



Board of Behavioral Sciences

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MEETING NOTICE

Out of State Education Review Committee April 26, 2013

Department of Consumer Affairs
El Dorado Room
1625 North Market Blvd., #N220
Sacramento, CA 95834

10:00 a.m.

- I. Introductions*
- II. Purpose of the Committee
- III. Review of the Changes to the Required Curriculum to Become a Licensed Marriage and Family Therapist Implemented Through Senate Bill 33 (Chapter 26, Statutes of 2009)
- IV. Discussion Regarding the Current Requirements For Out-of-State Licensed Marriage and Family Therapist Applicants before and after January 1, 2014
- V. Discussion Regarding the Current Requirements For Out-of-State Licensed Professional Clinical Counselor Applicants before and after January 1, 2014
- VI. Discussion Regarding the Educational Requirements for Licensed Marriage and Family Therapist Applicants in California and in Other States
- VII. Discussion Regarding the Educational Requirements for Licensed Professional Clinical Counselor Applicants in California and in Other States
- VIII. Future Meeting Dates
- IX. Public Comment for Items Not on the Agenda
- X. Suggestions for Future Agenda Items
- XI. Adjournment

**Introductions are voluntary for members of the public.*

Public Comment on items of discussion will be taken during each item. Time limitations will be determined by the Chairperson. Items will be considered in the order listed. Times are approximate and subject to change. Action may be taken on any item listed on the Agenda. This agenda as well as board meeting minutes can be found on the Board of Behavioral Sciences' website at www.bbs.ca.gov.

NOTICE: The meeting is accessible to persons with disabilities. A person who needs a disability-related accommodation or modification in order to participate in the meeting may make a request by contacting Christina Kitamura at (916) 574-7835 or by sending a written request to Board of Behavioral Sciences, 1625 N. Market Blvd., Suite S-200, Sacramento, CA 95834. Providing your request at least five (5) business days before the meeting will help ensure availability of the requested accommodation.



Governor
Edmund G. Brown Jr.
State of California
State and Consumer
Services Agency
Department of
Consumer Affairs

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Out of State Education Review Committee

A change in law effective January 1, 2014, revises the options for out-of-state applicants to remediate educational deficiencies. These applicants may incur several thousands of dollars to satisfy educational requirements in California. Therefore, otherwise qualified mental health providers may be discouraged from applying for licensure in California due to the significant cost.

The Out of State Education Review Committee was established to consider the potential barrier to licensure out-of-state applicants may face after January 1, 2014. Through a series of meetings the committee and stakeholders will discuss and consider the following topics.

- Current educational requirements
- Educational requirements after January 1, 2014
- Current options to remediate educational deficiencies and potential cost
- Options to remediate educational deficiencies and potential cost

It is anticipated the committee's work will conclude late 2013.

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To: Committee Members

Date: April 23, 2013

From: Kim Madsen
Executive Officer

Telephone: (916) 574-7841

Subject: **Senate Bill 33 Review**

Senate Bill 33 (Chapter 26, Statutes of 2009) became law on January 1, 2010. This bill made a number of changes to the required curriculum to become licensed as a Licensed Marriage and Family Therapist (LMFT) for persons who began graduate study on or after August 1, 2012.

Senate Bill 33 was the result of an extensive committee process and public discussion by the Board and its stakeholders. The intent of this bill was to provide schools more flexibility in curriculum requirements and allow for the integration of the culture and norms of public mental health work and the principles of the Mental Health Services Act.

To accomplish this intent, the bill made the following revisions:

- The degree's total unit requirements was increased from 48 semester units/72 quarter hour to 60 semester units/90 quarter units;
- The number of contact hours or semester units required for specific courses in the Board's laws was eliminated;
- Addition of instruction related to practice in a public mental health environment;
- Required the degree program to include instruction in seven topics (refer to attachment);
- Required the principles of the Mental Health Services Act and the culture and norms of public mental health work to be infused throughout the curriculum;
- Revised the practicum requirements.

Requiring completion of a specific number of units or hours for a required course was a significant change from the way schools had previously designed LMFT degree programs. Therefore, the Board assisted California schools to ensure the required educational content was interwoven throughout the curriculum

The challenge that out-of-state applicants would encounter as they applied to California for LMFT licensure under the new curriculum requirements was discussed during the committee

process. Yet, at that time, the prevailing thought was that schools would develop courses specific to out-of-state applicants. This solution was acceptable since at that time California public colleges and universities were not under the current budgetary constraints they now operate under. Unfortunately, the expected availability of coursework specific to out-of-state applicants has not materialized.

Attached is a summary of the changes Senate Bill 33 made to the educational requirements for LMFTs which includes a list of the changes applicable to out of state requirements.

Summary of Changes to MFT Licensing Requirements (SB 33, 2009)

For persons who begin graduate study on or after August 1, 2012:

- Increases the degree's total unit requirement from 48 to 60 semester units (72 to 90 quarter units).
- Provides more flexibility in the curriculum requirements, such as fewer requirements for specific hours or units for particular coursework, to allow for innovation in curriculum design.
- Changes to practicum including:
 - An additional 75 client contact hours, which may include client centered advocacy
 - Training in the applied use of theory, working with families, documentation skills, and how to find and use resources.
 - Student must be enrolled in a practicum course while seeing clients.
- Requires certain coursework, such as California law and ethics and child abuse assessment and reporting, which are currently required prior to licensure (and may be taken outside of the degree program) to instead be completed prior to registration as an intern and within the degree program.
- Infuses the culture and norms of public mental health work and principles of the Mental Health Services Act throughout the curriculum, including the following:
 - Recovery oriented care and related methods of service delivery
 - Providing opportunities to meet with consumers and family members
 - Greater emphasis on culture throughout the degree program
 - Greater understanding of the impact of socioeconomic position
- Adds instruction in areas needed for practice in a public mental health environment which may be provided in credit level coursework or through extension programs, including the following:
 - Case management
 - Working with the severely mentally ill
 - Collaborative treatment
 - Disaster and trauma response
- Degree program content to include instruction in:
 - Evidence based and best practices
 - End-of-life and grief
 - Co-occurring mental health and substance use disorders
 - Behavioral addiction
 - Psychosexual dysfunction
 - Differences in legal and ethical standards for different types of work settings
 - Licensing law and licensing process
- Changes the requirements for persons who earned a degree outside of California effective January 1, 2014, including accepting education as substantially equivalent when all of the following are true:
 - 1) The applicant's degree meets the following minimum requirements:
 - a) 48 semester units (72 quarter units) overall total
 - b) 6 semester units (9 quarter units) practicum
 - c) 150 practicum hours of face-to-face counseling
 - d) 12 semester units (18 quarter units) in MFT content
 - 2) The applicant remediates any deficiencies in content or units
 - 3) The applicant completes credit level coursework in the following areas:

- a) Recovery oriented care
- b) California cultures
- c) Social and psychological implications of socioeconomic position
- d) Meeting with consumers and family members
- e) Behavioral addiction
- f) Co-occurring mental health and substance abuse disorders
- g) California law and ethics

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To: Committee Members

Date: April 23, 2013

From: Kim Madsen
Executive Officer

Telephone: (916) 574-7841

**Subject: Requirements for Out of State Licensed Marriage and Family Therapists
Before and After January 1, 2014**

LMFT Out-of-State Applicants Before January 1, 2014

The Board may accept an out-of-state LMFT's education if the education is substantially equivalent to California's LMFT educational requirements. Business and Profession Code section 4980.80 requires the applicant to complete specific coursework and states either an hour or unit requirement for the coursework. This specificity provides clarity as to what the out-of-state LMFT applicant must complete to become licensed in California. Additionally, the out-of-state LMFT applicant has the flexibility to obtain the missing coursework either through a continuing education provider or an educational institution.

LMFT Out-of-State Applicants After January 1, 2014

Effective January 1, 2014, an out-of-state LMFT's education is deemed substantially equivalent if the requirements in Business and Professions Code section 4980.78 are satisfied. This section of law identifies the coursework required but does not specify an hour or unit requirement. Although California Law and Ethics is identified, the remaining coursework is specific to California cultures and MHSA competencies.

Further, the law requires the out-of-state applicant to complete the coursework from a degree granting institution. The option for an out-of-state LMFT applicants to complete coursework through a continuing education provider is eliminated.

Discussion

The change in law raises concerns that requiring an out-of-state LMFT applicant to complete deficient coursework at a graduate level may pose a barrier to licensure. California public colleges and universities face increasing enrollment and strict budgetary constraints. Thus, the availability of graduate level coursework for out-of-state students seeking to complete a few courses is non-existent. Without this option, out-of-state LMFT applicant's only alternative

would be to complete the coursework from private universities and colleges. The cost associated with obtaining the required coursework is significant; costing the individual several thousand dollars and consequently, a potential barrier to licensure in California.

Comparison of Requirements for Out-of-State LMFT Applicants before and after January 1, 2014.

Coursework Required	Prior to 1/1/14	Method of completion	After 1/1/14	Method of completion
CA Law and Ethics	18 hour course *	Either course or CE class	18 hour course^	
CA Law and Ethics	2 semester or 3 quarter unit course	Enroll and complete course		
Child Abuse Assessment & Reporting	7 contact hours of training or coursework	Either course or CE class	Hours or units not specified	Complete graduate level course
Human Sexuality +	10 contact hours of training, or coursework	Either course or CE class	Hours or units not specified	Complete graduate level course
Alcoholism/Substance Abuse +	15 contact hours of training, or coursework	Either course or CE class	Hours or units not specified	Complete graduate level course
Spousal Abuse +	15 contact hours of training, or coursework	Either course or CE class	Hours or units not specified	Complete graduate level course
Psychological Testing +	2 semester or 3 quarter unit course	Enroll and complete course	Hours or units not specified	Complete graduate level course
Psychopharmacology +	2 semester or 3 quarter unit course	Enroll and complete course	Hours or units not specified	Complete graduate level course
MHSA Competencies	Not required prior to SB 33		Hours or units not specified	Complete graduate level course
California Cultures, social & psychological implications of socioeconomic position	Not required prior to SB 33		Hours or units not specified	Complete graduate level course

* Applicant previously completed a two semesters or three quarter unit course but the course does not meet the requirements in B&P 4980.41.

** Applicant has not completed a two semester or three quarter unit course

+ Out of state training or coursework is acceptable

^ Law and ethics required whether or not applicant has completed a previous law and ethics course

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LAW FOR OUT-OF-STATE LMFT APPLICANTS

CURRENT REQUIREMENTS FOR OUT-OF STATE LMFT APPLICANTS

§4980.80. RECIPROCITY; EQUIVALENT REQUIREMENTS; PAYMENT OF FEES; FURTHER CONDITIONS; INOPERATIVE JANUARY 1, 2014

(a) This section applies to persons who apply for licensure between January 1, 2010, and December 31, 2013, inclusive.

(b) The board may issue a license to a person who, at the time of application, holds a valid license issued by a board of marriage counselor examiners, marriage therapist examiners, or corresponding authority of any state, if all of the following requirements are satisfied:

(1) The person has held that license for at least two years immediately preceding the date of application.

(2) The education and supervised experience requirements are substantially the equivalent of this chapter.

(3) The person complies with Section 4980.76, if applicable.

(4) The person successfully completes the board administered licensing examinations as specified by subdivision (d) of Section 4980.40 and pays the fees specified.

(5) The person completes all of the following coursework or training:

(A) (i) An applicant who completed a two semester or three quarter unit course in law and professional ethics for marriage and family therapists that does not meet the requirements of Section 4980.41 as part of his or her qualifying degree shall complete an 18-hour course in California law and professional ethics that includes, but is not limited to, the following subjects: advertising, scope of practice, scope of competence, treatment of minors, confidentiality, dangerous patients, psychotherapist-patient privilege, recordkeeping, patient access to records, state and federal laws relating to the confidentiality of patient health information, dual relationships, child abuse, elder and dependent adult abuse, online therapy, insurance reimbursement, civil liability, disciplinary actions and unprofessional conduct, ethics complaints and ethical standards, termination of therapy, standards of care, relevant family law, and therapist disclosures to patients.

(ii) An applicant who has not completed a two semester or three quarter unit course in law and professional ethics for marriage and family therapists that included areas of study as specified in Section 4980.41 as part of his or her qualifying degree, shall complete a two semester or three

quarter unit course in California law and professional ethics that includes, at minimum, the areas of study specified in Section 4980.41.

(B) A minimum of seven contact hours of training or coursework in child abuse assessment and reporting as specified in Section 28 and any regulations promulgated thereunder.

(C) A minimum of 10 contact hours of training or coursework in human sexuality as specified in Section 25 and any regulations promulgated thereunder.

(D) A minimum of 15 contact hours of training or coursework in alcoholism and other chemical substance dependency as specified by regulation.

(E) (i) Instruction in spousal or partner abuse assessment, detection, and intervention. This instruction may be taken either in fulfillment of other requirements for licensure or in a separate course.

(ii) A minimum of 15 contact hours of coursework or training in spousal or partner abuse assessment, detection, and intervention strategies.

(F) A minimum of a two semester or three quarter unit survey course in psychological testing. This course may be taken either in fulfillment of other requirements for licensure or in a separate course.

(G) A minimum of a two semester or three quarter unit survey course in psychopharmacology. This course may be taken either in fulfillment of other requirements for licensure or in a separate course.

(H) With respect to human sexuality, alcoholism and other chemical substance dependency, spousal or partner abuse assessment, detection, and intervention, psychological testing, and psychopharmacology, the board may accept training or coursework acquired out of state.

(c) This section shall remain in effect only until January 1, 2014, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2014, deletes or extends that date.

§4980.90. ACCEPTANCE OF EDUCATION AND EXPERIENCE GAINED WHILE RESIDING OUTSIDE OF CALIFORNIA; INOPERATIVE JANUARY 1, 2014

(a) This section applies to persons who apply for licensure between January 1, 2010, and December 31, 2013, inclusive.

(b) Experience gained outside of California shall be accepted toward the licensure requirements if it is substantially equivalent to that required by this chapter, if the applicant complies with Section 4980.76. if applicable, and if the applicant has gained a minimum of 250 hours of supervised experience in direct counseling within California while registered as an intern with the

board. The board shall consider hours of experience obtained in another state during the six-year period immediately preceding the applicant's initial licensure by that state as a marriage and family therapist.

(c) Education gained while residing outside of California shall be accepted toward the licensure requirements if it is substantially equivalent to the education requirements of this chapter, and if the applicant has completed all of the following:

(1) A two semester or three quarter unit course in California law and professional ethics for marriage, family, and child counselors that shall include areas of study as specified in Section 4980.41.

(2) A minimum of seven contact hours of training or coursework in child abuse assessment and reporting as specified in Section 28 and any regulations promulgated thereunder.

(3) A minimum of 10 contact hours of training or coursework in sexuality as specified in Section 25 and any regulations promulgated thereunder.

(4) A minimum of 15 contact hours of training or coursework in alcoholism and other chemical substance dependency as specified by regulation.

(5) (A) Instruction in spousal or partner abuse assessment, detection, and intervention. This instruction may be taken either in fulfillment of other educational requirements for licensure or in a separate course.

(B) A minimum of 15 contact hours of coursework or training in spousal or partner abuse assessment, detection, and intervention strategies.

(6) A minimum of a two semester or three quarter unit survey course in psychological testing. This course may be taken either in fulfillment of other requirements for licensure or in a separate course.

(7) A minimum of a two semester or three quarter unit survey course in psychopharmacology. This course may be taken either in fulfillment of other requirements for licensure or in a separate course.

(8) With respect to human sexuality, alcoholism and other chemical substance dependency, spousal or partner abuse assessment, detection, and intervention, psychological testing, and psychopharmacology, the board may accept training or coursework acquired out of state.

(d) For purposes of this section, the board may, in its discretion, accept education as substantially equivalent if the applicant meets both of the following requirements:

(1) The applicant has been granted a degree in a single integrated program primarily designed to train marriage and family therapists.

(2) The applicant's education meets the requirements of Sections 4980.37. The degree title need not be identical to those required by subdivision (b) of Section 4980.37. If the applicant's degree does not contain the content or overall units required by Section 4980.37, the board may, in its discretion, accept the applicant's education as substantially equivalent if the following criteria are satisfied:

(A) The applicant's degree contains the required number of practicum units and coursework required in the areas of marriage, family, and child counseling and marital and family systems approaches to treatment as specified in Section 4980.37.

(B) The applicant remediates his or her specific deficiency by completing the course content and the units required by Section 4980.37.

(C) The applicant's degree otherwise complies with this section.

(e) This section shall remain in effect only until January 1, 2014, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2014, deletes or extends that date.

**§4980.37. QUALIFYING DEGREE PROGRAM FOR LICENSURE OR REGISTRATION;
BEGINNING GRADUATE STUDY BEFORE AUGUST 1, 2012 AND COMPLETING
GRADUATE STUDY BEFORE DECEMBER 31, 2018**

(a) This section shall apply to applicants for licensure or registration who begin graduate study before August 1, 2012, and complete that study on or before December 31, 2018. Those applicants may alternatively qualify under paragraph (2) of subdivision (a) of Section 4980.36.

