspension of a license or for the purpose of considering settlement proposals.

14. The Board delegates to the Chairperson, the authority to represent the Board in instances where Board "consultation" or "review" may be requested where a vote of the Board is not required and a meeting is not feasible.

15. The Board delegates authority to the Executive Director to issue an Advisory Letter to the person who is the subject of a complaint pursuant to Virginia Code § 54.1-2400.2(F), when it is determined that a probable cause review indicates a disciplinary proceeding will not be instituted.

16. Delegated tasks shall be summarized and reported to the Board at each regularly scheduled meeting.

9.

ARTICLE VII: AMENDMENTS

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

Guidance document: 115-1.2

Revised: ~~November 15, 2013~~

Adopted: June 3, 2005

Revised: ~~November 15, 2013~~

Regulatory/Legislative Report

Agenda Item: Regulatory Actions - Chart of Regulatory Actions

Staff Note: Attached is a chart with the status of regulations for the Board as of January 12, 2017

18 VAC 115 - 11]	Public Participation Guidelines	<u>Conforming to APA</u> [Action 4631] Fast-Track - Register Date: 11/28/16 Effective: 1/12/17
[18 VAC 115 - 20]	Regulations Governing the Practice of Professional Counseling	<u>Requirement for CACREP accreditation for educational programs</u> [Action 4259] Proposed - At Governor's Office
[18 VAC 115 - 20]	Regulations Governing the Practice of Professional Counseling	<u>CE for volunteer service</u> [Action 4630] Fast-Track - Register Date: 1/23/17 Effective: 3/9/17
[18 VAC 115 - 20]	Regulations Governing the Practice of Professional Counseling	<u>Fee increase</u> [Action 4443] Final - Register Date: 1/9/17 Effective: 2/8/17
[18 VAC 115 - 30]	Regulations Governing the Certification of Substance Abuse Counselors	<u>Updating and clarifying regulations</u> [Action 4691] NOIRA - Register Date: 1/23/17 Comment closes: 2/22/17

Board of Counseling

2017 Legislative Report

HB 2042 Suicide prevention; continuing education requirements for providers.

Chief patron: Murphy

Summary as introduced:

Suicide prevention; continuing education requirements for providers. Requires continuing education related to suicide assessment, treatment, and management for all licensed doctors of medicine, osteopathy, and chiropractic medicine; licensed physician assistants; licensed nurse practitioners; licensed occupational therapists; licensed registered nurses; licensed practical nurses; licensed physical therapists and physical therapy assistants; licensed counselors, substance abuse treatment practitioners, and marriage and family therapists; licensed psychologists; and licensed social workers.

SB 848 Naloxone; dispensing for use in opioid overdose reversal, etc. (This is a Governor's bill – Same bill in House (HB1449))

Chief patron: Wexton

Summary as introduced:

Dispensing of naloxone. Allows a person who is authorized by the Department of Behavioral Health and Developmental Services to train individuals on the administration of naloxone for use in opioid overdose reversal and who is acting on behalf of an organization that provides substance abuse treatment services to individuals at risk of experiencing opioid overdose or training in the administration of naloxone for overdose reversal and that has obtained a controlled substances registration from the Board of Pharmacy pursuant to § 54.1-3423 to dispense naloxone to a person who has completed a training program on the administration of naloxone for opioid overdose reversal, provided that such dispensing is (i) pursuant to a standing order issued by a prescriber, (ii) in accordance with protocols developed by the Board of Pharmacy in consultation with the Board of Medicine and the Department of Health, and (iii) without charge or compensation. The bill also provides that a person who dispenses naloxone shall not be liable for civil damages of ordinary negligence for acts or omissions resulting from the rendering of such treatment if he acts in good faith and that a person to whom naloxone has been dispensed pursuant to the provisions of the bill may possess naloxone and may administer

naloxone to a person who is believed to be experiencing or about to experience a life-threatening opioid overdose.

SB 922 Dept of Professional and Occupational Regulation and Department of Health Professions; licensure. (This is a DHP bill)

Chief patron: Petersen

Summary as introduced:

Department of Professional and Occupational Regulation and Department of Health Professions; licensure, certification, registration, and permitting. Provides that certain powers of the Department of Professional and Occupational Regulation, the Department of Health Professions, and health regulatory boards and certain requirements of persons regulated by such entities apply, inclusively, to permits as well as licenses, certifications, and registrations and to holders of permits as well as holders of such licenses, certifications, and registrations.

SB 1020 Registration of peer recovery specialists and qualified mental health professionals. (This is a Governor's bill – Same bill in House (HB2095) Copy of bill attached.