(b) To qualify for a license or registration, applicants shall possess a doctor's or master's degree in marriage, family, and child counseling, marriage and family therapy, couple and family therapy, psychology, clinical psychology, counseling psychology, or counseling with an emphasis in either marriage, family, and child counseling or marriage and family therapy, obtained from a school, college, or university accredited by a regional accrediting agency recognized by the United States Department of Education or approved by the Bureau for Private Postsecondary Education. The board has the authority to make the final determination as to whether a degree meets all requirements, including, but not limited to, course requirements, regardless of accreditation or approval. In order to qualify for licensure pursuant to this section, a doctor's or master's degree program shall be a single, integrated program primarily designed to train marriage and family therapists and shall contain no less than 48 semester or 72 quarter units of instruction. This instruction shall include no less than 12 semester units or 18 quarter units of coursework in the areas of marriage, family, and child counseling, and marital and family systems approaches to treatment. The coursework shall include all of the following areas:

(1) The salient theories of a variety of psychotherapeutic orientations directly related to marriage and family therapy, and marital and family systems approaches to treatment.

(2) Theories of marriage and family therapy and how they can be utilized in order to intervene therapeutically with couples, families, adults, children, and groups.

(3) Developmental issues and life events from infancy to old age and their effect on individuals, couples, and family relationships. This may include coursework that focuses on specific family life events and the psychological, psychotherapeutic, and health implications that arise within couples and families, including, but not limited to, childbirth, child rearing, childhood, adolescence, adulthood, marriage, divorce, blended families, stepparenting, abuse and neglect of older and dependent adults, and geropsychology.

(4) A variety of approaches to the treatment of children. The board shall, by regulation, set forth the subjects of instruction required in this subdivision.

(c) (1) In addition to the 12 semester or 18 quarter units of coursework specified in subdivision (b), the doctor's or master's degree program shall contain not less than six semester or nine quarter units of supervised practicum in applied psychotherapeutic technique, assessments, diagnosis, prognosis, and treatment of premarital, couple, family, and child relationships, including dysfunctions, healthy functioning, health promotion, and illness prevention, in a supervised clinical placement that provides supervised fieldwork experience within the scope of practice of a marriage and family therapist.

(2) For applicants who enrolled in a degree program on or after January 1, 1995, the practicum shall include a minimum of 150 hours of face-to-face experience counseling individuals, couples, families, or groups.

(3) The practicum hours shall be considered as part of the 48 semester or 72 quarter unit requirement.

(d) As an alternative to meeting the qualifications specified in subdivision (b), the board shall accept as equivalent degrees those master's or doctor's degrees granted by educational institutions whose degree program is approved by the Commission on Accreditation for Marriage and Family Therapy Education.

(e) In order to provide an integrated course of study and appropriate professional training, while allowing for innovation and individuality in the education of marriage and family therapists, a degree program that meets the educational qualifications for licensure or registration under this section shall do all of the following:

(1) Provide an integrated course of study that trains students generally in the diagnosis, assessment, prognosis, and treatment of mental disorders.

(2) Prepare students to be familiar with the broad range of matters that may arise within marriage and family relationships.

(3) Train students specifically in the application of marriage and family relationship counseling principles and methods.

(4) Encourage students to develop those personal qualities that are intimately related to the counseling situation such as integrity, sensitivity, flexibility, insight, compassion, and personal presence.

(5) Teach students a variety of effective psychotherapeutic techniques and modalities that may be utilized to improve, restore, or maintain healthy individual, couple, and family relationships.

(6) Permit an emphasis or specialization that may address any one or more of the unique and complex array of human problems, symptoms, and needs of Californians served by marriage and family therapists.

(7) Prepare students to be familiar with cross-cultural mores and values, including a familiarity with the wide range of racial and ethnic backgrounds common among California's population, including, but not limited to, Blacks, Hispanics, Asians, and Native Americans.

(f) Educational institutions are encouraged to design the practicum required by this section to include marriage and family therapy experience in low-income and multicultural mental health settings.

(g) This section shall remain in effect only until January 1, 2019, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2019, deletes or extends that date.

§4980.41. ELIGIBILITY TO SIT FOR LICENSING EXAMINATIONS; COURSEWORK OR TRAINING; INOPERATIVE JANUARY 1, 2019

(a) An applicant for licensure whose education qualifies him or her under Section 4980.37 shall complete the following coursework or training in order to be eligible to sit for the licensing examinations as specified in subdivision (d) of Section 4980.40:

(1) A two semester or three quarter unit course in California law and professional ethics for marriage and family therapists, which shall include, but not be limited to, the following areas of study:

(A) Contemporary professional ethics and statutory, regulatory, and decisional laws that delineate the profession's scope of practice.

(B) The therapeutic, clinical, and practical considerations involved in the legal and ethical practice of marriage and family therapy, including family law.

(C) The current legal patterns and trends in the mental health profession.

(D) The psychotherapist/patient privilege, confidentiality, the patient dangerous to self or others, and the treatment of minors with and without parental consent.

(E) A recognition and exploration of the relationship between a practitioner's sense of self and human values and his or her professional behavior and ethics.

This course may be considered as part of the 48 semester or 72 quarter unit requirements contained in Section 4980.37.

(2) A minimum of seven contact hours of training or coursework in child abuse assessment and reporting as specified in Section 28 and any regulations promulgated thereunder.

(3) A minimum of 10 contact hours of training or coursework in human sexuality as specified in Section 25, and any regulations promulgated thereunder. When coursework in a master's or doctor's degree program is acquired to satisfy this requirement, it shall be considered as part of the 48 semester or 72 quarter unit requirement contained in Section 4980.37.

(4) For persons who began graduate study on or after January 1, 1986, a master's or doctor's degree qualifying for licensure shall include specific instruction in alcoholism and other chemical substance dependency as specified by regulation. When coursework in a master's or doctor's degree program is acquired to satisfy this requirement, it shall be considered as part of the 48 semester or 72 quarter unit requirement contained in Section 4980.37.

(5) For persons who began graduate study during the period commencing on January 1, 1995, and ending on December 31, 2003, a master's or doctor's degree qualifying for licensure shall include coursework in spousal or partner abuse assessment, detection, and intervention. For persons who began graduate study on or after January 1, 2004, a master's or doctor's degree qualifying for licensure shall include a minimum of 15 contact hours of coursework in spousal or partner abuse assessment, detection, and intervention strategies, including knowledge of community resources, cultural factors, and same gender abuse dynamics. Coursework required under this subdivision may be satisfactory if taken either in fulfillment of other educational requirements for licensure or in a separate course. The requirement for coursework shall be satisfied by, and the board shall accept in satisfaction of the requirement, a certification from the chief academic officer of the educational institution from which the applicant graduated that the required coursework is included within the institution's required curriculum for graduation.

(6) For persons who began graduate study on or after January 1, 2001, an applicant shall complete a minimum of a two semester or three quarter unit survey course in psychological testing. When coursework in a master's or doctor's degree program is acquired to satisfy this requirement, it may be considered as part of the 48 semester or 72 quarter unit requirement of Section 4980.37.

(7) For persons who began graduate study on or after January 1, 2001, an applicant shall complete a minimum of a two semester or three quarter unit survey course in psychopharmacology. When coursework in a master's or doctor's degree program is acquired to satisfy this requirement, it may be considered as part of the 48 semester or 72 quarter unit requirement of Section 4980.37.

(8) The requirements added by paragraphs (6) and (7) are intended to improve the educational qualifications for licensure in order to better prepare future licentiates for practice and are not intended in any way to expand or restrict the scope of licensure for marriage and family therapists.

(b) This section shall remain in effect only until January 1, 2019, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2019, deletes or extends that date.

REQUIREMENTS FOR OUT-OF STATE LMFT APPLICANTS EFFECTIVE JANUARY 1, 2014

§4980.78. SUBSTANTIALLY EQUIVALENT EDUCATION; ADDITIONAL COURSEWORK; EFFECTIVE JANUARY 1, 2014

(a) This section applies to persons who apply for licensure or registration on or after January 1, 2014.

(b) For purposes of Sections 4980.72 and 4980.74, education is substantially equivalent if all of the following requirements are met:

(1) The degree is obtained from a school, college, or university accredited by an accrediting agency recognized by the United States Department of Education and consists of, at a minimum, 48 semester or 72 quarter units, including, but not limited to, both of the following:

(A) Six semester or nine quarter units of practicum, including, but not limited to, a minimum of 150 hours of face-to-face counseling.

(B) Twelve semester or 18 quarter units in the areas of marriage, family, and child counseling and marital and family systems approaches to treatment, as specified in subparagraph (A) of paragraph (1) of subdivision (d) of Section 4980.36.

(2) The applicant completes any units and course content requirements under subdivision (d) of Section 4980.36 not already completed in his or her education.

(3) The applicant completes credit level coursework from a degree-granting institution that provides all of the following:

(A) Instruction regarding the principles of mental health recovery-oriented care and methods of service delivery in recovery model practice environments.

(B) An understanding of various California cultures and the social and psychological implications of socioeconomic position.

(C) Structured meeting with various consumers and family members of consumers of mental health services to enhance understanding of their experience of mental illness, treatment, and recovery.

(D) Instruction in addiction and co-occurring substance abuse and mental health disorders, as specified in subparagraph (l) of paragraph (2) of subdivision (d) of Section 4980.36.

(4) The applicant completes an 18-hour course in California law and professional ethics. The content of the course shall include, but not be limited to, advertising, scope of practice, scope of competence, treatment of minors, confidentiality, dangerous patients, psychotherapist-patient

privilege, recordkeeping, patient access to records, state and federal laws relating to confidentiality of patient health information, dual relationships, child abuse, elder and dependent adult abuse, online therapy, insurance reimbursement, civil liability, disciplinary actions and unprofessional conduct, ethics complaints and ethical standards, termination of therapy, standards of care, relevant family law, therapist disclosures to patients, differences in legal and ethical standards in different types of work settings, and licensing law and licensing process.

(5) The applicant's degree title need not be identical to that required by subdivision (b) of Section 4980.36.

§4980.36 QUALIFYING DEGREE PROGRAM FOR LICENSURE OR REGISTRATION; BEGINNING GRADUATE STUDY AFTER AUGUST 1, 2012 OR COMPLETING GRADUATE STUDY AFTER DECEMBER 31, 2018

(a) This section shall apply to the following:

(1) Applicants for licensure or registration who begin graduate study before August 1, 2012, and do not complete that study on or before December 31, 2018.

(2) Applicants for licensure or registration who begin graduate study before August 1, 2012, and who graduate from a degree program that meets the requirements of this section.

(3) Applicants for licensure or registration who begin graduate study on or after August 1, 2012.

(b) To qualify for a license or registration, applicants shall possess a doctor's or master's degree meeting the requirements of this section in marriage, family, and child counseling, marriage and family therapy, couple and family therapy, psychology, clinical psychology, counseling psychology, or counseling with an emphasis in either marriage, family, and child counseling or marriage and family therapy, obtained from a school, college, or university approved by the Bureau for Private Postsecondary Education or accredited by either the Commission on the Accreditation of Marriage and Family Therapy Education or a regional accrediting agency recognized by the United States Department of Education. The board has the authority to make the final determination as to whether a degree meets all requirements, including, but not limited to, course requirements, regardless of accreditation or approval.

(c) A doctor's or master's degree program that qualifies for licensure or registration shall do the following:

(1) Integrate all of the following throughout its curriculum:

(A) Marriage and family therapy principles.

(B) The principles of mental health recovery-oriented care and methods of service delivery in recovery-oriented practice environments, among others.

(C) An understanding of various cultures and the social and psychological implications of socioeconomic position, and an understanding of how poverty and social stress impact an individual's mental health and recovery.

(2) Allow for innovation and individuality in the education of marriage and family therapists.

(3) Encourage students to develop the personal qualities that are intimately related to effective practice, including, but not limited to, integrity, sensitivity, flexibility, insight, compassion, and personal presence.

(4) Permit an emphasis or specialization that may address any one or more of the unique and complex array of human problems, symptoms, and needs of Californians served by marriage and family therapists.

(5) Provide students with the opportunity to meet with various consumers and family members of consumers of mental health services to enhance understanding of their experience of mental illness, treatment, and recovery.

(d) The degree described in subdivision (b) shall contain no less than 60 semester or 90 quarter units of instruction that includes, but is not limited to, the following requirements:

(1) Both of the following:

(A) No less than 12 semester or 18 quarter units of coursework in theories, principles, and methods of a variety of psychotherapeutic orientations directly related to marriage and family therapy and marital and family systems approaches to treatment and how these theories can be applied therapeutically with individuals, couples, families, adults, including elder adults, children, adolescents, and groups to improve, restore, or maintain healthy relationships.

(B) Practicum that involves direct client contact, as follows:

(i) A minimum of six semester or nine quarter units of practicum in a supervised clinical placement that provides supervised fieldwork experience.

(ii) A minimum of 150 hours of face-to-face experience counseling individuals, couples, families, or groups.

(iii) A student must be enrolled in a practicum course while counseling clients, except as specified in subdivision (c) of Section 4980.42.

(iv) The practicum shall provide training in all of the following areas:

(I) Applied use of theory and psychotherapeutic techniques.

(II) Assessment, diagnosis, and prognosis.

(III) Treatment of individuals and premarital, couple, family, and child relationships, including trauma and abuse, dysfunctions, healthy functioning, health promotion, illness prevention, and working with families.

(IV) Professional writing, including documentation of services, treatment plans, and progress notes.

(V) How to connect people with resources that deliver the quality of services and support needed in the community.

(v) Educational institutions are encouraged to design the practicum required by this subparagraph to include marriage and family therapy experience in low-income and multicultural mental health settings.

(vi) In addition to the 150 hours required in clause (ii), 75 hours of either of the following:

(I) Client-centered advocacy, as defined in Section 4980.03.

(II) Face-to-face experience counseling individuals, couples, families, or groups.

(2) Instruction in all of the following:

(A) Diagnosis, assessment, prognosis, and treatment of mental disorders, including severe mental disorders, evidence-based practices, psychological testing, psychopharmacology, and promising mental health practices that are evaluated in peer reviewed literature.

(B) Developmental issues from infancy to old age, including instruction in all of the following areas:

(i) The effects of developmental issues on individuals, couples, and family relationships.

(ii) The psychological, psychotherapeutic, and health implications of developmental issues and their effects.

(iii) Aging and its biological, social, cognitive, and psychological aspects.

(iv) A variety of cultural understandings of human development.

(v) The understanding of human behavior within the social context of socioeconomic status and other contextual issues affecting social position.

(vi) The understanding of human behavior within the social context of a representative variety of the cultures found within California.

(vii) The understanding of the impact that personal and social insecurity, social stress, low educational levels, inadequate housing, and malnutrition have on human development.

(C) The broad range of matters and life events that may arise within marriage and family relationships and within a variety of California cultures, including instruction in all of the following:

- (i) Child and adult abuse assessment and reporting.
- (ii) Spousal or partner abuse assessment, detection, intervention strategies, and same-gender abuse dynamics.
- (iii) Cultural factors relevant to abuse of partners and family members.
- (iv) Childbirth, child rearing, parenting, and stepparenting.
- (v) Marriage, divorce, and blended families.
- (vi) Long-term care.
- (vii) End of life and grief.
- (viii) Poverty and deprivation.
- (ix) Financial and social stress.
- (x) Effects of trauma.
- (xi) The psychological, psychotherapeutic, community, and health implications of the matters and life events described in clauses (i) to (x), inclusive.

(D) Cultural competency and sensitivity, including a familiarity with the racial, cultural, linguistic, and ethnic backgrounds of persons living in California.

(E) Multicultural development and cross-cultural interaction, including experiences of race, ethnicity, class, spirituality, sexual orientation, gender, and disability, and their incorporation into the psychotherapeutic process.

(F) The effects of socioeconomic status on treatment and available resources.

(G) Resilience, including the personal and community qualities that enable persons to cope with adversity, trauma, tragedy, threats, or other stresses.

(H) Human sexuality, including the study of physiological, psychological, and social cultural variables associated with sexual behavior and gender identity, and the assessment and treatment of psychosexual dysfunction.

(I) Substance use disorders, co-occurring disorders, and addiction, including, but not limited to, instruction in all of the following:

- (i) The definition of substance use disorders, co-occurring disorders, and addiction. For purposes of this subparagraph, “co-occurring disorders” means a mental illness and substance abuse diagnosis occurring simultaneously in an individual.

- (ii) Medical aspects of substance use disorders and co-occurring disorders.
- (iii) The effects of psychoactive drug use.
- (iv) Current theories of the etiology of substance abuse and addiction.
- (v) The role of persons and systems that support or compound substance abuse and addiction.
- (vi) Major approaches to identification, evaluation, and treatment of substance use disorders, co-occurring disorders, and addiction, including, but not limited to, best practices.
- (vii) Legal aspects of substance abuse.
- (viii) Populations at risk with regard to substance use disorders and co-occurring disorders.
- (ix) Community resources offering screening, assessment, treatment, and followup for the affected person and family.
- (x) Recognition of substance use disorders, co-occurring disorders, and addiction, and appropriate referral.
- (xi) The prevention of substance use disorders and addiction.

(J) California law and professional ethics for marriage and family therapists, including instruction in all of the following areas of study:

- (i) Contemporary professional ethics and statutory, regulatory, and decisional laws that delineate the scope of practice of marriage and family therapy.
- (ii) The therapeutic, clinical, and practical considerations involved in the legal and ethical practice of marriage and family therapy, including, but not limited to, family law.
- (iii) The current legal patterns and trends in the mental health professions.
- (iv) The psychotherapist-patient privilege, confidentiality, the patient dangerous to self or others, and the treatment of minors with and without parental consent.
- (v) A recognition and exploration of the relationship between a practitioner's sense of self and human values and his or her professional behavior and ethics.
- (vi) Differences in legal and ethical standards for different types of work settings.
- (vii) Licensing law and licensing process.