Chief patron: Barker

Summary as introduced:

Registration of peer recovery specialists and qualified mental health professionals. Authorizes the registration of peer recovery specialists and qualified mental health professionals by the Board of Counseling. The bill defines "qualified mental health professional" as a person who by education and experience is professionally qualified and registered by the Board of Counseling to provide collaborative mental health services for adults or children. The bill requires that a qualified mental health professional provide such services as an employee or independent contractor of a mental health service provider licensed by the Department of Behavioral Health and Developmental Services. The bill defines "registered peer recovery specialist" as a person who by education and experience is professionally qualified and registered by the Board of Counseling to provide collaborative services to assist individuals in achieving sustained recovery from the effects of addiction or mental illness, or both. The bill requires that a registered peer recovery specialist provide such services as an employee or independent contractor of the Department of Behavioral Health and Developmental Services, a mental health service provider licensed by the Department of Behavioral Health and Developmental Services, a practitioner licensed by or holding a permit issued from the Department of Health Professions, or a facility licensed by the Department of Health. The bill

adds qualified mental health professionals and registered peer recovery specialists to the list of mental health providers that are required to take actions to protect third parties under certain circumstances and notify clients of their right to report to the Department of Health Professions any unethical, fraudulent, or unprofessional conduct. The bill directs the Board of Counseling and the Board of Behavioral Health and Developmental Services to promulgate regulations to implement the provisions of the bill within 280 days of its enactment.

SB 1062 Definition of mental health service provider.

Chief patron: Deeds

Summary as introduced:

Definition of mental health service provider. Adds physician assistant to the list of mental health service providers who have a duty to take precautions to protect third parties from violent behavior or other serious harm.

SB 1230 Opiate prescriptions; electronic prescriptions. (This is a Governor's bill – Same bill in House (HB2165))

Chief patron: Dunnavant

Summary as introduced:

Opiate prescriptions; electronic prescriptions. Requires a prescription for any controlled substance containing an opiate to be issued as an electronic prescription and prohibits a pharmacist from dispensing a controlled substance that contains an opiate unless the prescription is issued as an electronic prescription, beginning July 1, 2020. The bill defines electronic prescription as a written prescription that is generated on an electronic application in accordance with federal regulations and is transmitted to a pharmacy as an electronic data file. The bill requires the Secretary of Health and Human Resources to convene a work group to review actions necessary for the implementation of the bill's provisions and report on the work group's progress to the Chairmen of the House Committee on Health, Welfare and Institutions and the Senate Committee on Education and Health by November 1, 2017 and a final report to such Chairmen by November 1, 2018.

SB 1232 Limits on prescription of controlled substances containing opioids. (This is a Governor's bill – Same bill in House (HB1898))

Chief patron: Dunnavant

Summary as introduced:

Limits on prescription of controlled substances containing opioids. Prohibits a prescriber providing treatment for a patient in an emergency department of a corporation, facility, or institution licensed, owned, or operated by the Commonwealth to provide health care from prescribing a controlled substance containing an opioid in a quantity greater than a three-day supply, as determined in accordance with the prescriber's directions for use. The bill also prohibits a pharmacist from dispensing a controlled substance containing an opioid pursuant to a prescription issued by a prescriber providing treatment to a patient in the emergency department of a corporation, facility, or institution licensed, owned, or operated by the Commonwealth to provide health care unless the prescription complies with the requirements of the bill. The bill has an expiration date of July 1, 2020.

17101955D

SENATE BILL NO. 1020

Offered January 11, 2017

Prefiled January 4, 2017

A BILL to amend and reenact §§ 37.2-203, 37.2-304, 54.1-2400.1, 54.1-2400.6, 54.1-3500, 54.1-3505, and 54.1-3506.1 of the Code of Virginia, relating to registration of peer recovery specialists and qualified mental health professionals.

Patron—Barker

Referred to Committee on Education and Health

Be it enacted by the General Assembly of Virginia:

1. That §§ 37.2-203, 37.2-304, 54.1-2400.1, 54.1-2400.6, 54.1-3500, 54.1-3505, and 54.1-3506.1 of the Code of Virginia are amended and reenacted as follows:

§ 37.2-203. Powers and duties of Board.

The Board shall have the following powers and duties:

- 1. To develop and establish programmatic and fiscal policies governing the operation of state hospitals, training centers, community services boards, and behavioral health authorities;
- 2. To ensure the development of long-range programs and plans for mental health, developmental, and substance abuse services provided by the Department, community services boards, and behavioral health authorities;
- 3. To review and comment on all budgets and requests for appropriations for the Department prior to their submission to the Governor and on all applications for federal funds;
- 4. To monitor the activities of the Department and its effectiveness in implementing the policies of the Board;
- 5. To advise the Governor, Commissioner, and General Assembly on matters relating to mental health, developmental, and substance abuse services;
- 6. To adopt regulations that may be necessary to carry out the provisions of this title and other laws of the Commonwealth administered by the Commissioner or the Department;
- 7. To ensure the development of programs to educate citizens about and elicit public support for the activities of the Department, community services boards, and behavioral health authorities;
- 8. To ensure that the Department assumes the responsibility for providing for education and training of school-age individuals receiving services in state facilities, pursuant to § 37.2-312; and
- 9. To change the names of state facilities; and
- 10. To adopt regulations that establish the qualifications, education, and experience for registration of peer recovery specialists by the Board of Counseling.

Prior to the adoption, amendment, or repeal of any regulation regarding substance abuse services, the Board shall, in addition to the procedures set forth in the Administrative Process Act (§ 2.2-4000 et seq.), present the proposed regulation to the Substance Abuse Services Council, established pursuant to § 2.2-2696, at least 30 days prior to the Board's action for the Council's review and comment.

§ 37.2-304. Duties of Commissioner.

The Commissioner shall be the chief executive officer of the Department and shall have the following duties and powers:

- 1. To supervise and manage the Department and its state facilities.
- 2. To employ the personnel required to carry out the purposes of this title.
- 3. To make and enter into all contracts and agreements necessary or incidental to the performance of the Department's duties and the execution of its powers under this title, including contracts with the United States, other states, and agencies and governmental subdivisions of the Commonwealth, consistent with policies and regulations of the Board and applicable federal and state statutes and regulations.
- 4. To accept, hold, and enjoy gifts, donations, and bequests on behalf of the Department from the United States government, agencies and instrumentalities thereof, and any other source, subject to the approval of the Governor. To these ends, the Commissioner shall have the power to comply with conditions and execute agreements that may be necessary, convenient, or desirable, consistent with policies and regulations of the Board.
- 5. To accept, execute, and administer any trust in which the Department may have an interest, under the terms of the instruments creating the trust, subject to the approval of the Governor.
- 6. To transfer between state hospitals and training centers school-age individuals who have been identified as appropriate to be placed in public school programs and to negotiate with other school

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59 divisions for placements in order to ameliorate the impact on those school divisions located in a
60 jurisdiction in which a state hospital or training center is located.

61 7. To provide to the Director of the Commonwealth's designated protection and advocacy system,
62 established pursuant to § 51.5-39.13, a written report setting forth the known facts of critical incidents or
63 deaths of individuals receiving services in facilities within 15 working days of the critical incident or
64 death.

65 8. To work with the appropriate state and federal entities to ensure that any individual who has
66 received services in a state facility for more than one year has possession of or receives prior to
67 discharge any of the following documents, when they are needed to obtain the services contained in his
68 discharge plan: a Department of Motor Vehicles approved identification card that will expire 90 days
69 from issuance, a copy of his birth certificate if the individual was born in the Commonwealth, or a
70 social security card from the Social Security Administration. State facility directors, as part of their
71 responsibilities pursuant to § 37.2-837, shall implement this provision when discharging individuals.

72 9. To work with the Department of Veterans Services and the Department for Aging and
73 Rehabilitative Services to establish a program for mental health and rehabilitative services for Virginia
74 veterans and members of the Virginia National Guard and Virginia residents in the Armed Forces
75 Reserves not in active federal service and their family members pursuant to § 2.2-2001.1.

76 10. To establish and maintain a pharmaceutical and therapeutics committee composed of
77 representatives of the Department of Medical Assistance Services, state facilities operated by the
78 Department, community services boards, at least one health insurance plan, and at least one individual
79 receiving services to develop a drug formulary for use at all community services boards, state facilities
80 operated by the Department, and providers licensed by the Department.

81 ~~11. To certify individuals as peer providers in accordance with regulations adopted by the Board.~~

82 ~~12.~~ To establish and maintain the Commonwealth Mental Health First Aid Program pursuant to
83 § 37.2-312.2.