(e) The degree described in subdivision (b) shall, in addition to meeting the requirements of subdivision (d), include instruction in case management, systems of care for the severely mentally ill, public and private services and supports available for the severely mentally ill,

community resources for persons with mental illness and for victims of abuse, disaster and trauma response, advocacy for the severely mentally ill, and collaborative treatment. This instruction may be provided either in credit level coursework or through extension programs offered by the degree-granting institution.

(f) The changes made to law by this section are intended to improve the educational qualifications for licensure in order to better prepare future licentiates for practice, and are not intended to expand or restrict the scope of practice for marriage and family therapists.

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To: Committee Members

Date: April 23, 2013

From: Kim Madsen
Executive Officer

Telephone: (916) 574-7841

**Subject: Requirements for Out of State Licensed Professional Clinical Counselors
Before and After January 1, 2014**

LPCC Out-of-State Applicants Before January 1, 2014

The Board may accept an out-of-state LPCC's education if the education is substantially equivalent to the educational requirements in Business and Professions Code (BPC) section 4999.32. In addition to additional coursework necessary for licensure in California, BPC 4999.32 requires the degree program to include nine core content areas and instruction in specific subject areas.

BPC 4999.32 specifies the number of contact hours or units for the eight additional courses an out-of-state LPCC applicant must complete for licensure in California. This coursework may be completed either through a continuing education course or through an educational institution.

This specificity provides clarity as to what the out-of-state LPCC applicant must complete to become licensed in California. Additionally, the out-of-state LPCC applicant has the flexibility to obtain the missing coursework either through a continuing education provider or an educational institution.

LPCC Out-of-State Applicants After January 1, 2014

Effective January 1, 2014, an out-of-state LPCC's education is deemed substantially equivalent if the requirements in Business and Professions Code section 4999.33 are satisfied. Some of the coursework noted in BPC 4999.32 is now incorporated as part of the increased semester/quarter unit requirement or as core content.

In addition to an 18 hour California Law and Ethic course, BPC 4999.33 requires instruction in four subject areas. These subject areas are specific to MHSA competencies and principles, California cultural issues, and work within a public mental health setting. However, BPC 4999.33 does not specify an hour or unit requirement for the subject areas.

Further, the law requires the out-of-state applicant to complete the coursework from a degree granting institution. The option for out-of-state LPCC applicants to complete coursework through a continuing education provider is eliminated.

Effect on LPCC Out-of-State Applicants

The change in law raises concerns that requiring an out-of-state LPCC applicant to complete deficient coursework at a graduate level may pose a barrier to licensure. California public colleges and universities face increasing enrollment and strict budgetary constraints. Thus, the availability of graduate level coursework for out-of-state students seeking to complete a few courses is non-existent. Without this option, an out-of-state LPCC applicant's only alternative would be to complete the coursework from private universities and colleges. The cost associated with obtaining the required coursework is significant; costing the individual several thousand dollars and consequently, a potential barrier to licensure in California.

Comparison of Additional Coursework Requirements for Out-of-State LPCC Applicants before and after January 1, 2014.

Additional Coursework Required	Prior to 1/1/14	Method of completion	After 1/1/14	Method of completion
CA Law and Ethics	18 hour course	Either course or CE class	18 hour course	Credit level coursework from a degree granting institution
Aging & Long Term Care (includes Elder Abuse & reporting) *	10 contact hours	Either course or CE class	Part of 60 semester or 90 qtr unit requirement	
Child Abuse Assessment & Reporting *	7 contact hours of training or coursework	Either course or CE class	Part of 60 semester or 90 qtr unit requirement	
Human Sexuality *	10 contact hours of training, or coursework	Either course or CE class	Part of 60 semester or 90 qtr unit requirement	
Alcoholism/Substance Abuse	15 contact hours of training, or coursework	Either course or CE class	Required core competency	
Spousal Abuse *	15 contact hours of training, or coursework	Either course or CE class	Part of 60 semester or 90 qtr unit requirement	
Psychopharmacology	2 semester or 3 quarter unit course	Enroll and complete course	Required core competency	
Crisis or trauma counseling	15 contact hours	Either course or CE class	Required core competency	
Principles of mental health recovery-oriented care & methods of service delivery in recovery model practice environment	Not required before Jan. 1, 2014			Credit level coursework from a degree granting institution
California cultures and the social and psychological implications of socioeconomic position	Not required before Jan. 1, 2014			Credit level coursework from a degree granting institution
Structured meeting with various consumers and family members of consumers of men	Not required before Jan. 1, 2014			Credit level coursework from a degree granting institution
Behavioral addiction and co-occurring substance abuse and mental health disorders	Not required before Jan. 1, 2014			Credit level coursework from a degree granting institution

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LAW FOR OUT-OF-STATE LPCC APPLICANTS

CURRENT REQUIREMENTS FOR OUT-OF STATE LPCC APPLICANTS

§4999.57

(a) This section applies to a person who applies for examination eligibility or registration between January 1, 2011, and December 31, 2013, inclusive, who does not hold a license described in subdivision (a) of Section 4999.58.

(b) Experience gained outside of California shall be accepted toward the licensure requirements if it is substantially equivalent to that required by this chapter, if the applicant complies with Section 4999.40, if applicable, and if the applicant has gained a minimum of 250 hours of supervised experience in direct counseling within California while registered as an intern with the board.

(c) Education gained while residing outside of California shall be accepted toward the licensure requirements if it is substantially equivalent to the education requirements of this chapter, and if the applicant has completed the training or coursework required under subdivision (e) of Section 4999.32, which includes, in addition to the course described in subparagraph (l) of paragraph (1) of subdivision (c) of Section 4999.32, an 18-hour course in California law and professional ethics for professional clinical counselors.

(d) For purposes of this section, the board may, in its discretion, accept education as substantially equivalent if the applicant's education meets the requirements of Section 4999.32. If the applicant's degree does not contain the content or the overall units required by Section 4999.32, the board may, in its discretion, accept the applicant's education as substantially equivalent if the following criteria are satisfied:

(1) The applicant's degree contains the required number of practicum units under paragraph (3) of subdivision (c) of Section 4999.32.

(2) The applicant remediates his or her specific deficiency by completing the course content and units required by Section 4999.32.

(3) The applicant's degree otherwise complies with this section.

(e) This section shall become inoperative on January 1, 2014, and as of that date is repealed, unless a later enacted statute, which is enacted before January 1, 2014, deletes or extends that date.

§4999.58

(a) This section applies to a person who applies for examination eligibility between January 1, 2011, and December 31, 2013, inclusive, and who meets both of the following requirements:

(1) At the time of application, holds a valid license as a professional clinical counselor, or other counseling license that allows the applicant to independently provide clinical mental health

services, in another jurisdiction of the United States.

(2) Has held the license described in paragraph (1) for at least two years immediately preceding the date of application.

(b) The board may issue a license to a person described in subdivision (a) if all of the following requirements are satisfied:

(1) The education and supervised experience requirements of the other jurisdiction are substantially the equivalent of this chapter, as described in subdivision (e) and in Section 4999.46.

(2) The person complies with subdivision (b) of Section 4999.40, if applicable.

(3) The person successfully completes the examinations required by the board pursuant to paragraph (3) of subdivision (a) of Section 4999.50. An applicant who obtained his or her license or registration under another jurisdiction by taking a national examination that is required by the board may apply for licensure with the board without retaking that examination if both of the following conditions are met:

(A) The applicant obtained a passing score on the national licensing examination that is required by the board.

(B) The applicant's license or registration in that jurisdiction is in good standing at the time of his or her application and has not been revoked, suspended, surrendered, denied, or otherwise restricted or encumbered as a result of any disciplinary proceeding brought by the licensing authority of that jurisdiction.

(4) The person pays the required fees.

(c) Experience gained outside of California shall be accepted toward the licensure requirements if it is substantially equivalent to that required by this chapter. The board shall consider hours of experience obtained in another state during the six-year period immediately preceding the applicant's initial licensure by that state as a licensed professional clinical counselor.

(d) Education gained while residing outside of California shall be accepted toward the licensure requirements if it is substantially equivalent to the education requirements of this chapter, and if the applicant has completed the training or coursework required under subdivision (e) of Section 4999.32, which includes, in addition to the course described in subparagraph (l) of paragraph (1) of subdivision (c) of Section 4999.32, an 18-hour course in California law and professional ethics for professional clinical counselors.

(e) For purposes of this section, the board may, in its discretion, accept education as substantially equivalent if the applicant's education meets the requirements of Section 4999.32. If the applicant's degree does not contain the content or the overall units required by Section 4999.32, the board may, in its discretion, accept the applicant's education as substantially equivalent if the following criteria are satisfied:

(1) The applicant's degree contains the required number of practicum units under paragraph (3) of subdivision (c) of Section 4999.32.

(2) The applicant remediates his or her specific deficiency by completing the course content and

units required by Section 4999.32.

(3) The applicant's degree otherwise complies with this section.

(f) This section shall become inoperative on January 1, 2014, and as of that date is repealed, unless a later enacted statute, which is enacted before January 1, 2014, deletes or extends that date.

§4999.59

(a) This section applies to a person who applies for examination eligibility or registration between January 1, 2011, and December 31, 2013, inclusive, who meets both of the following requirements:

(1) At the time of application, holds a valid license described in paragraph (1) of subdivision (a) of Section 4999.58.

(2) Has held the license described in paragraph (1) for less than two years immediately preceding the date of application.

(b) Experience gained outside of California shall be accepted toward the licensure requirements if it is substantially equivalent to that required by this chapter, if the applicant complies with Section 4999.40, if applicable, and if the applicant has gained a minimum of 250 hours of supervised experience in direct counseling within California while registered as an intern with the board. The board shall consider hours of experience obtained in another state during the six-year period immediately preceding the applicant's initial licensure in that state as a professional clinical counselor.

(c) Education gained while residing outside of California shall be accepted toward the licensure requirements if it is substantially equivalent to the education requirements of this chapter, and if the applicant has completed the training or coursework required under subdivision (e) of Section 4999.32, which includes, in addition to the course described in subparagraph (l) of paragraph (1) of subdivision (c) of Section 4999.32, an 18-hour course in California law and professional ethics for professional clinical counselors.

(d) For purposes of this section, the board may, in its discretion, accept education as substantially equivalent if the applicant's education meets the requirements of Section 4999.32. If the applicant's degree does not contain the content or the overall units required by Section 4999.32, the board may, in its discretion, accept the applicant's education as substantially equivalent if the following criteria are satisfied:

(1) The applicant's degree contains the required number of practicum units under paragraph (3) of subdivision (c) of Section 4999.32.

(2) The applicant remediates his or her specific deficiency by completing the course content and units required by Section 4999.32.

(3) The applicant's degree otherwise complies with this section.

(e) An applicant who obtained his or her license or registration under another jurisdiction by taking a national examination that is required by the board may apply for licensure with the

board without retaking that examination if both of the following conditions are met:

(1) The applicant obtained a passing score on the national licensing examination that is required by the board.

(2) The applicant's license or registration in that jurisdiction is in good standing at the time of his or her application and has not been revoked, suspended, surrendered, denied, or otherwise restricted or encumbered as a result of any disciplinary proceeding brought by the licensing authority of that jurisdiction.

(f) This section shall become inoperative on January 1, 2014, and as of that date is repealed, unless a later enacted statute, which is enacted before January 1, 2014, deletes or extends that date.

§4999.32.

(a) This section shall apply to applicants for examination eligibility or registration who begin graduate study before August 1, 2012, and complete that study on or before December 31, 2018. Those applicants may alternatively qualify under paragraph (2) of subdivision (a) of Section 4999.33.

(b) To qualify for examination eligibility or registration, applicants shall possess a master's or doctoral degree that is counseling or psychotherapy in content and that meets the requirements of this section, obtained from an accredited or approved institution, as defined in Section 4999.12. For purposes of this subdivision, a degree is "counseling or psychotherapy in content" if it contains the supervised practicum or field study experience described in paragraph (3) of subdivision (c) and, except as provided in subdivision (d), the coursework in the core content areas listed in subparagraphs (A) to (I), inclusive, of paragraph (1) of subdivision (c).

(c) The degree described in subdivision (b) shall contain not less than 48 graduate semester or 72 graduate quarter units of instruction, which shall, except as provided in subdivision (d), include all of the following:

(1) The equivalent of at least three semester units or four and one-half quarter units of graduate study in each of following core content areas:

(A) Counseling and psychotherapeutic theories and techniques, including the counseling process in a multicultural society, an orientation to wellness and prevention, counseling theories to assist in selection of appropriate counseling interventions, models of counseling consistent with current professional research and practice, development of a personal model of counseling, and multidisciplinary responses to crises, emergencies, and disasters.

(B) Human growth and development across the lifespan, including normal and abnormal behavior and an understanding of developmental crises, disability, psychopathology, and situational and environmental factors that affect both normal and abnormal behavior.

(C) Career development theories and techniques, including career development decisionmaking models and interrelationships among and between work, family, and other life roles and factors, including the role of multicultural issues in career development.

(D) Group counseling theories and techniques, including principles of group dynamics, group process components, developmental stage theories, therapeutic factors of group work, group leadership styles and approaches, pertinent research and literature, group counseling methods, and evaluation of effectiveness.

(E) Assessment, appraisal, and testing of individuals, including basic concepts of standardized and nonstandardized testing and other assessment techniques, norm-referenced and criterion-referenced assessment, statistical concepts, social and cultural factors related to assessment and evaluation of individuals and groups, and ethical strategies for selecting, administering, and interpreting assessment instruments and techniques in counseling.

(F) Multicultural counseling theories and techniques, including counselors' roles in developing cultural self-awareness, identity development, promoting cultural social justice, individual and community strategies for working with and advocating for diverse populations, and counselors' roles in eliminating biases and prejudices, and processes of intentional and unintentional oppression and discrimination.

(G) Principles of the diagnostic process, including differential diagnosis, and the use of current diagnostic tools, such as the current edition of the Diagnostic and Statistical Manual, the impact of co-occurring substance use disorders or medical psychological disorders, established diagnostic criteria for mental or emotional disorders, and the treatment modalities and placement criteria within the continuum of care.

(H) Research and evaluation, including studies that provide an understanding of research methods, statistical analysis, the use of research to inform evidence-based practice, the importance of research in advancing the profession of counseling, and statistical methods used in conducting research, needs assessment, and program evaluation.

(I) Professional orientation, ethics, and law in counseling, including professional ethical standards and legal considerations, licensing law and process, regulatory laws that delineate the profession's scope of practice, counselor-client privilege, confidentiality, the client dangerous to self or others, treatment of minors with or without parental consent, relationship between practitioner's sense of self and human values, functions and relationships with other human service providers, strategies for collaboration, and advocacy processes needed to address institutional and social barriers that impede access, equity, and success for clients.

(2) In addition to the course requirements described in paragraph (1), a minimum of 12 semester units or 18 quarter units of advanced coursework to develop knowledge of specific treatment issues, special populations, application of counseling constructs, assessment and treatment planning, clinical interventions, therapeutic relationships, psychopathology, or other clinical topics.

(3) Not less than six semester units or nine quarter units of supervised practicum or field study experience, or the equivalent, in a clinical setting that provides a range of professional clinical counseling experience, including the following:

(A) Applied psychotherapeutic techniques.

- (B) Assessment.
 - (C) Diagnosis.
 - (D) Prognosis.
 - (E) Treatment.
 - (F) Issues of development, adjustment, and maladjustment.
 - (G) Health and wellness promotion.
 - (H) Other recognized counseling interventions.
 - (I) A minimum of 150 hours of face-to-face supervised clinical experience counseling individuals, families, or groups.
- (d) (1) An applicant whose degree is deficient in no more than two of the required areas of study listed in subparagraphs (A) to (I), inclusive, of paragraph (1) of subdivision (c) may satisfy those deficiencies by successfully completing post-master's or postdoctoral degree coursework at an accredited or approved institution, as defined in Section 4999.12.
- (2) Coursework taken to meet deficiencies in the required areas of study listed in subparagraphs (A) to (I), inclusive, of paragraph (1) of subdivision (c) shall be the equivalent of three semester units or four and one-half quarter units of study.
- (3) The board shall make the final determination as to whether a degree meets all requirements, including, but not limited to, course requirements, regardless of accreditation.
- (e) In addition to the degree described in this section, or as part of that degree, an applicant shall complete the following coursework or training prior to registration as an intern:
- (1) A minimum of 15 contact hours of instruction in alcoholism and other chemical substance abuse dependency, as specified by regulation.
 - (2) A minimum of 10 contact hours of training or coursework in human sexuality as specified in Section 25, and any regulations promulgated thereunder.
 - (3) A two semester unit or three quarter unit survey course in psychopharmacology.
 - (4) A minimum of 15 contact hours of instruction in spousal or partner abuse assessment, detection, and intervention strategies, including knowledge of community resources, cultural factors, and same gender abuse dynamics.
 - (5) A minimum of seven contact hours of training or coursework in child abuse assessment and reporting as specified in Section 28 and any regulations adopted thereunder.
 - (6) A minimum of 18 contact hours of instruction in California law and professional ethics for professional clinical counselors that includes, but is not limited to, instruction in advertising, scope of practice, scope of competence, treatment of minors, confidentiality, dangerous clients, psychotherapist-client privilege, recordkeeping, client access to records, dual relationships, child abuse, elder and dependent adult abuse, online therapy, insurance reimbursement, civil liability, disciplinary actions and unprofessional conduct, ethics complaints and ethical standards, termination of therapy, standards of care, relevant family law, therapist disclosures to clients, and state and federal laws related to confidentiality of patient health information. When coursework in a master's or doctoral degree program is acquired to satisfy this requirement, it

shall be considered as part of the 48 semester unit or 72 quarter unit requirement in subdivision (c).