84 ~~13.~~ 12. To submit a report for the preceding fiscal year by December 1 of each year to the Governor
85 and the Chairmen of the House Appropriations and Senate Finances Committees that provides
86 information on the operation of Virginia's publicly funded behavioral health and developmental services
87 system. The report shall include a brief narrative and data on the number of individuals receiving state
88 facility services or community services board services, including purchased inpatient psychiatric services;
89 the types and amounts of services received by these individuals; and state facility and community
90 services board service capacities, staffing, revenues, and expenditures. The annual report shall describe
91 major new initiatives implemented during the past year and shall provide information on the
92 accomplishment of systemic outcome and performance measures during the year.

93 Unless specifically authorized by the Governor to accept or undertake activities for compensation, the
94 Commissioner shall devote his entire time to his duties.

95 **§ 54.1-2400.1. Mental health service providers; duty to protect third parties; immunity.**

96 A. As used in this section:

97 "Certified substance abuse counselor" means a person certified to provide substance abuse counseling
98 in a state-approved public or private substance abuse program or facility.

99 "Client" or "patient" means any person who is voluntarily or involuntarily receiving mental health
100 services or substance abuse services from any mental health service provider.

101 "Clinical psychologist" means a person who practices clinical psychology as defined in § 54.1-3600.

102 "Clinical social worker" means a person who practices social work as defined in § 54.1-3700.

103 "Licensed practical nurse" means a person licensed to practice practical nursing as defined in
104 § 54.1-3000.

105 "Licensed substance abuse treatment practitioner" means any person licensed to engage in the
106 practice of substance abuse treatment as defined in § 54.1-3500.

107 "Marriage and family therapist" means a person licensed to engage in the practice of marriage and
108 family therapy as defined in § 54.1-3500.

109 "Mental health professional" means a person who by education and experience is professionally
110 qualified and licensed in Virginia to provide counseling interventions designed to facilitate an
111 individual's achievement of human development goals and remediate mental, emotional, or behavioral
112 disorders and associated distresses which interfere with mental health and development.

113 "Mental health service provider" or "provider" refers to any of the following: (i) a person who
114 provides professional services as a certified substance abuse counselor, clinical psychologist, clinical
115 social worker, licensed substance abuse treatment practitioner, licensed practical nurse, marriage and
116 family therapist, mental health professional, physician, professional counselor, psychologist, *qualified*
117 *mental health professional*, registered nurse, *registered peer recovery specialist*, school psychologist, or
118 social worker; (ii) a professional corporation, all of whose shareholders or members are so licensed; or
119 (iii) a partnership, all of whose partners are so licensed.

120 "Professional counselor" means a person who practices counseling as defined in § 54.1-3500.

121 "Psychologist" means a person who practices psychology as defined in § 54.1-3600.

122 "*Qualified mental health professional*" means a person who by education and experience is
 123 professionally qualified and registered by the Board of Counseling to provide collaborative mental
 124 health services for adults or children. A qualified mental health professional shall provide such services
 125 as an employee or independent contractor of a mental health service provider licensed by the
 126 Department of Behavioral Health and Developmental Services.

127 "Registered nurse" means a person licensed to practice professional nursing as defined in
 128 § 54.1-3000.

129 "*Registered peer recovery specialist*" means a person who by education and experience is
 130 professionally qualified and registered by the Board of Counseling to provide collaborative services to
 131 assist individuals in achieving sustained recovery from the effects of addiction or mental illness, or both.
 132 A registered peer recovery specialist shall provide such services as an employee or independent
 133 contractor of the Department of Behavioral Health and Developmental Services, a mental health service
 134 provider licensed by the Department of Behavioral Health and Developmental Services, a practitioner
 135 licensed by or holding a permit issued from the Department of Health Professions, or a facility licensed
 136 by the Department of Health.

137 "School psychologist" means a person who practices school psychology as defined in § 54.1-3600.

138 "Social worker" means a person who practices social work as defined in § 54.1-3700.

139 B. A mental health service provider has a duty to take precautions to protect third parties from
 140 violent behavior or other serious harm only when the client has orally, in writing, or via sign language,
 141 communicated to the provider a specific and immediate threat to cause serious bodily injury or death to
 142 an identified or readily identifiable person or persons, if the provider reasonably believes, or should
 143 believe according to the standards of his profession, that the client has the intent and ability to carry out
 144 that threat immediately or imminently. If the third party is a child, in addition to taking precautions to
 145 protect the child from the behaviors in the above types of threats, the provider also has a duty to take
 146 precautions to protect the child if the client threatens to engage in behaviors that would constitute
 147 physical abuse or sexual abuse as defined in § 18.2-67.10. The duty to protect does not attach unless the
 148 threat has been communicated to the provider by the threatening client while the provider is engaged in
 149 his professional duties.