(7) A minimum of 10 contact hours of instruction in aging and long-term care, which may include, but is not limited to, the biological, social, and psychological aspects of aging. On and after January 1, 2012, this coursework shall include instruction on the assessment and reporting of, as well as treatment related to, elder and dependent adult abuse and neglect.

(8) A minimum of 15 contact hours of instruction in crisis or trauma counseling, including multidisciplinary responses to crises, emergencies, or disasters, and brief, intermediate, and long-term approaches.

(f) This section shall remain in effect only until January 1, 2019, and as of that date is repealed, unless a later enacted statute that is enacted before January 1, 2019, deletes or extends that date.

REQUIREMENTS FOR OUT-OF STATE LPCC APPLICANTS EFFECTIVE JANUARY 1, 2014

§4999.60

(a) This section applies to persons who are licensed outside of California and apply for examination eligibility on or after January 1, 2014.

(b) The board may issue a license to a person who, at the time of submitting an application for a license pursuant to this chapter, holds a valid license as a professional clinical counselor, or other counseling license that allows the applicant to independently provide clinical mental health services, in another jurisdiction of the United States if all of the following conditions are satisfied:

(1) The applicant's education is substantially equivalent, as defined in Section 4999.62.

(2) The applicant complies with subdivision (b) of Section 4999.40, if applicable.

(3) The applicant's supervised experience is substantially equivalent to that required for a license under this chapter. The board shall consider hours of experience obtained outside of California during the six-year period immediately preceding the date the applicant initially obtained the license described above.

(4) The applicant passes the examinations required to obtain a license under this chapter. An applicant who obtained his or her license or registration under another jurisdiction may apply for licensure with the board without taking the clinical examination if both of the following conditions are met:

(A) The applicant obtained a passing score on the licensing examination set forth in regulation as accepted by the board.

(B) The applicant's license or registration in that jurisdiction is in good standing at the time of his or her application and has not been revoked, suspended, surrendered, denied, or otherwise restricted or encumbered as a result of any disciplinary proceeding brought by the licensing authority of that jurisdiction.

§4999.61

(a) This section applies to persons who apply for examination eligibility or registration on or after January 1, 2014, and who do not hold a license as described in Section 4999.60.

(b) The board shall accept education gained while residing outside of California for purposes of satisfying licensure or registration requirements if the education is substantially equivalent, as defined in Section 4999.62, and the applicant complies with subdivision (b) of Section 4999.40, if applicable.

(c) The board shall accept experience gained outside of California for purposes of satisfying licensure or registration requirements if the experience is substantially equivalent to that required by this chapter.

4999.62

(a) This section applies to persons who apply for examination eligibility or registration on or after January 1, 2014.

(b) For purposes of Sections 4999.60 and 4999.61, education is substantially equivalent if all of the following requirements are met:

(1) The degree is obtained from an accredited or approved institution, as defined in Section 4999.12, and consists of, at a minimum, 48 semester or 72 quarter units, including, but not limited to, both of the following:

(A) Six semester or nine quarter units of practicum, including, but not limited to, a minimum of 280 hours of face-to-face counseling.

(B) The required areas of study listed in subparagraphs (A) to (M), inclusive, of paragraph (1) of subdivision (c) of Section 4999.33.

(2) The applicant completes any units and course content requirements under Section 4999.33 not already completed in his or her education.

(3) The applicant completes credit level coursework from a degree-granting institution that provides all of the following:

(A) Instruction regarding the principles of mental health recovery-oriented care and methods of service delivery in recovery model practice environments.

(B) An understanding of various California cultures and the social and psychological implications of socioeconomic position.

(C) Structured meeting with various consumers and family members of consumers of mental health services to enhance understanding of their experience of mental illness, treatment, and recovery.

(D) Instruction in behavioral addiction and co-occurring substance abuse and mental health disorders, as specified in subparagraph (K) of paragraph (1) of subdivision (c) of Section 4999.33.

(4) The applicant completes, in addition to the course described in subparagraph (I) of paragraph (1) of subdivision (c) of Section 4999.33, an 18-hour course in California law and

professional ethics that includes, but is not limited to, instruction in advertising, scope of practice, scope of competence, treatment of minors, confidentiality, dangerous clients, psychotherapist-client privilege, recordkeeping, client access to records, state and federal laws relating to confidentiality of patient health information, dual relationships, child abuse, elder and dependent adult abuse, online therapy, insurance reimbursement, civil liability, disciplinary actions and unprofessional conduct, ethics complaints and ethical standards, termination of therapy, standards of care, relevant family law, and therapist disclosures to clients.

§4999.33.

(a) This section shall apply to the following:

(1) Applicants for examination eligibility or registration who begin graduate study before August 1, 2012, and do not complete that study on or before December 31, 2018.

(2) Applicants for examination eligibility or registration who begin graduate study before August 1, 2012, and who graduate from a degree program that meets the requirements of this section.

(3) Applicants for examination eligibility or registration who begin graduate study on or after August 1, 2012.

(b) To qualify for examination eligibility or registration, applicants shall possess a master's or doctoral degree that is counseling or psychotherapy in content and that meets the requirements of this section, obtained from an accredited or approved institution, as defined in Section 4999.12. For purposes of this subdivision, a degree is "counseling or psychotherapy in content" if it contains the supervised practicum or field study experience described in paragraph (3) of subdivision (c) and, except as provided in subdivision (f), the coursework in the core content areas listed in subparagraphs (A) to (M), inclusive, of paragraph (1) of subdivision (c).

(c) The degree described in subdivision (b) shall contain not less than 60 graduate semester or 90 graduate quarter units of instruction, which shall, except as provided in subdivision (f), include all of the following:

(1) The equivalent of at least three semester units or four and one-half quarter units of graduate study in all of the following core content areas:

(A) Counseling and psychotherapeutic theories and techniques, including the counseling process in a multicultural society, an orientation to wellness and prevention, counseling theories to assist in selection of appropriate counseling interventions, models of counseling consistent with current professional research and practice, development of a personal model of counseling, and multidisciplinary responses to crises, emergencies, and disasters.

(B) Human growth and development across the lifespan, including normal and abnormal behavior and an understanding of developmental crises, disability, psychopathology, and situational and environmental factors that affect both normal and abnormal behavior.

(C) Career development theories and techniques, including career development decisionmaking models and interrelationships among and between work, family, and other life roles and factors, including the role of multicultural issues in career development.

(D) Group counseling theories and techniques, including principles of group dynamics, group process components, group developmental stage theories, therapeutic factors of group work, group leadership styles and approaches, pertinent research and literature, group counseling methods, and evaluation of effectiveness.

(E) Assessment, appraisal, and testing of individuals, including basic concepts of standardized and nonstandardized testing and other assessment techniques, norm-referenced and criterion-referenced assessment, statistical concepts, social and cultural factors related to assessment and evaluation of individuals and groups, and ethical strategies for selecting, administering, and interpreting assessment instruments and techniques in counseling.

(F) Multicultural counseling theories and techniques, including counselors' roles in developing cultural self-awareness, identity development, promoting cultural social justice, individual and community strategies for working with and advocating for diverse populations, and counselors' roles in eliminating biases and prejudices, and processes of intentional and unintentional oppression and discrimination.

(G) Principles of the diagnostic process, including differential diagnosis, and the use of current diagnostic tools, such as the current edition of the Diagnostic and Statistical Manual, the impact of co-occurring substance use disorders or medical psychological disorders, established diagnostic criteria for mental or emotional disorders, and the treatment modalities and placement criteria within the continuum of care.

(H) Research and evaluation, including studies that provide an understanding of research methods, statistical analysis, the use of research to inform evidence-based practice, the importance of research in advancing the profession of counseling, and statistical methods used in conducting research, needs assessment, and program evaluation.

(I) Professional orientation, ethics, and law in counseling, including California law and professional ethics for professional clinical counselors, professional ethical standards and legal considerations, licensing law and process, regulatory laws that delineate the profession's scope of practice, counselor-client privilege, confidentiality, the client dangerous to self or others, treatment of minors with or without parental consent, relationship between practitioner's sense of self and human values, functions and relationships with other human service providers, strategies for collaboration, and advocacy processes needed to address institutional and social barriers that impede access, equity, and success for clients.

(J) Psychopharmacology, including the biological bases of behavior, basic classifications, indications, and contraindications of commonly prescribed psychopharmacological medications so that appropriate referrals can be made for medication evaluations and so that the side effects of those medications can be identified.

(K) Addictions counseling, including substance abuse, co-occurring disorders, and addiction, major approaches to identification, evaluation, treatment, and prevention of substance abuse and addiction, legal and medical aspects of substance abuse, populations at risk, the role of support persons, support systems, and community resources.

(L) Crisis or trauma counseling, including crisis theory; multidisciplinary responses to crises, emergencies, or disasters; cognitive, affective, behavioral, and neurological effects associated with trauma; brief, intermediate, and long-term approaches; and assessment strategies for clients in crisis and principles of intervention for individuals with mental or emotional disorders during times of crisis, emergency, or disaster.

(M) Advanced counseling and psychotherapeutic theories and techniques, including the application of counseling constructs, assessment and treatment planning, clinical interventions, therapeutic relationships, psychopathology, or other clinical topics.

(2) In addition to the course requirements described in paragraph (1), 15 semester units or 22.5 quarter units of advanced coursework to develop knowledge of specific treatment issues or special populations.

(3) Not less than six semester units or nine quarter units of supervised practicum or field study experience, or the equivalent, in a clinical setting that provides a range of professional clinical counseling experience, including the following:

(A) Applied psychotherapeutic techniques.

(B) Assessment.

(C) Diagnosis.

(D) Prognosis.

(E) Treatment.

(F) Issues of development, adjustment, and maladjustment.

(G) Health and wellness promotion.

(H) Professional writing including documentation of services, treatment plans, and progress notes.

(I) How to find and use resources.

(J) Other recognized counseling interventions.

(K) A minimum of 280 hours of face-to-face supervised clinical experience counseling individuals, families, or groups.

(d) The 60 graduate semester units or 90 graduate quarter units of instruction required pursuant to subdivision (c) shall, in addition to meeting the requirements of subdivision (c), include instruction in all of the following:

(1) The understanding of human behavior within the social context of socioeconomic status and other contextual issues affecting social position.

(2) The understanding of human behavior within the social context of a representative variety of the cultures found within California.

(3) Cultural competency and sensitivity, including a familiarity with the racial, cultural, linguistic, and ethnic backgrounds of persons living in California.

(4) An understanding of the effects of socioeconomic status on treatment and available resources.

(5) Multicultural development and cross-cultural interaction, including experiences of race, ethnicity, class, spirituality, sexual orientation, gender, and disability and their incorporation into the psychotherapeutic process.

(6) Case management, systems of care for the severely mentally ill, public and private services for the severely mentally ill, community resources for victims of abuse, disaster and trauma response, advocacy for the severely mentally ill, and collaborative treatment. The instruction required in this paragraph may be provided either in credit level coursework or through extension programs offered by the degree-granting institution.

(7) Human sexuality, including the study of the physiological, psychological, and social cultural variables associated with sexual behavior, gender identity, and the assessment and treatment of psychosexual dysfunction.

(8) Spousal or partner abuse assessment, detection, intervention strategies, and same-gender abuse dynamics.

(9) Child abuse assessment and reporting.

(10) Aging and long-term care, including biological, social, cognitive, and psychological aspects of aging. This coursework shall include instruction on the assessment and reporting of, as well as treatment related to, elder and dependent adult abuse and neglect.

(e) A degree program that qualifies for licensure under this section shall do all of the following:

(1) Integrate the principles of mental health recovery-oriented care and methods of service delivery in recovery-oriented practice environments.

(2) Integrate an understanding of various cultures and the social and psychological implications of socioeconomic position.

(3) Provide the opportunity for students to meet with various consumers and family members of consumers of mental health services to enhance understanding of their experience of mental illness, treatment, and recovery.

(f) (1) An applicant whose degree is deficient in no more than three of the required areas of study listed in subparagraphs (A) to (M), inclusive, of paragraph (1) of subdivision (c) may satisfy those deficiencies by successfully completing post-master's or postdoctoral degree coursework at an accredited or approved institution, as defined in Section 4999.12.

(2) Coursework taken to meet deficiencies in the required areas of study listed in

subparagraphs (A) to (M), inclusive, of paragraph (1) of subdivision (c) shall be the equivalent of three semester units or four and one-half quarter units of study.

(3) The board shall make the final determination as to whether a degree meets all requirements, including, but not limited to, course requirements, regardless of accreditation.

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To: Committee Members

Date: April 23, 2013

From: Kim Madsen
Executive Officer

Telephone: (916) 574-7841

Subject: Comparison of LMFT Educational Requirements in California with Other States

The 2011 American Counseling Association statistics reflect that there are nearly 55,000 Licensed Marriage and Family Therapists in the United States. Over 31,000 of these licensees are in California. Professional licensure requirements vary between states. For example, California requires passage of two examinations developed by the Board of Behavioral Sciences (Board). Other states require passage of the Association of Marital and Family Therapy Regulatory Boards (AMFTRB) national examination and a jurisprudence examination.

There are subtle differences in the LMFT educational requirements between the states. Some states may require specific course content such as developmental issues from infancy to old age. Other states may specify a broader subject area such individual development. All states require the MFT degree program to be accredited by an accreditation agency or approved by another entity.

One method that a degree program may receive accreditation is through regional accreditation agencies (e.g. Western Association of Schools and Colleges). Accreditation from an entity that is specific to a course of study is another method. The Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) is an accrediting agency that is specific to marriage and family therapy education. California accepts both COAMFTE degree programs and regionally accredited MFT degree programs.

A component of the COAMFTE accreditation is the MFT Educational Guidelines developed by COAMFTE. These guidelines inform educators as to the requirements that should be present in a MFT educational program. Students in a COAMFTE program receive standard curriculum instruction that incorporates content that addresses issues related to diversity, power and privilege as they related to age, culture, environment, ethnicity, gender, health/ability, nationality, race, religion, sexual orientation, spirituality, and socioeconomic status. The standard curriculum also incorporates theoretical knowledge, clinical knowledge, individual development and family relations, professional identity and ethics, research, and additional learning that augments a specialized interest.

Included for the committee's review is a chart comparing LMFT Educational Requirements in California, Florida, Texas, and Washington and information regarding COAMFTE accreditation and the MFT Education Guidelines.

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	California	Florida	Texas	Washington
LMFT Licensees 2011 statistics	31,077	1545	2808	1151
Degree Req.	Masters/Doctoral MFT	Masters w/major emphasis in MFT	Masters / Doctoral COAMFTE approved Institution approved by CHEA Related field from institution approved by CHEA with all course requirements	Masters/Doctoral in MFT or behavioral science master's or doctoral with equivalent coursework from an approved school.
Semester or Quarter Hours Required	60 semester or 90 qtr. units Integrated program	36 hours or 48 qtr. hours		45 semester units or 60 qtr. Units 27 semester units or 36 qtr. Units in five courses of study *
Coursework	<p>Integrated Program Includes the following</p> <ul style="list-style-type: none"> ^Diagnosis, assessment, prognosis, treatment of mental disorders ^Developmental issues from infancy to old age ** ^Range of matters & life events within marriage & family relationships & within variety of CA cultures *** ^Cultural competency and sensitivity(includes racial, cultural, linguistic & ethnic backgrounds of persons living in CA) ^Multicultural development & cross cultural interaction (includes race, ethnicity, class, spirituality, sexual orientation, gender, disability, & their incorporation into the psychotherapeutic process) ^Effects of socioeconomic status on treatment & available resources ^Resilience (includes personal & community qualities that enable persons to cope with adversity, trauma, tragedy, threats or other stresses) ^Human sexuality ^Substance Abuse, co-occurring disorders, & addiction+ ^Law & Ethics ++ 	<p>9 core areas</p> <ul style="list-style-type: none"> -Dynamics of marital & family systems -Marriage therapy & counseling theory & techniques -Family therapy & counseling theory & techniques -Individual human development theories throughout the life cycle -Personality theory or general counseling theory and techniques -Psychopathology -Human sexuality theory -Psychosocial theory -Substance abuse theory and counseling techniques 	<p>COAMFTE Requirements</p> <p>Standard Curriculum Curriculum includes content that addresses issues related to diversity, power and privilege as they relate to age, culture, environment, ethnicity, gender, health/ability, nationality, race, religion, sexual orientation, spirituality, and socioeconomic status.</p> <p>Five Areas</p> <ul style="list-style-type: none"> -Theoretical Knowledge -Clinical Knowledge -Individual Development & Family Relations -Professional Identity & Ethics -Research -Additional Learning (coursework in specialized interests & variety of disciplines) <p>Council for Higher Education Accreditation A national advocate and institutional voice for self-regulation of academic quality through accreditation, CHEA is an association of 3,000 degree-granting colleges and universities and recognizes 60 institutional and programmatic accrediting organizations.</p>	<ul style="list-style-type: none"> *Marital & Family Systems *Marital & Family Therapy *Individual Development *Psychopathology *Human Sexuality

Additional coursework		3 Semester hours or 4 qtr. hours in the following: -Legal, ethical, & professional standards -Diagnosis, appraisal, assessment, and testing for individual or interpersonal disorder or dysfunction; -Behavioral research		4 hours HIV/AIDS training
Experience required		2 yrs. post degree exp under the supervision of a LMFT with 5 yrs. exp at least 1500 hours providing psychotherapy face to face with clients	2 yrs. exp 3000 hours (1500 hours direct clinical services; 750 hours direct clinical services couples & families) 200 hours supervised	2 calendar years of full time marriage and family therapy and 3000 hours. 1000 hours direct client contact 200 hours supervision 100 supervised hours one on one 100 hours supervision w/LMFT with 5 yrs. exp.
Additional requirements		-Eight-hour laws and rules course from a board approved provider -Two-hour prevention of medical errors course from a board approved provider. -Three hour HIV/AIDS course -Two hour domestic violence course from a board approved provider		

**** Coursework must include the following:** Effects of developmental issues on individuals, couples, and family relationships; psychological, psychotherapeutic, and health implications of developmental issues and their effects; aging and its biological, social, cognitive, and psychological aspects; cultural understanding of human development; human behavior within the social context of socioeconomic status and other contextual issues affecting social position; human behaviors within the social context of a representative variety of the cultures found in California; impact that persona and social insecurity, social stress, low educational levels, inadequate housing, and malnutrition have on human development.

*****Coursework must include the following:** Child and adult abuse assessment and reporting; spousal or partner abuse assessment, detection, intervention strategies, and same-gender abuse dynamics; cultural factors relevant to abuse of partners and family members; childbirth, child rearing, parenting, and step parenting; marriage, divorce, and blended families; long-term care; end of life and grief; poverty and deprivation; financial and social stress; effects of trauma. Coursework instructions must also include the psychological, psychotherapeutic, community, and health implications for each of the listed topics.

+Coursework must include the following: Definition of substance use disorders, co-occurring disorders, and addiction; medical aspects of substance use and co-occurring disorders; effects of psychoactive drug use; current theories of etiology of substance abuse and addiction; role of persons and systems that support or compound substance abuse and addiction; major approaches to identification, evaluation, and treatment; legal aspects of substance abuse; populations at risk

with regard to substance use disorders and co-occurring disorders; community resources offering screening, assessment, treatment, and follow up for affected person and family; recognition of substance use disorders, co-occurring disorders, and addiction and appropriate referral.; prevention.

++Coursework must include the following: Contemporary professional ethics and statutory, regulatory, and decisional law that delineate the scope of practice of marriage and family therapy; therapeutic, clinical, and practical considerations involved in the legal and ethical practice of marriage and family therapy, including, but not limited to, family law; current legal patterns and trends in the mental health professions; psychotherapist-patient privilege, confidentiality, the patient dangerous to self or others, and the treatment of minors with and without consent; recognition and exploration of the relationship between a practitioner's sense of self and human values and his or her professional behavior and ethics; differences in legal and ethical standards for different types of work settings; licensing law and licensing process.

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MFT Educational Guidelines

1. Standard Curriculum

- 1.01 The program will document that all students have completed, or will complete while in the program, all coursework and clinical requirements of the Standard Curriculum, or equivalents thereof. A transcript of completed requirements will be kept on file.
- 1.02 A master's degree program will offer to its students the entire Standard Curriculum as presented in these guidelines, or equivalents thereof.

10. Standard Curriculum Didactic Area Requirements

- 10.01 Programs are expected to infuse their curriculum with content that addresses issues related to diversity, power and privilege as they relate to age, culture, environment, ethnicity, gender, health/ability, nationality, race, religion, sexual orientation, spirituality, and socioeconomic status.
- 10.02 The Standard Curriculum will address appropriate collaboration with other disciplines.

101. Area I: Theoretical Knowledge

- 101.01 Area I content will address the historical development, theoretical and empirical foundations, and contemporary conceptual directions of the field of marriage and family therapy.
- 101.02 Area I content will enable students to conceptualize and distinguish the critical epistemological issues in the profession of marriage and family therapy.
- 101.03 Area I material will provide a comprehensive survey and substantive understanding of the major models of marriage, couple, and family therapy.

102. Area II: Clinical Knowledge

- 102.01 Area II content will address, from a relational/systemic perspective, psychopharmacology, physical health and illness, traditional psychodiagnostic categories, and the assessment, diagnosis and treatment of major mental health issues.
- 102.02 Area II content will address contemporary issues, which include but are not limited to gender, sexual functioning, sexual orientation, sex therapy, violence, addictions, and abuse, in the treatment of individuals, couples, and families from a relational/systemic perspective.
- 102.03 Area II material will address a wide variety of presenting clinical problems.

103. Area III: Individual Development and Family Relations

103.01 Area III will include content on individual and family development across the lifespan.

104. Area IV: Professional Identity and Ethics

104.01 Area IV content will include professional identity, including professional socialization, scope of practice, professional organizations, licensure, and certification.

104.02 Area IV content will focus on ethical issues related to the profession of marriage and family therapy and the practice of individual, couple, and family therapy. A generic course in ethics does not meet this standard.

104.03 Area IV will address the AAMFT Code of Ethics, confidentiality issues, the legal responsibilities and liabilities of clinical practice and research, family law, record keeping, reimbursement, the business aspects of practice, and familiarity with regional and federal laws as they relate to the practice of individual, couple and family therapy.

105. Area V: Research

105.01 Area V content will include significant material on research in couple and family therapy.

105.02 Area V content will focus on research methodology, data analysis and the evaluation of research.

105.03 Area V content will include quantitative and qualitative research and its methods.

106. Area VI: Additional Learning

106.01 Additional learning will augment students' specialized interest and background in individual, couple, and family therapy. Additional courses may be chosen from coursework offered in a variety of disciplines.

20. Standard Curriculum Clinical Experience Requirements**201. Contact Hours**

201.01 Direct client contact is defined as face-to-face (therapist and client) therapy with individuals, couples, families, and/or groups from a relational perspective. Assessments may be counted as direct client contact if they are face-to-face processes that are more than clerical in nature and focus. Psychoeducation may be counted as direct client contact.

201.02 Traditionally, programs have required students to complete 500 supervised, direct client contact hours. The program may choose to uphold the 500 client contact

hour standard. Alternatively, the program may demonstrate that graduating students achieve a competency level equivalent to the 500 client contact hours. The program must define this competency level and document how students are evaluated and achieve the defined level. The program demonstrates a consistent set of evaluation criteria for achieving the defined level of competency across all students.

- 201.03 At least 250 hours (of the required 500 hours of client contact or alternative procedures outlined in 201.02) will occur in clinical facilities for which the program has broad, but not necessarily sole, responsibility for supervision and clinical practice of individual, couple, and family therapy as carried out by the program. The facilities will offer services to the public.
- 201.04 At least 250 (of the required 500 hours of client contact or alternative procedures outlined in 201.02) will be with couples or families present in the therapy room. If the program chooses to require less than 250 relational hours it must use the alternative procedures outlined in 201.02.
- 201.05 Published promotional materials will inform applicants that they must complete 500 direct client contact hours or apply alternative procedures outlined in 201.02.
- 201.06 The program will publish and adhere to criteria for determining when students are prepared for clinical practice.
- 201.07 Students will work with a wide variety of people, relationships, and problems. Specifically, the program will demonstrate that students have the opportunity to work with clients who are diverse in terms of age, culture, physical ability, ethnicity, family composition, gender, race, religion, sexual orientation and socioeconomic status.

202. Supervision

- 202.01 Supervision of students, when conducted in fulfillment of clinical requirements of these standards, will be face-to-face or live supervision conducted by AAMFT Approved Supervisors, Supervisor Candidates, or the equivalent.
- 202.02 A program may designate a person who is not an AAMFT Approved Supervisor as equivalent to that status, for purposes of supervision if the person is an AAMFT Supervisor Candidate. A program may designate a person who is not an AAMFT Approved Supervisor or Supervisor Candidate as equivalent to an AAMFT Approved Supervisor for purposes of supervision, if (1) the program documents that the equivalent supervisor has demonstrated training, education and experience in marriage and family therapy. This may be demonstrated by state MFT credential, AAMFT clinical membership or other documentation of training, education and experience in individual, couple, and family therapy, and (2) demonstrated training, education and experience in individual, couple, and family therapy supervision. This may be demonstrated by state credential to provide MFT supervision, completing coursework or continuing education in MFT supervision, significant MFT supervised supervision experience, or more than 10

years experience supervising MFT students. (Equivalency criteria must include training in MFT supervision.)

- 202.03 Individual supervision is defined as supervision of one or two individuals.
- 202.04 Group supervision is required and will not exceed ten students per group.
- 202.05 Supervision will be distinguishable from psychotherapy and teaching.
- 202.06 Students will receive at least 100 hours of face-to-face supervision. If the program chooses to require less than 100 supervision hours it must use the alternative procedures outlined in 201.02.
- 202.07 Students will receive at least one hour of supervision for every five hours of direct client contact.
- 202.08 Supervision will occur at least once every week in which students have direct client contact hours.
- 202.09 Individual supervision will occur at least once every other week in which students have direct client contact hours.
- 202.10 Students will receive at least 50 hours of supervision based on direct observation, videotape, or audiotape. At least 25 hours of this supervision will be based on direct observation or videotape. If the program chooses to require less than 50/25 hours of supervision as outlined above it must use the alternative procedures outlined in 201.02.

3. Doctoral Programs

30. Didactic Requirements

- 30.01 Doctoral programs will have available and will offer the Standard Curriculum to all students who have not graduated from a master's program accredited by the Commission on Accreditation for Marriage and Family Therapy Education.

300. Areas VII, VIII, IX: Theory, Clinical Practice and Individual Development and Family Relations

- 300.01 Areas VII, VIII, IX are continuations of Areas I, II, and III, respectively, at a doctoral level of sophistication.

310. Area X: Clinical Supervision

- 310.01 Area X course content will be didactic and experiential, and will include current literature, research and major issues related to supervision in the profession of marriage and family therapy.

311. Area XI: Research

311.01 Course content in Area XI will provide comprehensive coverage of the critique and execution of couple, marriage, and family therapy research, statistics, research methodologies, and computer analysis and interpretation, in qualitative and quantitative research.

311.02 Students will take a minimum of one course with a specific focus on couple, marriage, and family therapy research.

312. Area XII: Additional Courses

312.01 Additional courses will augment students' specialized interests and backgrounds in couple, marriage, and family therapy. Additional courses may be chosen from coursework offered in a variety of disciplines.

313. Doctoral Dissertation

313.01 The doctoral dissertation topic will be in the field of marriage and family therapy or a closely related field (e.g., family studies, family science, human development, child development, gerontology) and include a comprehensive discussion of implications for the field of marriage and family therapy.

320. Clinical Experience

320.01 Before graduating from the doctoral program, doctoral students will have completed 1000 hours of direct client contact equivalent to that which they would be receiving from an accredited program. If the program chooses to require less than 1000 hours it must use the alternative procedures outlined in 201.02.

320.02 The program will have established criteria for accepting direct client contact and supervision hours accumulated prior to entering the doctoral program. These criteria are consistent with the requirements set forth in the Standard Curriculum.

330. Internship

330.01 There will be an internship, not to be counted toward the didactic course requirements.

330.02 The internship is to provide doctoral students with a supervised full-time experience of at least nine months duration, emphasizing relationally focused practice and/or administrative/academic/research.

330.03 The majority of requirements in Areas VII, VIII, IX, and XI will be completed before the beginning of the internship.

330.04 An AAMFT Approved Supervisor, State Approved Supervisor, or the equivalent will supervise the intern's clinical work.

340: Site Requirements

- 340.01 The program will maintain clear and ongoing relationships with all internship site(s), which will be specified in a written document.
- 340.02 Activities of each intern will be documented at the internship site(s). These records will be made available to the marriage and family therapy program.
- 340.03 The institution sponsoring the internship site(s) will have been in operation for at least two years.
- 340.04 Internship site(s) will provide adequate facilities and equipment for the intern to carry out designated responsibilities.
- 340.05 Mechanisms for student evaluation of internship site(s) and supervision, and site evaluation of the intern's performance, will be demonstrated.
- 340.06 Documentation of liability insurance for interns will be confirmed. Liability insurance may be provided by the internship site(s), the marriage and family therapy program, or the intern.
- 340.07 Internship site(s) will publish and adhere to policies prohibiting discrimination on the basis of age, culture, ethnicity, gender, physical ability, race, religion, sexual orientation, and socioeconomic status.
- 340.08 The internship supervisor will be available to the intern for at least one hour of supervision per week.
- 340.09 The internship supervisor will be clearly senior in experience to the intern.



**American Association for
Marriage and Family Therapy**

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Marriage and Family Therapy Core Competencies©

December, 2004

The marriage and family therapy (MFT) core competencies were developed through a collaborative effort of the American Association for Marriage and Family Therapy (AAMFT) and interested stakeholders. In addition to defining the domains of knowledge and requisite skills in each domain that comprise the practice of marriage and family therapy, the ultimate goal of the core competencies is to improve the quality of services delivered by marriage and family therapists (MFTs). Consequently, the competencies described herein represent the minimum that MFTs licensed to practice independently must possess.

Creating competencies for MFTs and improving the quality of mental health services was considered in the context of the broader behavioral health system. The AAMFT relied on three important reports to provide the framework within which the competencies would be developed: *Mental Health: A Report of the Surgeon General*; the President's New Freedom Commission on Mental Health's *Achieving the Promise: Transforming Mental Health Care in America*; and the Institute of Medicine's *Crossing the Quality Chasm*. The AAMFT mapped the competencies to critical elements of these reports, including IOM's 6 Core Values that are seen as the foundation for a better health care system: 1) Safe, 2) Person-Centered, 3) Efficient, 4) Effective, 5) Timely, and 6) Equitable. The committee also considered how social, political, historical, and economic forces affect individual and relational problems and decisions about seeking and obtaining treatment.

The core competencies were developed for educators, trainers, regulators, researchers, policymakers, and the public. The current version has 128 competencies; however, these are likely to be modified as the field of family therapy develops and as the needs of clients change. The competencies will be reviewed and modified at regular intervals to ensure the competencies are reflective of the current and best practice of MFT.

The core competencies are organized around 6 primary domains and 5 secondary domains. The primary domains are:

- 1) **Admission to Treatment** – All interactions between clients and therapist up to the point when a therapeutic contract is established.
- 2) **Clinical Assessment and Diagnosis** – Activities focused on the identification of the issues to be addressed in therapy.
- 3) **Treatment Planning and Case Management** – All activities focused on directing the course of therapy and extra-therapeutic activities.
- 4) **Therapeutic Interventions** – All activities designed to ameliorate the clinical issues identified.
- 5) **Legal Issues, Ethics, and Standards** – All aspects of therapy that involve statutes, regulations, principles, values, and mores of MFTs.
- 6) **Research and Program Evaluation** – All aspects of therapy that involve the systematic analysis of therapy and how it is conducted effectively.

The subsidiary domains are focused on the types of skills or knowledge that MFTs must develop. These are: a) Conceptual, b) Perceptual, c) Executive, d) Evaluative, and e) Professional.

Although not expressly written for each competency, the stem "Marriage and family therapists..." should begin each. Additionally, the term "client" is used broadly and refers to the therapeutic system of the client/s served, which includes, but is not limited to individuals, couples, families, and others with a vested interest in helping clients change. Similarly, the term "family" is used generically to refer to all people identified by clients as part of their "family system," this would include fictive kin and relationships of choice. Finally, the core competencies encompass behaviors, skills, attitudes, and policies that promote awareness, acceptance, and respect for differences, enhance services that meet the needs of diverse populations, and promote resiliency and recovery.

Domain 1: Admission to Treatment

Number	Subdomain	Competence
1.1.1	Conceptual	Understand systems concepts, theories, and techniques that are foundational to the practice of marriage and family therapy
1.1.2	Conceptual	Understand theories and techniques of individual, marital, couple, family, and group psychotherapy
1.1.3	Conceptual	Understand the behavioral health care delivery system, its impact on the services provided, and the barriers and disparities in the system.
1.1.4	Conceptual	Understand the risks and benefits of individual, marital, couple, family, and group psychotherapy.
1.2.1	Perceptual	Recognize contextual and systemic dynamics (e.g., gender, age, socioeconomic status, culture/race/ethnicity, sexual orientation, spirituality, religion, larger systems, social context).
1.2.2	Perceptual	Consider health status, mental status, other therapy, and other systems involved in the clients' lives (e.g., courts, social services).
1.2.3	Perceptual	Recognize issues that might suggest referral for specialized evaluation, assessment, or care.
1.3.1	Executive	Gather and review intake information, giving balanced attention to individual, family, community, cultural, and contextual factors.
1.3.2	Executive	Determine who should attend therapy and in what configuration (e.g., individual, couple, family, extrafamilial resources).
1.3.3	Executive	Facilitate therapeutic involvement of all necessary participants in treatment.
1.3.4	Executive	Explain practice setting rules, fees, rights, and responsibilities of each party, including privacy, confidentiality policies, and duty to care to client or legal guardian.
1.3.5	Executive	Obtain consent to treatment from all responsible persons.
1.3.6	Executive	Establish and maintain appropriate and productive therapeutic alliances with the clients.
1.3.7	Executive	Solicit and use client feedback throughout the therapeutic process.
1.3.8	Executive	Develop and maintain collaborative working relationships with referral resources, other practitioners involved in the clients' care, and payers.
1.3.9	Executive	Manage session interactions with individuals, couples, families, and groups.
1.4.1	Evaluative	Evaluate case for appropriateness for treatment within professional scope of practice and competence.
1.5.1	Professional	Understand the legal requirements and limitations for working with vulnerable populations (e.g., minors).
1.5.2	Professional	Complete case documentation in a timely manner and in accordance with relevant laws and policies.
1.5.3	Professional	Develop, establish, and maintain policies for fees, payment, record keeping, and confidentiality.