150 C. The duty set forth in subsection B is discharged by a mental health service provider who takes
 151 one or more of the following actions:

152 1. Seeks involuntary admission of the client under Article 16 (§ 16.1-335 et seq.) of Chapter 11 of
 153 Title 16.1 or Chapter 8 (§ 37.2-800 et seq.) of Title 37.2.

154 2. Makes reasonable attempts to warn the potential victims or the parent or guardian of the potential
 155 victim if the potential victim is under the age of 18.

156 3. Makes reasonable efforts to notify a law-enforcement official having jurisdiction in the client's or
 157 potential victim's place of residence or place of work, or place of work of the parent or guardian if the
 158 potential victim is under age 18, or both.

159 4. Takes steps reasonably available to the provider to prevent the client from using physical violence
 160 or other means of harm to others until the appropriate law-enforcement agency can be summoned and
 161 takes custody of the client.

162 5. Provides therapy or counseling to the client or patient in the session in which the threat has been
 163 communicated until the mental health service provider reasonably believes that the client no longer has
 164 the intent or the ability to carry out the threat.

165 6. *In the case of a registered peer recovery specialist, reports immediately to a licensed mental*
 166 *health service provider to take one or more of the actions set forth in this subsection.*

167 D. A mental health service provider shall not be held civilly liable to any person for:

168 1. Breaching confidentiality with the limited purpose of protecting third parties by communicating the
 169 threats described in subsection B made by his clients to potential third party victims or law-enforcement
 170 agencies or by taking any of the actions specified in subsection C.

171 2. Failing to predict, in the absence of a threat described in subsection B, that the client would cause
 172 the third party serious physical harm.

173 3. Failing to take precautions other than those enumerated in subsection C to protect a potential third
 174 party victim from the client's violent behavior.

175 **§ 54.1-2400.6. Hospitals, other health care institutions, home health and hospice organizations,**
 176 **and assisted living facilities required to report disciplinary actions against and certain disorders of**
 177 **health professionals; immunity from liability; failure to report.**

178 A. The chief executive officer and the chief of staff of every hospital or other health care institution
 179 in the Commonwealth, the director of every licensed home health or hospice organization, the director
 180 of every accredited home health organization exempt from licensure, ~~and~~ the administrator of every
 181 licensed assisted living facility, *and the administrator of every provider licensed by the Department of*

182 Behavioral Health and Developmental Services in the Commonwealth shall report within 30 days, except
183 as provided in subsection B, to the Director of the Department of Health Professions, or in the case of a
184 director of a home health or hospice organization, to the Office of Licensure and Certification at the
185 Department of Health (the Office), the following information regarding any person (i) licensed, certified,
186 or registered by a health regulatory board or (ii) holding a multistate licensure privilege to practice
187 nursing or an applicant for licensure, certification or registration unless exempted under subsection E:

188 1. Any information of which he may become aware in his official capacity indicating that such a
189 health professional is in need of treatment or has been committed or admitted as a patient, either at his
190 institution or any other health care institution, for treatment of substance abuse or a psychiatric illness
191 that may render the health professional a danger to himself, the public or his patients.

192 2. Any information of which he may become aware in his official capacity indicating, after
193 reasonable investigation and consultation as needed with the appropriate internal boards or committees
194 authorized to impose disciplinary action on a health professional, that there is a reasonable probability
195 that such health professional may have engaged in unethical, fraudulent or unprofessional conduct as
196 defined by the pertinent licensing statutes and regulations. The report required under this subdivision
197 shall be submitted within 30 days of the date that the chief executive officer, chief of staff, director, or
198 administrator determines that a reasonable probability exists.

199 3. Any disciplinary proceeding begun by the institution, organization, ~~or~~ facility, *or provider* as a
200 result of conduct involving (i) intentional or negligent conduct that causes or is likely to cause injury to
201 a patient or patients, (ii) professional ethics, (iii) professional incompetence, (iv) moral turpitude, or (v)
202 substance abuse. The report required under this subdivision shall be submitted within 30 days of the
203 date of written communication to the health professional notifying him of the initiation of a disciplinary
204 proceeding.

205 4. Any disciplinary action taken during or at the conclusion of disciplinary proceedings or while
206 under investigation, including but not limited to denial or termination of employment, denial or
207 termination of privileges or restriction of privileges that results from conduct involving (i) intentional or
208 negligent conduct that causes or is likely to cause injury to a patient or patients, (ii) professional ethics,
209 (iii) professional incompetence, (iv) moral turpitude, or (v) substance abuse. The report required under
210 this subdivision shall be submitted within 30 days of the date of written communication to the health
211 professional notifying him of any disciplinary action.