Domain 2: Clinical Assessment and Diagnosis

Number	Subdomain	Competence
2.1.1	Conceptual	Understand principles of human development; human sexuality; gender development; psychopathology; psychopharmacology; couple processes; and family development and processes (e.g., family, relational, and system dynamics).
2.1.2	Conceptual	Understand the major behavioral health disorders, including the epidemiology, etiology, phenomenology, effective treatments, course, and prognosis.
2.1.3	Conceptual	Understand the clinical needs and implications of persons with comorbid disorders (e.g., substance abuse and mental health; heart disease and depression).
2.1.4	Conceptual	Comprehend individual, marital, couple and family assessment instruments appropriate

Number	Subdomain	Competence
		to presenting problem, practice setting, and cultural context.
2.1.5	Conceptual	Understand the current models for assessment and diagnosis of mental health disorders, substance use disorders, and relational functioning.
2.1.6	Conceptual	Understand the strengths and limitations of the models of assessment and diagnosis, especially as they relate to different cultural, economic, and ethnic groups.
2.1.7	Conceptual	Understand the concepts of reliability and validity, their relationship to assessment instruments, and how they influence therapeutic decision making.
2.2.1	Perceptual	Assess each clients' engagement in the change process.
2.2.2	Perceptual	Systematically integrate client reports, observations of client behaviors, client relationship patterns, reports from other professionals, results from testing procedures, and interactions with client to guide the assessment process.
2.2.3	Perceptual	Develop hypotheses regarding relationship patterns, their bearing on the presenting problem, and the influence of extra-therapeutic factors on client systems.
2.2.4	Perceptual	Consider the influence of treatment on extra-therapeutic relationships.
2.2.5	Perceptual	Consider physical/organic problems that can cause or exacerbate emotional/interpersonal symptoms.
2.3.1	Executive	Diagnose and assess client behavioral and relational health problems systemically and contextually.
2.3.2	Executive	Provide assessments and deliver developmentally appropriate services to clients, such as children, adolescents, elders, and persons with special needs.
2.3.3	Executive	Apply effective and systemic interviewing techniques and strategies.
2.3.4	Executive	Administer and interpret results of assessment instruments.
2.3.5	Executive	Screen and develop adequate safety plans for substance abuse, child and elder maltreatment, domestic violence, physical violence, suicide potential, and dangerousness to self and others.
2.3.6	Executive	Assess family history and dynamics using a genogram or other assessment instruments.
2.3.7	Executive	Elicit a relevant and accurate biopsychosocial history to understand the context of the clients' problems.
2.3.8	Executive	Identify clients' strengths, resilience, and resources.
2.3.9	Executive	Elucidate presenting problem from the perspective of each member of the therapeutic system.
2.4.1	Evaluative	Evaluate assessment methods for relevance to clients' needs.
2.4.2	Evaluative	Assess ability to view issues and therapeutic processes systemically.
2.4.3	Evaluative	Evaluate the accuracy and cultural relevance of behavioral health and relational diagnoses.
2.4.4	Evaluative	Assess the therapist-client agreement of therapeutic goals and diagnosis.
2.5.1	Professional	Utilize consultation and supervision effectively.

Domain 3: Treatment Planning and Case Management

Number	Subdomain	Competence
3.1.1	Conceptual	Know which models, modalities, and/or techniques are most effective for presenting problems.
3.1.2	Conceptual	Understand the liabilities incurred when billing third parties, the codes necessary for reimbursement, and how to use them correctly.
3.1.3	Conceptual	Understand the effects that psychotropic and other medications have on clients and the treatment process.
3.1.4	Conceptual	Understand recovery-oriented behavioral health services (e.g., self-help groups, 12-step

Number	Subdomain	Competence
		programs, peer-to-peer services, supported employment).
3.2.1	Perceptual	Integrate client feedback, assessment, contextual information, and diagnosis with treatment goals and plan.
3.3.1	Executive	Develop, with client input, measurable outcomes, treatment goals, treatment plans, and after-care plans with clients utilizing a systemic perspective.
3.3.2	Executive	Prioritize treatment goals.
3.3.3	Executive	Develop a clear plan of how sessions will be conducted.
3.3.4	Executive	Structure treatment to meet clients' needs and to facilitate systemic change.
3.3.5	Executive	Manage progression of therapy toward treatment goals.
3.3.6	Executive	Manage risks, crises, and emergencies.
3.3.7	Executive	Work collaboratively with other stakeholders, including family members, other significant persons, and professionals not present.
3.3.8	Executive	Assist clients in obtaining needed care while navigating complex systems of care.
3.3.9	Executive	Develop termination and aftercare plans.
3.4.1	Evaluative	Evaluate progress of sessions toward treatment goals.
3.4.2	Evaluative	Recognize when treatment goals and plan require modification.
3.4.3	Evaluative	Evaluate level of risks, management of risks, crises, and emergencies.
3.4.4	Evaluative	Assess session process for compliance with policies and procedures of practice setting.
3.4.5	Professional	Monitor personal reactions to clients and treatment process, especially in terms of therapeutic behavior, relationship with clients, process for explaining procedures, and outcomes.
3.5.1	Professional	Advocate with clients in obtaining quality care, appropriate resources, and services in their community.
3.5.2	Professional	Participate in case-related forensic and legal processes.
3.5.3	Professional	Write plans and complete other case documentation in accordance with practice setting policies, professional standards, and state/provincial laws.
3.5.4	Professional	Utilize time management skills in therapy sessions and other professional meetings.

Domain 4: Therapeutic Interventions

Number	Subdomain	Competence
4.1.1	Conceptual	Comprehend a variety of individual and systemic therapeutic models and their application, including evidence-based therapies and culturally sensitive approaches.
4.1.2	Conceptual	Recognize strengths, limitations, and contraindications of specific therapy models, including the risk of harm associated with models that incorporate assumptions of family dysfunction, pathogenesis, or cultural deficit.
4.2.1	Perceptual	Recognize how different techniques may impact the treatment process.
4.2.2	Perceptual	Distinguish differences between content and process issues, their role in therapy, and their potential impact on therapeutic outcomes.
4.3.1	Executive	Match treatment modalities and techniques to clients' needs, goals, and values.
4.3.2	Executive	Deliver interventions in a way that is sensitive to special needs of clients (e.g., gender, age, socioeconomic status, culture/race/ethnicity, sexual orientation, disability, personal history, larger systems issues of the client).
4.3.3	Executive	Reframe problems and recursive interaction patterns.
4.3.4	Executive	Generate relational questions and reflexive comments in the therapy room.
4.3.5	Executive	Engage each family member in the treatment process as appropriate.
4.3.6	Executive	Facilitate clients developing and integrating solutions to problems.

Number	Subdomain	Competence
4.3.7	Executive	Defuse intense and chaotic situations to enhance the safety of all participants.
4.3.8	Executive	Empower clients and their relational systems to establish effective relationships with each other and larger systems.
4.3.9	Executive	Provide psychoeducation to families whose members have serious mental illness or other disorders.
4.3.10	Executive	Modify interventions that are not working to better fit treatment goals.
4.3.11	Executive	Move to constructive termination when treatment goals have been accomplished.
4.3.12	Executive	Integrate supervisor/team communications into treatment.
4.4.1	Evaluative	Evaluate interventions for consistency, congruency with model of therapy and theory of change, cultural and contextual relevance, and goals of the treatment plan.
4.4.2	Evaluative	Evaluate ability to deliver interventions effectively.
4.4.3	Evaluative	Evaluate treatment outcomes as treatment progresses.
4.4.4	Evaluative	Evaluate clients' reactions or responses to interventions.
4.4.5	Evaluative	Evaluate clients' outcomes for the need to continue, refer, or terminate therapy.
4.4.6	Evaluative	Evaluate reactions to the treatment process (e.g., transference, family of origin, current stress level, current life situation, cultural context) and their impact on effective intervention and clinical outcomes.
4.5.1	Professional	Respect multiple perspectives (e.g., clients, team, supervisor, practitioners from other disciplines who are involved in the case).
4.5.2	Professional	Set appropriate boundaries, manage issues of triangulation, and develop collaborative working relationships.
4.5.3	Professional	Articulate rationales for interventions related to treatment goals and plan, assessment information, and systemic understanding of clients' context and dynamics.

Domain 5: Legal Issues, Ethics, and Standards

Number	Subdomain	Competence
5.1.1	Conceptual	Know state, federal, and provincial laws and regulations that apply to the practice of marriage and family therapy.
5.1.2	Conceptual	Know professional ethics and standards of practice that apply to the practice of marriage and family therapy.
5.1.3	Conceptual	Know policies and procedures of the practice setting.
5.1.4	Conceptual	Understand the process of making an ethical decision.
5.2.1	Perceptual	Recognize situations in which ethics, laws, professional liability, and standards of practice apply.
5.2.2	Perceptual	Recognize ethical dilemmas in practice setting.
5.2.3	Perceptual	Recognize when a legal consultation is necessary.
5.2.4	Perceptual	Recognize when clinical supervision or consultation is necessary.
5.3.1	Executive	Monitor issues related to ethics, laws, regulations, and professional standards.
5.3.2	Executive	Develop and assess policies, procedures, and forms for consistency with standards of practice to protect client confidentiality and to comply with relevant laws and regulations.
5.3.3	Executive	Inform clients and legal guardian of limitations to confidentiality and parameters of mandatory reporting.
5.3.4	Executive	Develop safety plans for clients who present with potential self-harm, suicide, abuse, or violence.
5.3.5	Executive	Take appropriate action when ethical and legal dilemmas emerge.
5.3.6	Executive	Report information to appropriate authorities as required by law.

Number	Subdomain	Competence
5.3.7	Executive	Practice within defined scope of practice and competence.
5.3.8	Executive	Obtain knowledge of advances and theory regarding effective clinical practice.
5.3.9	Executive	Obtain license(s) and specialty credentials.
5.3.10	Executive	Implement a personal program to maintain professional competence.
5.4.1	Evaluative	Evaluate activities related to ethics, legal issues, and practice standards.
5.4.2	Evaluative	Monitor attitudes, personal well-being, personal issues, and personal problems to insure they do not impact the therapy process adversely or create vulnerability for misconduct.
5.5.1	Professional	Maintain client records with timely and accurate notes.
5.5.2	Professional	Consult with peers and/or supervisors if personal issues, attitudes, or beliefs threaten to adversely impact clinical work.
5.5.3	Professional	Pursue professional development through self-supervision, collegial consultation, professional reading, and continuing educational activities.
5.5.4	Professional	Bill clients and third-party payers in accordance with professional ethics, relevant laws and polices, and seek reimbursement only for covered services.

Domain 6: Research and Program Evaluation

Number	Subdomain	Competence
6.1.1	Conceptual	Know the extant MFT literature, research, and evidence-based practice.
6.1.2	Conceptual	Understand research and program evaluation methodologies, both quantitative and qualitative, relevant to MFT and mental health services.
6.1.3	Conceptual	Understand the legal, ethical, and contextual issues involved in the conduct of clinical research and program evaluation.
6.2.1	Perceptual	Recognize opportunities for therapists and clients to participate in clinical research.
6.3.1	Executive	Read current MFT and other professional literature.
6.3.2	Executive	Use current MFT and other research to inform clinical practice.
6.3.3	Executive	Critique professional research and assess the quality of research studies and program evaluation in the literature.
6.3.4	Executive	Determine the effectiveness of clinical practice and techniques.
6.4.1	Evaluative	Evaluate knowledge of current clinical literature and its application.
6.5.1	Professional	Contribute to the development of new knowledge.

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To: Committee Members

Date: April 23, 2013

From: Kim Madsen
Executive Officer

Telephone: (916) 574-7841

Subject: Comparison of Licensed Professional Clinical Counselor Educational Requirements in California with Other States

The 2011 American Counseling Association statistics reflect that there are nearly 121,000 Licensed Professional Clinical Counselors (LPCC) in the United States. California has over 300 licensees since its 2011 implementation of the LPCC program. Professional licensure requirements vary between states. For example, California requires passage of a jurisprudence examination developed by the Board of Behavioral Sciences (Board) and passage of the National Clinical Mental Health Counselor Examination (NCMHCE). All the other states require passage of the NCMHCE and may include a second examination.

All states require the LPCC degree programs to be accredited by an accreditation agency or approved by another entity. One method that a degree program may receive accreditation is through regional accreditation agencies (e.g. Western Association of Schools and Colleges [WASC]).

California accepts graduate degrees from a school, college, or university that is accredited by WASC or its equivalent regional accreditation association. Graduate degrees from schools, colleges, or universities approved by the California Bureau for Private Postsecondary Education are also accepted.

Accreditation from an entity that is specific to a course of study is another method. The Council for Accreditation of Counseling and Related Educational Programs (CACREP) is an accrediting agency that is specific to professional counseling education.

CACREP establishes eight core curriculum requirements; professional orientation and ethical practice, social and cultural diversity, human growth and development, career development, helping relationships, group work, assessment, and research and program evaluation. These core curriculum requirements are present in all CACREP counseling programs.

In addition to the eight core curriculum requirements, students seeking a clinical mental health counseling degree must also demonstrate the professional knowledge, skills, and practices necessary to address a wide variety of circumstances within the clinical mental health counseling context.

Included for the committee's review is a chart comparing LPCC Educational Requirements in California, Florida, Texas, and Washington and information regarding CACREP accreditation.

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	California	Florida	Texas	Washington
LPCC Licensees (2011)	322 (as of 2/2012)	7,784	14,595	4,520
Degree Req.	Masters/Doctoral Degree in counseling or psychotherapy 60 semester or 90 qtr. units ***	Master's degree in mental health counseling CACREP accreditation 60 semester hours or 80 qtr. hours	Master's degree in counseling 48 semester hours from an accredited school/university	Masters/Doctoral in mental health counseling or a behavioral science master's or doctoral degree in a field relating to mental health counseling
Required Coursework	<ul style="list-style-type: none"> -Counseling & psychotherapeutic theories & techniques** -Human growth & development -Career development theories & techniques -Group counseling theories & techniques -Assessment, appraisal, & testing -Multicultural counseling theories & techniques -Principles of diagnostic process -Research & evaluation -Professional orientation, ethics, & law in counseling including California law & ethics for LPCCs. Psychopharmacology -Addictions in counseling including substance abuse, co-occurring disorders, and addiction -Crisis or trauma counseling Advanced counseling & psychotherapeutic theories & techniques 	<ul style="list-style-type: none"> -Counseling theories & practice -Human growth & development -Diagnosis & treatment of psychopathology -Human Sexuality -Group theories & practice -Individual evaluation & assessment -Career & lifestyle assessment -Research & program evaluation -Social & cultural foundations -Counseling in community settings -Substance abuse -Legal, ethical, & professional standards issues 	<ul style="list-style-type: none"> -Human growth & development -Abnormal human behavior -Appraisal or assessment techniques -Counseling theories -Counseling methods or techniques -Research -Life style & career development -Social, cultural, & family issues -Professional orientation 	<p>Core of study must include seven content areas from the list in subsections 1-17; five of which must be from content areas in subsections 1-9.</p> <ul style="list-style-type: none"> -Assessment/Diagnosis -Ethics/Law -Counseling individuals -Counseling groups -Counseling couples & families -Developmental psychology -Psychopathology/abnormal psychology -Research & evaluation -Career development -Multicultural concerns -Substance/chemical abuse -Physiological psychology -Organizational psychology -Mental health consultation -Developmentally disabled persons -Abusive relationships -Chronically mentally ill
Additional requirements	None	<ul style="list-style-type: none"> -Eight-hour laws and rules course from a board approved provider -Two-hour prevention of medical errors course from a board approved provider. -Three hour HIV/AIDS course -Two hour domestic violence course 	None	Four hours HIV/AIDS training

<p>Experience required</p>	<p>2 years minimum - 3000 post degree hours of supervised experience</p> <p>1750 hours direct counseling individuals and groups</p>	<p>2 yrs. post degree exp under the supervision of a licensed mental health counselor or equivalent</p> <p>at least 1500 hours providing psychotherapy face to face with clients</p>	<p>18 months minimum</p> <p>3000 hours The experience must have consisted primarily of the provision of direct counseling services within a professional relationship to individuals or groups by using a combination of mental health and human development principles, methods, and techniques to achieve the mental, emotional, physical, social, moral, educational, spiritual, or career-related development and adjustment of the client throughout the client's life.</p>	<p>Minimum 36 months of full time counseling or 3000 postgraduate mental health counseling (supervised)</p> <p>1200 hours must be direct counseling with individuals, families, couples, or groups.</p>
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**** Coursework must include the following:** Counseling and psychotherapeutic theories and techniques, including the counseling process in a multicultural society, an orientation to wellness and prevention, counseling theories to assist in selection of appropriate counseling interventions, models of counseling consistent with current professional research and practice, development of a personal model of counseling, and multidisciplinary responses to crises, emergencies, and disasters.

***** Coursework shall include instruction in all of the following:**

- ✓ The understanding of human behavior within the social context of socioeconomic status and other contextual issues affecting social position.
- ✓ The understanding of human behavior within the social context of a representative variety of the cultures found within California.
- ✓ Cultural competency and sensitivity, including a familiarity with the racial, cultural, linguistic, and ethnic backgrounds of persons living in California.
- ✓ An understanding of the effects of socioeconomic status on treatment and available resources.
- ✓ Multicultural development and cross-cultural interaction, including experiences of race, ethnicity, class, spirituality, sexual orientation, gender, and disability and their incorporation into the psychotherapeutic process.
- ✓ Case management, systems of care for the severely mentally ill, public and private services for the severely mentally ill, community resources for victims of abuse, disaster and trauma response, advocacy for the severely mentally ill, and collaborative treatment. The instruction required in this paragraph may be provided either in credit level coursework or through extension programs offered by the degree-granting institution.
- ✓ Human sexuality, including the study of the physiological, psychological, and social cultural variables associated with sexual behavior, gender identity, and the assessment and treatment of psychosexual dysfunction.
- ✓ Spousal or partner abuse assessment, detection, intervention strategies, and same-gender abuse dynamics.
- ✓ Child abuse assessment and reporting.
- ✓ Aging and long-term care, including biological, social, cognitive, and psychological aspects of aging. This coursework shall include instruction on the assessment and reporting of, as well as treatment related to, elder and dependent adult abuse and neglect.

**Council for Accreditation of Counseling and Related Educational
Programs (CACREP)**



2009 Standards

INTRODUCTION

When a program applies for CACREP accreditation, it is evidence of an attitude and philosophy that program excellence is a fundamental goal. Accreditation entails assessing a program's quality and its continual enhancement through compliance with the CACREP standards. The accreditation process uses both self-assessment and peer assessment to determine how well professional standards are being met. Accredited status indicates to the public at large that a program has accepted and is fulfilling its commitment to educational quality.

The CACREP Standards are written to ensure that students develop a professional counselor identity and master the knowledge and skills to practice effectively. Graduates of CACREP-accredited programs are prepared for careers in mental health and human service agencies; educational institutions; private practice; and government, business, and industrial settings.

The CACREP Standards are not intended to discourage program innovation. Programs that wish to institute variations in how these standards are met may submit statements of rationale as part of their self-studies. CACREP will determine whether these variations accomplish the outcomes the standards are designed to ensure.

Note: Glossary definitions are integral to understanding and implementing the standards. These definitions will be used by the CACREP Board in making accreditation decisions.

SECTION I

THE LEARNING ENVIRONMENT: STRUCTURE AND EVALUATION

THE INSTITUTION

- A. The institutional media accurately describe the academic unit and each program offered, including admissions criteria, accreditation status, delivery systems used for instruction, minimum program requirements, matriculation requirements (e.g., examinations, academic-standing policies), and financial aid information.
- B. The academic unit is clearly identified as part of the institution's graduate degree offerings and has primary responsibility for the preparation of students in the program. If more than one academic unit has responsibility for the preparation of students in the program, the respective areas of responsibility and the relationships among and between them must be clearly documented.
- C. The institution is committed to providing the program with sufficient financial support to ensure continuity, quality, and effectiveness in all of the program's learning environments.
- D. The institution provides encouragement and support for program faculty to participate in professional organizations and activities (e.g., professional travel, research, and leadership positions).
- E. Access to learning resources is appropriate for scholarly inquiry, study, and research by program faculty and students.
- F. The institution provides technical support to program faculty and students to ensure access to information systems for learning, teaching, and research.
- G. The institution provides information to students in the program about personal counseling services provided by professionals other than program faculty and students.
- H. A counseling instruction environment (on or off campus) is conducive to modeling, demonstration, supervision, and training, and is available and used by the program. Administrative control of the counseling instruction environment ensures adequate and appropriate access by faculty and students. The counseling instruction environment includes all of the following:
 - 1. Settings for individual counseling, with assured privacy and sufficient space for appropriate equipment.

2. Settings for small-group work, with assured privacy and sufficient space for appropriate equipment.
3. Necessary and appropriate technologies and other observational capabilities that assist learning.
4. Procedures that ensure that the client's confidentiality and legal rights are protected.

THE ACADEMIC UNIT

- I. Entry-level degree programs in Career Counseling, School Counseling, and Student Affairs and College Counseling are comprised of approved graduate-level study with a minimum of 48 semester credit hours or 72 quarter credit hours required of all students. Entry-level degree programs in Addiction Counseling and in Marriage, Couple, and Family Counseling are comprised of approved graduate-level study with a minimum of 60 semester credit hours or 90 quarter credit hours required of all students.

Beginning July 1, 2009, all applicant programs in Clinical Mental Health Counseling must require a minimum of 54 semester credit hours or 81 quarter credit hours for all students. As of July 1, 2013, all applicant programs in Clinical Mental Health Counseling must require a minimum of 60 semester credit hours or 90 quarter credit hours for all students.

- J. The counselor education academic unit has made systematic efforts to attract, enroll, and retain a diverse group of students and to create and support an inclusive learning community.
- K. Admission decision recommendations are made by the academic unit's selection committee and include consideration of the following:
 1. Each applicant's potential success in forming effective and culturally relevant interpersonal relationships in individual and small-group contexts.
 2. Each applicant's aptitude for graduate-level study.
 3. Each applicant's career goals and their relevance to the program.
- L. Before or at the beginning of the first term of enrollment in the academic unit, the following should occur for all new students:
 1. A new student orientation is conducted.

2. A student handbook is disseminated that includes the following:
 - a. mission statement of the academic unit and program objectives;
 - b. information about appropriate professional organizations, opportunities for professional involvement, and activities potentially appropriate for students;
 - c. written endorsement policy explaining the procedures for recommending students for credentialing and employment;
 - d. student retention policy explaining procedures for student remediation and/or dismissal from the program; and
 - e. academic appeal policy.
- M. For any calendar year, the number of credit hours delivered by noncore faculty must not exceed the number of credit hours delivered by core faculty.
- N. Institutional data reflect that the ratio of full-time equivalent (FTE) students to FTE faculty should not exceed 10:1.
- O. Students have an assigned faculty advisor at all times during enrollment in the program. Students, with their faculty advisor, develop a planned program of study within the first 12 months of graduate study.
- P. The program faculty conducts a systematic developmental assessment of each student's progress throughout the program, including consideration of the student's academic performance, professional development, and personal development. Consistent with established institutional due process policy and the American Counseling Association's (ACA) code of ethics and other relevant codes of ethics and standards of practice, if evaluations indicate that a student is not appropriate for the program, faculty members help facilitate the student's transition out of the program and, if possible, into a more appropriate area of study.
- Q. The practicum and internship experiences are tutorial forms of instruction; therefore, when individual and/or triadic supervision is provided by program faculty, the ratio of six students to one faculty member is considered equivalent to the teaching of one 3-semester-hour course. Such a ratio is considered maximum per course.
- R. Group supervision for practicum and internship should not exceed 12 students.
- S. Programs provide evidence that students are covered by professional liability insurance while enrolled or participating in practicum, internship, or other field experiences.

- T. Opportunities for graduate assistantships for program students are commensurate with graduate assistantship opportunities in other clinical training programs in the institution.

FACULTY AND STAFF

- U. The academic unit has made systematic efforts to recruit, employ, and retain a diverse faculty.
- V. The teaching loads of program faculty members are consistent with those of the institution's other graduate level units that require intensive supervision as an integral part of professional preparation, and incorporate time for supervising student research using formulae consistent with institutional policies and practices.
- W. The academic unit has faculty resources of appropriate quality and sufficiency to achieve its mission and objectives. The academic unit has an identifiable core faculty who meet the following requirements:
1. Number at least three persons whose full-time academic appointments are in counselor education.
 2. Have earned doctoral degrees in counselor education and supervision, preferably from a CACREP-accredited program, or have been employed as full-time faculty members in a counselor education program for a minimum of one full academic year before July 1, 2013.
 3. Have relevant preparation and experience in the assigned program area.
 4. Identify with the counseling profession through memberships in professional organizations (i.e., ACA and/or its divisions), and through appropriate certifications and/or licenses pertinent to the profession.
 5. Engage in activities of the counseling profession and its professional organizations, including all of the following:
 - a. development/renewal (e.g., appropriate professional meetings, conventions, workshops, seminars);
 - b. research and scholarly activity; and
 - c. service and advocacy (e.g., program presentations, workshops, consultations, speeches, direct service).
 6. Have the authority to determine program curricula within the structure of the institution's policies and to establish the operational policies and procedures of the program.

- X. The academic unit has clearly defined administrative and curricular leadership that is sufficient for its effective operation. A faculty member may hold more than one of the following positions:
1. A faculty member is clearly designated as the academic unit leader for counselor education who
 - a. is responsible for the coordination of the counseling program(s);
 - b. receives inquiries regarding the overall academic unit;
 - c. makes recommendations regarding the development of and expenditures from the budget;
 - d. provides or delegates year-round leadership to the operation of the program(s); and
 - e. has release time from faculty member responsibilities to administer the academic unit.
 2. A faculty member or administrator is identified as the practicum and internship coordinator for the academic unit and/or program who
 - a. is responsible for the coordination of all practicum and internship experiences in each counselor education program for which accreditation is sought;
 - b. is the person to whom inquiries regarding practicum and internship experiences are referred; and
 - c. has clearly defined responsibilities.
- Y. The academic unit may employ noncore faculty (e.g., adjunct, affiliate, clinical) who support the mission, goals, and curriculum of the program and meet the following requirements:
1. Hold graduate degrees, preferably in counselor education from a CACREP-accredited program.
 2. Have relevant preparation and experience in the assigned area of teaching.
 3. Identify with the counseling profession through memberships in professional organizations, appropriate certifications, and/or licenses pertinent to the profession.
- Z. Clerical assistance is available to support faculty/program activities and is commensurate with that provided for similar graduate programs.

EVALUATION

- AA. Program faculty members engage in continuous systematic program evaluation indicating how the mission, objectives, and student learning outcomes are measured and met. The plan includes the following:
1. A review by program faculty of programs, curricular offerings, and characteristics of program applicants.
 2. Formal follow-up studies of program graduates to assess graduate perceptions and evaluations of major aspects of the program.
 3. Formal studies of site supervisors and program graduate employers that assess their perceptions and evaluations of major aspects of the program.
 4. Assessment of student learning and performance on professional identity, professional practice, and program area standards.
 5. Evidence of the use of findings to inform program modifications.
 6. Distribution of an official report that documents outcomes of the systematic program evaluation, with descriptions of any program modifications, to students currently in the program, program faculty, institutional administrators, personnel in cooperating agencies (e.g., employers, site supervisors), and the public.
- BB. Students have regular and systematic opportunities to formally evaluate faculty who provide curricular experiences and supervisors of clinical experiences.
- CC. Annual results of student course evaluations are provided to faculty.
- DD. Written faculty evaluation procedures are presented to program faculty and supervisors at the beginning of each evaluation period and whenever changes are made in the procedures.

SECTION II

PROFESSIONAL IDENTITY

FOUNDATION

- A. A comprehensive mission statement has been developed that brings the counseling program into focus and concisely describes the program's intent and purpose. The mission statement is publicly available and systematically reviewed.
- B. The program area objectives meet the following requirements:
 - 1. Reflect current knowledge and projected needs concerning counseling practice in a multicultural and pluralistic society.
 - 2. Reflect input from all persons involved in the conduct of the program, including program faculty, current and former students, and personnel in cooperating agencies.
 - 3. Are directly related to program activities.
 - 4. Are written so they can be evaluated.
- C. Students actively identify with the counseling profession by participating in professional organizations and by participating in seminars, workshops, or other activities that contribute to personal and professional growth.

KNOWLEDGE

- D. Syllabi are distributed at the beginning of each curricular experience, are available for review by all enrolled or prospective students, and include all of the following:
 - 1. Content areas.
 - 2. Knowledge and skill outcomes.
 - 3. Methods of instruction.
 - 4. Required text(s) and/or reading(s).
 - 5. Student performance evaluation criteria and procedures.
- E. Evidence exists of the use and infusion of current counseling-related research in teaching practice among program faculty and students.

- F. Evidence exists of the use and infusion of technology in program delivery and technology's impact on the counseling profession.
- G. Common core curricular experiences and demonstrated knowledge in each of the eight common core curricular areas are required of all students in the program.
 - 1. PROFESSIONAL ORIENTATION AND ETHICAL PRACTICE—studies that provide an understanding of all of the following aspects of professional functioning:
 - a. history and philosophy of the counseling profession;
 - b. professional roles, functions, and relationships with other human service providers, including strategies for interagency/interorganization collaboration and communications;
 - c. counselors' roles and responsibilities as members of an interdisciplinary emergency management response team during a local, regional, or national crisis, disaster or other trauma-causing event;
 - d. self-care strategies appropriate to the counselor role;
 - e. counseling supervision models, practices, and processes;
 - f. professional organizations, including membership benefits, activities, services to members, and current issues;
 - g. professional credentialing, including certification, licensure, and accreditation practices and standards, and the effects of public policy on these issues;
 - h. the role and process of the professional counselor advocating on behalf of the profession;
 - i. advocacy processes needed to address institutional and social barriers that impede access, equity, and success for clients; and
 - j. ethical standards of professional organizations and credentialing bodies, and applications of ethical and legal considerations in professional counseling.
 - 2. SOCIAL AND CULTURAL DIVERSITY—studies that provide an understanding of the cultural context of relationships, issues, and trends in a multicultural society, including all of the following:
 - a. multicultural and pluralistic trends, including characteristics and concerns within and among diverse groups nationally and internationally;

- b. attitudes, beliefs, understandings, and acculturative experiences, including specific experiential learning activities designed to foster students' understanding of self and culturally diverse clients;
 - c. theories of multicultural counseling, identity development, and social justice;
 - d. individual, couple, family, group, and community strategies for working with and advocating for diverse populations, including multicultural competencies;
 - e. counselors' roles in developing cultural self-awareness, promoting cultural social justice, advocacy and conflict resolution, and other culturally supported behaviors that promote optimal wellness and growth of the human spirit, mind, or body; and
 - f. counselors' roles in eliminating biases, prejudices, and processes of intentional and unintentional oppression and discrimination.
3. HUMAN GROWTH AND DEVELOPMENT—studies that provide an understanding of the nature and needs of persons at all developmental levels and in multicultural contexts, including all of the following:
- a. theories of individual and family development and transitions across the life span;
 - b. theories of learning and personality development, including current understandings about neurobiological behavior;
 - c. effects of crises, disasters, and other trauma-causing events on persons of all ages;
 - d. theories and models of individual, cultural, couple, family, and community resilience;
 - e. a general framework for understanding exceptional abilities and strategies for differentiated interventions;
 - f. human behavior, including an understanding of developmental crises, disability, psychopathology, and situational and environmental factors that affect both normal and abnormal behavior;
 - g. theories and etiology of addictions and addictive behaviors, including strategies for prevention, intervention, and treatment; and
 - h. theories for facilitating optimal development and wellness over the life span.

4. CAREER DEVELOPMENT—studies that provide an understanding of career development and related life factors, including all of the following:
 - a. career development theories and decision-making models;
 - b. career, avocational, educational, occupational and labor market information resources, and career information systems;
 - c. career development program planning, organization, implementation, administration, and evaluation;
 - d. interrelationships among and between work, family, and other life roles and factors, including the role of multicultural issues in career development;
 - e. career and educational planning, placement, follow-up, and evaluation;
 - f. assessment instruments and techniques relevant to career planning and decision making; and
 - g. career counseling processes, techniques, and resources, including those applicable to specific populations in a global economy.

5. HELPING RELATIONSHIPS—studies that provide an understanding of the counseling process in a multicultural society, including all of the following:
 - a. an orientation to wellness and prevention as desired counseling goals;
 - b. counselor characteristics and behaviors that influence helping processes;
 - c. essential interviewing and counseling skills;
 - d. counseling theories that provide the student with models to conceptualize client presentation and that help the student select appropriate counseling interventions. Students will be exposed to models of counseling that are consistent with current professional research and practice in the field so they begin to develop a personal model of counseling;
 - e. a systems perspective that provides an understanding of family and other systems theories and major models of family and related interventions;
 - f. a general framework for understanding and practicing consultation; and
 - g. crisis intervention and suicide prevention models, including the use of psychological first aid strategies.

6. **GROUP WORK**—studies that provide both theoretical and experiential understandings of group purpose, development, dynamics, theories, methods, skills, and other group approaches in a multicultural society, including all of the following:
 - a. principles of group dynamics, including group process components, developmental stage theories, group members' roles and behaviors, and therapeutic factors of group work;
 - b. group leadership or facilitation styles and approaches, including characteristics of various types of group leaders and leadership styles;
 - c. theories of group counseling, including commonalities, distinguishing characteristics, and pertinent research and literature;
 - d. group counseling methods, including group counselor orientations and behaviors, appropriate selection criteria and methods, and methods of evaluation of effectiveness; and
 - e. direct experiences in which students participate as group members in a small group activity, approved by the program, for a minimum of 10 clock hours over the course of one academic term.

7. **ASSESSMENT**—studies that provide an understanding of individual and group approaches to assessment and evaluation in a multicultural society, including all of the following:
 - a. historical perspectives concerning the nature and meaning of assessment;
 - b. basic concepts of standardized and nonstandardized testing and other assessment techniques, including norm-referenced and criterion-referenced assessment, environmental assessment, performance assessment, individual and group test and inventory methods, psychological testing, and behavioral observations;
 - c. statistical concepts, including scales of measurement, measures of central tendency, indices of variability, shapes and types of distributions, and correlations;
 - d. reliability (i.e., theory of measurement error, models of reliability, and the use of reliability information);
 - e. validity (i.e., evidence of validity, types of validity, and the relationship between reliability and validity);

- f. social and cultural factors related to the assessment and evaluation of individuals, groups, and specific populations; and
 - g. ethical strategies for selecting, administering, and interpreting assessment and evaluation instruments and techniques in counseling.
8. RESEARCH AND PROGRAM EVALUATION—studies that provide an understanding of research methods, statistical analysis, needs assessment, and program evaluation, including all of the following:
- a. the importance of research in advancing the counseling profession;
 - b. research methods such as qualitative, quantitative, single-case designs, action research, and outcome-based research;
 - c. statistical methods used in conducting research and program evaluation;
 - d. principles, models, and applications of needs assessment, program evaluation, and the use of findings to effect program modifications;
 - e. the use of research to inform evidence-based practice; and
 - f. ethical and culturally relevant strategies for interpreting and reporting the results of research and/or program evaluation studies.