212 5. The voluntary resignation from the staff of the health care institution, home health or hospice
213 organization, ~~or~~ assisted living facility, *or provider*, or voluntary restriction or expiration of privileges at
214 the institution, organization, ~~or~~ facility, *or provider*, of any health professional while such health
215 professional is under investigation or is the subject of disciplinary proceedings taken or begun by the
216 institution, organization, ~~or~~ facility, *or provider* or a committee thereof for any reason related to possible
217 intentional or negligent conduct that causes or is likely to cause injury to a patient or patients, medical
218 incompetence, unprofessional conduct, moral turpitude, mental or physical impairment, or substance
219 abuse.

220 Any report required by this section shall be in writing directed to the Director of the Department of
221 Health Professions or to the Director of the Office of Licensure and Certification at the Department of
222 Health, shall give the name and address of the person who is the subject of the report and shall fully
223 describe the circumstances surrounding the facts required to be reported. The report shall include the
224 names and contact information of individuals with knowledge about the facts required to be reported and
225 the names and contact information of individuals from whom the hospital or health care institution,
226 organization, ~~or~~ facility, *or provider* sought information to substantiate the facts required to be reported.
227 All relevant medical records shall be attached to the report if patient care or the health professional's
228 health status is at issue. The reporting hospital, health care institution, home health or hospice
229 organization, ~~or~~ assisted living facility, *or provider* shall also provide notice to the Department or the
230 Office that it has submitted a report to the National Practitioner Data Bank under the Health Care
231 Quality Improvement Act (42 U.S.C. § 11101 et seq.). The reporting hospital, health care institution,
232 home health or hospice organization, ~~or~~ assisted living facility, *or provider* shall give the health
233 professional who is the subject of the report an opportunity to review the report. The health professional
234 may submit a separate report if he disagrees with the substance of the report.

235 This section shall not be construed to require the hospital, health care institution, home health or
236 hospice organization, ~~or~~ assisted living facility, *or provider* to submit any proceedings, minutes, records,
237 or reports that are privileged under § 8.01-581.17, except that the provisions of § 8.01-581.17 shall not
238 bar (i) any report required by this section or (ii) any requested medical records that are necessary to
239 investigate unprofessional conduct reported pursuant to this subtitle or unprofessional conduct that
240 should have been reported pursuant to this subtitle. Under no circumstances shall compliance with this
241 section be construed to waive or limit the privilege provided in § 8.01-581.17. No person or entity shall
242 be obligated to report any matter to the Department or the Office if the person or entity has actual
243 notice that the same matter has already been reported to the Department or the Office.

244 B. Any report required by this section concerning the commitment or admission of such health
 245 professional as a patient shall be made within five days of when the chief executive officer, chief of
 246 staff, director, or administrator learns of such commitment or admission.

247 C. The State Health Commissioner ~~or the~~ Commissioner of the Department of Social Services, and
 248 Commissioner of Behavioral Health and Developmental Services shall report to the Department any
 249 information of which their agencies may become aware in the course of their duties that a health
 250 professional may be guilty of fraudulent, unethical, or unprofessional conduct as defined by the pertinent
 251 licensing statutes and regulations. However, the State Health Commissioner shall not be required to
 252 report information reported to the Director of the Office of Licensure and Certification pursuant to this
 253 section to the Department of Health Professions.

254 D. Any person making a report by this section, providing information pursuant to an investigation or
 255 testifying in a judicial or administrative proceeding as a result of such report shall be immune from any
 256 civil liability alleged to have resulted therefrom unless such person acted in bad faith or with malicious
 257 intent.

258 E. Medical records or information learned or maintained in connection with an alcohol or drug
 259 prevention function that is conducted, regulated, or directly or indirectly assisted by any department or
 260 agency of the United States shall be exempt from the reporting requirements of this section to the extent
 261 that such reporting is in violation of 42 U.S.C. § 290dd-2 or regulations adopted thereunder.

262 F. Any person who fails to make a report to the Department as required by this section shall be
 263 subject to a civil penalty not to exceed \$25,000 assessed by the Director. The Director shall report the
 264 assessment of such civil penalty to the Commissioner of Health ~~or the~~ Commissioner of Social Services,
 265 or Commissioner of Behavioral Health and Developmental Services, as appropriate. Any person assessed
 266 a civil penalty pursuant to this section shall not receive a license or certification or renewal of such
 267 unless such penalty has been paid pursuant to § 32.1-125.01. The Medical College of Virginia Hospitals
 268 and the University of Virginia Hospitals shall not receive certification pursuant to § 32.1-137 or Article
 269 1.1 (§ 32.1-102.1 et seq.) of Chapter 4 of Title 32.1 unless such penalty has been paid.

270 **§ 54.1-3500. Definitions.**

271 As used in this chapter, unless the context requires a different meaning:

272 "Appraisal activities" means the exercise of professional judgment based on observations and
 273 objective assessments of a client's behavior to evaluate current functioning, diagnose, and select
 274 appropriate treatment required to remediate identified problems or to make appropriate referrals.

275 "Board" means the Board of Counseling.

276 "Certified substance abuse counseling assistant" means a person certified by the Board to practice in
 277 accordance with the provisions of § 54.1-3507.2.

278 "Certified substance abuse counselor" means a person certified by the Board to practice in
 279 accordance with the provisions of § 54.1-3507.1.

280 "Counseling" means the application of principles, standards, and methods of the counseling
 281 profession in (i) conducting assessments and diagnoses for the purpose of establishing treatment goals
 282 and objectives and (ii) planning, implementing, and evaluating treatment plans using treatment
 283 interventions to facilitate human development and to identify and remediate mental, emotional, or
 284 behavioral disorders and associated distresses that interfere with mental health.

285 "Licensed substance abuse treatment practitioner" means a person who: (i) is trained in and engages
 286 in the practice of substance abuse treatment with individuals or groups of individuals suffering from the
 287 effects of substance abuse or dependence, and in the prevention of substance abuse or dependence; and
 288 (ii) is licensed to provide advanced substance abuse treatment and independent, direct, and unsupervised
 289 treatment to such individuals or groups of individuals, and to plan, evaluate, supervise, and direct
 290 substance abuse treatment provided by others.

291 "Marriage and family therapist" means a person trained in the assessment and treatment of cognitive,
 292 affective, or behavioral mental and emotional disorders within the context of marriage and family
 293 systems through the application of therapeutic and family systems theories and techniques.

294 "Marriage and family therapy" means the assessment and treatment of cognitive, affective, or
 295 behavioral mental and emotional disorders within the context of marriage and family systems through
 296 the application of therapeutic and family systems theories and techniques and delivery of services to
 297 individuals, couples, and families, singularly or in groups, for the purpose of treating such disorders.

298 "Practice of counseling" means rendering or offering to render to individuals, groups, organizations,
 299 or the general public any service involving the application of principles, standards, and methods of the
 300 counseling profession, which shall include appraisal, counseling, and referral activities.

301 "Practice of marriage and family therapy" means the assessment and treatment of cognitive, affective,
 302 or behavioral mental and emotional disorders within the context of marriage and family systems through
 303 the application of therapeutic and family systems theories and techniques, which shall include
 304 assessment, treatment, and referral activities.

305 "Practice of substance abuse treatment" means rendering or offering to render substance abuse
 306 treatment to individuals, groups, organizations, or the general public.

307 "Professional counselor" means a person trained in the application of principles, standards, and
 308 methods of the counseling profession, including counseling interventions designed to facilitate an
 309 individual's achievement of human development goals and remediating mental, emotional, or behavioral
 310 disorders and associated distresses that interfere with mental health and development.

311 "*Qualified mental health professional*" means a person who by education and experience is
 312 professionally qualified and registered by the Board to provide collaborative mental health services for
 313 adults or children. A qualified mental health professional shall provide such services as an employee or
 314 independent contractor of a mental health service provider, as defined in § 54.1-2400.1, licensed by the
 315 Department of Behavioral Health and Developmental Services.

316 "Referral activities" means the evaluation of data to identify problems and to determine advisability
 317 of referral to other specialists.

318 "*Registered peer recovery specialist*" means a person who by education and experience is
 319 professionally qualified and registered by the Board to provide collaborative services to assist
 320 individuals in achieving sustained recovery from the effects of addiction or mental illness, or both. A
 321 registered peer recovery specialist shall provide such services as an employee or independent contractor
 322 of the Department of Behavioral Health and Developmental Services, a mental health service provider,
 323 as defined in § 54.1-2400.1, licensed by the Department of Behavioral Health and Developmental
 324 Services, a practitioner licensed by or holding a permit issued from the Department of Health
 325 Professions, or a facility licensed by the Department of Health.

326 "Residency" means a post-internship supervised clinical experience registered with the Board.

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

329 "Substance abuse" and "substance dependence" mean a maladaptive pattern of substance use leading
 330 to clinically significant impairment or distress.

331 "Substance abuse treatment" means (i) the application of specific knowledge, skills, substance abuse
 332 treatment theory, and substance abuse treatment techniques to define goals and develop a treatment plan
 333 of action regarding substance abuse or dependence prevention, education, or treatment in the substance
 334 abuse or dependence recovery process and (ii) referrals to medical, social services, psychological,
 335 psychiatric, or legal resources when such referrals are indicated.

336 "Supervision" means the ongoing process, performed by a supervisor, of monitoring the performance
 337 of the person supervised and providing regular, documented individual or group consultation, guidance,
 338 and instruction with respect to the clinical skills and competencies of the person supervised.

339 **§ 54.1-3505. Specific powers and duties of the Board.**

340 In addition to the powers granted in § 54.1-2400, the Board shall have the following specific powers
 341 and duties:

342 1. To cooperate with and maintain a close liaison with other professional boards and the community
 343 to ensure that regulatory systems stay abreast of community and professional needs.

344 2. To conduct inspections to ensure that licensees conduct their practices in a competent manner and
 345 in conformance with the relevant regulations.

346 3. To designate specialties within the profession.

347 4. To administer the certification of rehabilitation providers pursuant to Article 2 (§ 54.1-3510 et
 348 seq.) of this chapter, including prescribing fees for application processing, examinations, certification and
 349 certification renewal.

350 5. [Expired.]

351 6. To promulgate regulations for the qualifications, education, and experience for licensure of
 352 marriage and family therapists. The requirements for clinical membership in the American Association
 353 for Marriage and Family Therapy (AAMFT), and the professional examination service's national
 354 marriage and family therapy examination may be considered by the Board in the promulgation of these
 355 regulations. The educational credit hour, clinical experience hour, and clinical supervision hour
 356 requirements for marriage and family therapists shall not be less than the educational credit hour,
 357 clinical experience hour, and clinical supervision hour requirements for professional counselors.

358 7. To promulgate, subject to the requirements of Article 1.1 (§ 54.1-3507 et seq.) of this chapter,
 359 regulations for the qualifications, education, and experience for licensure of licensed substance abuse
 360 treatment practitioners and certification of certified substance abuse counselors and certified substance
 361 abuse counseling assistants. The requirements for membership in NAADAC: the Association for
 362 Addiction Professionals and its national examination may be considered by the Board in the
 363 promulgation of these regulations. The Board also may provide for the consideration and use of the
 364 accreditation and examination services offered by the Substance Abuse Certification Alliance of Virginia.
 365 The educational credit hour, clinical experience hour, and clinical supervision hour requirements for
 366 licensed substance abuse treatment practitioners shall not be less than the educational credit hour,

367 clinical experience hour, and clinical supervision hour requirements for licensed professional counselors.
368 Such regulations also shall establish standards and protocols for the clinical supervision of certified
369 substance abuse counselors and the supervision or direction of certified substance abuse counseling
370 assistants, and reasonable access to the persons providing that supervision or direction in settings other
371 than a licensed facility.

372 8. To maintain a registry of persons who meet the requirements for supervision of residents. The
373 Board shall make the registry of approved supervisors available to persons seeking residence status.

374 9. *To promulgate regulations for the registration of qualified mental health professionals, including*
375 *qualifications, education, and experience necessary for such registration.*

376 10. *To promulgate regulations for the registration of peer recovery specialists who meet the*
377 *qualifications, education, and experience requirements established by regulations of the Board of*
378 *Behavioral Health and Developmental Services pursuant to § 37.2-203.*

379 **§ 54.1-3506.1. Client notification.**

380 Any person licensed, *certified, or registered* by the Board and operating in a nonhospital setting shall
381 post a copy of his license, *certification, or registration* in a conspicuous place. The posting shall also
382 provide clients with (i) the number of the toll-free complaint line at the Department of Health
383 Professions, (ii) the website address of the Department for the purposes of accessing the licensee's,
384 *certificate holder's, or registrant's* record, and (iii) notice of the client's right to report to the Department
385 if he believes the licensee, *certificate holder, or registrant* may have engaged in unethical, fraudulent, or
386 unprofessional conduct. *If the licensee, certificate holder, or registrant does not operate in a central*
387 *location at which clients visit, he shall provide such information on a disclosure form signed by the*
388 *client and maintained in the client's record.*

389 **2. That the Board of Behavioral Health and Developmental Services and the Board of Counseling**
390 **shall promulgate regulations to implement the provisions of this act to be effective within 280 days**
391 **of its enactment.**