SECTION III

PROFESSIONAL PRACTICE

Professional practice, which includes practicum and internship, provides for the application of theory and the development of counseling skills under supervision. These experiences will provide opportunities for students to counsel clients who represent the ethnic and demographic diversity of their community.

SUPERVISOR QUALIFICATIONS AND SUPPORT

- A. Program faculty members serving as individual or group practicum/internship supervisors must have the following:
 - 1. A doctoral degree and/or appropriate counseling preparation, preferably from a CACREP-accredited counselor education program.
 - 2. Relevant experience and appropriate credentials/licensure and/or demonstrated competence in counseling.
 - 3. Relevant supervision training and experience.

- B. Students serving as individual or group practicum student supervisors must meet the following requirements:
 - 1. Have completed a master's degree, as well as counseling practicum and internship experiences equivalent to those in a CACREP-accredited entry-level program.
 - 2. Have completed or are receiving preparation in counseling supervision.
 - 3. Be supervised by program faculty, with a faculty-student ratio that does not exceed 1:6.

- C. Site supervisors must have the following qualifications:
 - 1. A minimum of a master's degree in counseling or a related profession with equivalent qualifications, including appropriate certifications and/or licenses.
 - 2. A minimum of two years of pertinent professional experience in the program area in which the student is enrolled.
 - 3. Knowledge of the program's expectations, requirements, and evaluation procedures for students.
 - 4. Relevant training in counseling supervision.

- D. Orientation, assistance, consultation, and professional development opportunities are provided by counseling program faculty to site supervisors.
- E. Supervision contracts for each student are developed to define the roles and responsibilities of the faculty supervisor, site supervisor, and student during practicum and internship.

PRACTICUM

- F. Students must complete supervised practicum experiences that total a minimum of 100 clock hours over a minimum 10-week academic term. Each student's practicum includes all of the following:
 - 1. At least 40 clock hours of direct service with actual clients that contributes to the development of counseling skills.
 - 2. Weekly interaction that averages one hour per week of individual and/or triadic supervision throughout the practicum by a program faculty member, a student supervisor, or a site supervisor who is working in biweekly consultation with a program faculty member in accordance with the supervision contract.
 - 3. An average of 1 1/2 hours per week of group supervision that is provided on a regular schedule throughout the practicum by a program faculty member or a student supervisor.
 - 4. The development of program-appropriate audio/video recordings for use in supervision or live supervision of the student's interactions with clients.
 - 5. Evaluation of the student's counseling performance throughout the practicum, including documentation of a formal evaluation after the student completes the practicum.

INTERNSHIP

- G. The program requires completion of a supervised internship in the student's designated program area of 600 clock hours, begun after successful completion of the practicum. The internship is intended to reflect the comprehensive work experience of a professional counselor appropriate to the designated program area. Each student's internship includes all of the following:
 - 1. At least 240 clock hours of direct service, including experience leading groups.
 - 2. Weekly interaction that averages one hour per week of individual and/or triadic supervision throughout the internship, usually performed by the onsite supervisor.

3. An average of 1 1/2 hours per week of group supervision provided on a regular schedule throughout the internship and performed by a program faculty member.
4. The opportunity for the student to become familiar with a variety of professional activities and resources in addition to direct service (e.g., record keeping, assessment instruments, supervision, information and referral, in-service and staff meetings).
5. The opportunity for the student to develop program-appropriate audio/video recordings for use in supervision or to receive live supervision of his or her interactions with clients.
6. Evaluation of the student's counseling performance throughout the internship, including documentation of a formal evaluation after the student completes the internship by a program faculty member in consultation with the site supervisor.

ADDICTION COUNSELING

Students who are preparing to work as addiction counselors will demonstrate the professional knowledge, skills, and practices necessary to work in a wide range of addiction counseling, treatment, and prevention programs, as well as in a mental health counseling context. In addition to the common core curricular experiences outlined in Section II.G, programs must provide evidence that student learning has occurred in the following domains.

FOUNDATIONS

A. Knowledge

1. Understands the history, philosophy, and trends in addiction counseling.
2. Understands ethical and legal considerations specifically related to the practice of addiction counseling.
3. Knows the roles, functions, and settings of addiction counselors, as well as the relationship between addiction counselors and other mental health professionals.
4. Knows the professional organizations, competencies, preparation standards, and state credentials relevant to the practice of addiction counseling.
5. Understands a variety of models and theories of addiction related to substance use and other addictions.
6. Knows the behavioral, psychological, physical health, and social effects of psychoactive substances and addictive disorders on the user and significant others.
7. Recognizes the potential for addictive disorders to mimic a variety of medical and psychological disorders and the potential for medical and psychological disorders to coexist with addiction and substance abuse.
8. Understands factors that increase the likelihood for a person, community, or group to be at risk for or resilient to psychoactive substance use disorders.
9. Understands the impact of crises, disasters, and other trauma-causing events on persons with addictions.
10. Understands the operation of an emergency management system within addiction agencies and in the community.

B. Skills and Practice

1. Demonstrates the ability to apply and adhere to ethical and legal standards in addiction counseling.
2. Applies knowledge of substance abuse policy, financing, and regulatory processes to improve service delivery opportunities in addictions counseling.

COUNSELING, PREVENTION, AND INTERVENTION

C. Knowledge

1. Knows the principles of addiction education, prevention, intervention, and consultation.
2. Knows the models of treatment, prevention, recovery, relapse prevention, and continuing care for addictive disorders and related problems.
3. Recognizes the importance of family, social networks, and community systems in the treatment and recovery process.
4. Understands the role of spirituality in the addiction recovery process.
5. Knows a variety of helping strategies for reducing the negative effects of substance use, abuse, dependence, and addictive disorders.
6. Understands the principles and philosophies of addiction-related self-help programs.
7. Understands professional issues relevant to the practice of addiction counseling, including recognition, reimbursement, and right to practice.
8. Understands the principles of intervention for persons with addictions during times of crises, disasters, and other trauma-causing events.

D. Skills and Practices

1. Uses principles and practices of diagnosis, treatment, and referral of addiction and other mental and emotional disorders to initiate, maintain, and terminate counseling.
2. Individualizes helping strategies and treatment modalities to each client's stage of dependence, change, or recovery.
3. Provides appropriate counseling strategies when working with clients with addiction and co-occurring disorders.

4. Demonstrates the ability to use procedures for assessing and managing suicide risk.
5. Demonstrates the ability to provide counseling and education about addictive disorders to families and others who are affected by clients with addictions.
6. Demonstrates the ability to provide referral to self-help and other support groups when appropriate.
7. Demonstrates the ability to provide culturally relevant education programs that raise awareness and support addiction and substance abuse prevention and the recovery process.
8. Applies current record-keeping standards related to addiction counseling.
9. Demonstrates the ability to recognize his or her own limitations as an addiction counselor and to seek supervision or refer clients when appropriate.

DIVERSITY AND ADVOCACY

E. Knowledge

1. Understands how living in a multicultural society affects clients with addictions.
2. Understands current literature that outlines theories, approaches, strategies, and techniques shown to be effective when working with specific populations of clients with addictions.
3. Knows public policies on local, state, and national levels that affect the quality and accessibility of addiction services.
4. Understands effective strategies that support client advocacy and influence public policy and government relations on local, state, and national levels to enhance equity, increase funding, and promote programs that affect the practice of addiction counseling.

F. Skills and Practices

1. Maintains information regarding community resources to make appropriate referrals for clients with addictions.
2. Advocates for policies, programs, and/or services that are equitable and responsive to the unique needs of clients with addictions.

3. Demonstrates the ability to modify counseling systems, theories, techniques, and interventions to make them culturally appropriate for diverse populations of addiction clients.

ASSESSMENT

G. Knowledge

1. Understands various models and approaches to clinical evaluation for addictive disorders and their appropriate uses, including screening and assessment for addiction, diagnostic interviews, mental status examination, symptom inventories, and psychoeducational and personality assessments.
2. Knows specific assessment approaches for determining the appropriate level of care for addictive disorders and related problems.
3. Understands the assessment of biopsychosocial and spiritual history.
4. Understands basic classifications, indications, and contraindications of commonly prescribed psychopharmacological medications so that appropriate referrals can be made for medication evaluations and so that the side effects of such medications can be identified.

H. Skills and Practices

1. Selects appropriate comprehensive assessment interventions to assist in diagnosis and treatment planning, with an awareness of cultural bias in the implementation and interpretation of assessment protocols.
2. Demonstrates skill in conducting an intake interview, a mental status evaluation, a biopsychosocial history, a mental health history, and a psychological assessment for treatment planning and case management.
3. Screens for psychoactive substance toxicity, intoxication, and withdrawal symptoms; aggression or danger to others; potential for self-inflicted harm or suicide; and co-occurring mental and/or addictive disorders.
4. Helps clients identify the effects of addiction on life problems and the effects of continued harmful use or abuse.
5. Applies assessment of clients' addictive disorders to the stages of dependence, change, or recovery to determine the appropriate treatment modality and placement criteria in the continuum of care.

RESEARCH AND EVALUATION

I. Knowledge

1. Understands how to critically evaluate research relevant to the practice of addiction counseling.
2. Knows models of program evaluation for addiction counseling treatment and prevention programs.
3. Knows evidence-based treatments and basic strategies for evaluating counseling outcomes in addiction counseling.

J. Skills and Practice

1. Applies relevant research findings to inform the practice of addiction counseling.
2. Develops measurable outcomes for addiction counseling programs, interventions, and treatments.
3. Analyzes and uses data to increase the effectiveness of addiction counseling programs.

DIAGNOSIS

K. Knowledge

1. Knows the principles of the diagnostic process, including differential diagnosis, and the use of current diagnostic tools, such as the current edition of the *Diagnostic and Statistical Manual of Mental Disorders (DSM)*.
2. Knows the impact of co-occurring addictive disorders on medical and psychological disorders.
3. Understands the established diagnostic and clinical criteria for addictive disorders and describes treatment modalities and placement criteria within the continuum of care.
4. Understands the relevance and potential cultural biases of commonly used diagnostic tools as related to clients with addictive disorders in multicultural populations.

L. Skills and Practices

1. Demonstrates appropriate use of diagnostic tools, including the current edition of the *DSM*, to describe the symptoms and clinical presentation of clients with addictive disorders and mental and emotional impairments.
2. Is able to conceptualize an accurate multi-axial diagnosis of disorders presented by clients and communicate the differential diagnosis with collaborating professionals.

CAREER COUNSELING

Students who are preparing to work as career counselors will demonstrate the professional knowledge, skills, and practices necessary to help a person develop a life-career plan, with a focus on the definition of the worker role and how that role interacts with other life roles. In addition to the common core curricular experiences outlined in Section II.G, programs must provide evidence that student learning has occurred in the following domains.

FOUNDATIONS

A. Knowledge

1. Understands the history, philosophy, and trends in career counseling.
2. Understands ethical and legal considerations specifically related to the practice of career counseling.
3. Knows the roles, functions, and settings of career counselors, including private and public sector agencies and institutions.
4. Knows the professional organizations, competencies, preparation standards, and credentials relevant to the practice of career counseling and career development programs.
5. Understands a variety of models and theories of career counseling and career development.
6. Understands the policies, laws, and regulations relevant to career counseling and career development programs (e.g., Americans with Disabilities Act [ADA]).

B. Skills and Practices

1. Demonstrates the ability to apply and adhere to ethical and legal standards in career counseling.
2. Demonstrates an ability to explain career development as an integral subset of human development.

COUNSELING, PREVENTION, AND INTERVENTION

C. Knowledge

1. Understands techniques of career development, career counseling, career choice, career programming, and associated information delivery.

2. Understands theories, strategies, and models of consultation relevant to career counseling.
3. Understands the impact of crises, emergencies, and disasters on a person's career planning and development.

D. Skills and Practices

1. Demonstrates the ability to identify and understand clients' personal, family, and cultural characteristics related to their career development.
2. Demonstrates the ability to identify and understand clients' attitudes toward work and workers, and their career decision-making processes.
3. Demonstrates the ability to support and challenge clients in preparing for and initiating life-work role transitions, including the following:
 - a. locating, obtaining, and interpreting sources of relevant career information and experience;
 - b. acquiring skills needed to make life-work role transitions;
 - c. examining life-work roles, including the balance of work, leisure, family, and community in their careers.
4. Demonstrates the ability to help the client acquire a set of employability and job search skills.
5. Demonstrates the ability to establish and maintain a consulting relationship with persons who can influence a client's career.
6. Demonstrates the ability to recognize his or her own limitations as a career counselor and to seek supervision or refer clients when appropriate.

DIVERSITY AND ADVOCACY

E. Knowledge

1. Understands the role of multicultural issues in career counseling.
2. Understands the effects of racism, discrimination, power, privilege, and oppression in one's own life and career and those of the client.

3. Understands sociopolitical and socioeconomic forces that affect career opportunities of ethnic and cultural minorities, such as immigration, racism, and stereotyping.
4. Understands the changing roles and responsibilities of women and men, and the implications of these changes for employment, education, family, and leisure.
5. Understands the impact of globalization on life role(s), careers, and the workplace.

F. Skills and Practices

1. Demonstrates the ability to make accommodations for career needs unique to multicultural and diverse populations, such as the following:
 - a. identifying alternative approaches to meet clients' career planning needs;
 - b. designing and delivering career development programs and materials to hard-to-reach populations; and
 - c. demonstrating the ability to advocate for clients' career development and employment.
2. Demonstrates an ability to help staff members, professionals, and community members understand the unique needs/characteristics of multicultural and diverse populations with regard to career exploration, employment expectations, and economic/social issues.
3. Demonstrates the ability to explain, articulate, and advocate for the importance of career counseling, career development, life-work planning, and workforce planning to legislators, other policymakers and/or the general public.

ASSESSMENT

G. Knowledge

1. Understands assessment strategies for career development and career counseling programs.
2. Understands how to choose appropriate career assessment tools and techniques.
3. Understands bias in career assessment and interpretation (including cultural and linguistic characteristics of the client).

H. Skills and Practices

1. Demonstrates an ability to identify, select, and provide appropriate career assessment tools for clients.
2. Demonstrates an ability to administer, score, and appropriately report findings from career assessment instruments involving issues such as leisure interests, learning style, life roles, self-concept, career maturity, vocational identity, career indecision, work environment preference (e.g., work satisfaction), and other related life-career development issues.
3. Demonstrates an ability to assess conditions of the work environment (e.g. tasks, expectations, norms, qualities of the physical and social aspects of work environments).

RESEARCH AND EVALUATION

I. Knowledge

1. Understands how to critically evaluate research relevant to the practice of career counseling and career development.
2. Knows models of program evaluation for career counseling and development programs.
3. Knows basic strategies for evaluating counseling outcomes in career counseling.

J. Skills and Practices

1. Applies relevant research findings to inform the practice of career counseling.
2. Develops measurable outcomes for career counseling programs, activities, and experiences.
3. Analyzes and uses data to increase the effectiveness of career counseling programs and interventions.
4. Demonstrates the use of various types of research designs appropriate to career counseling and development research.

PROGRAM PROMOTION, MANAGEMENT, AND IMPLEMENTATION

K. Knowledge

1. Understands organizational theories, behavior, planning, communication, and management useful in implementing and administering career development programs.
2. Understands the resources applicable in job forecasting, planning, policy analysis, and resource allocation.
3. Understands leadership theories and approaches for evaluation and feedback, organizational change, decision making, and conflict resolution.

L. Skills and Practices

1. Participates in the planning and organization of a comprehensive career resource center.
2. Demonstrates the ability to implement career development programs in collaboration with others.
3. Demonstrates the ability to train others in the appropriate use of technology for career information and planning.
4. Demonstrates the ability to provide effective supervision to career development facilitators.
5. Demonstrates the ability to initiate and implement a marketing and public relations campaign on behalf of career development activities and services.

INFORMATION RESOURCES

M. Knowledge

1. Understands education, training, and employment trends, as well as labor market information and resources that provide information about job tasks, functions, salaries, requirements, and future outlooks related to broad occupational fields and individual occupations.
2. Understands the resources and skills clients use in life-work planning and management.
3. Knows the community/professional resources available to assist clients in career planning, including job search.

N. Skills and Practices

1. Demonstrates the ability to manage career, educational, and personal-social information resources.
2. Demonstrates the ability to evaluate and disseminate career and educational information.

CLINICAL MENTAL HEALTH COUNSELING

Students who are preparing to work as clinical mental health counselors will demonstrate the professional knowledge, skills, and practices necessary to address a wide variety of circumstances within the clinical mental health counseling context. In addition to the common core curricular experiences outlined in Section II.G, programs must provide evidence that student learning has occurred in the following domains:

FOUNDATIONS

A. Knowledge

1. Understands the history, philosophy, and trends in clinical mental health counseling.
2. Understands ethical and legal considerations specifically related to the practice of clinical mental health counseling.
3. Understands the roles and functions of clinical mental health counselors in various practice settings and the importance of relationships between counselors and other professionals, including interdisciplinary treatment teams.
4. Knows the professional organizations, preparation standards, and credentials relevant to the practice of clinical mental health counseling.
5. Understands a variety of models and theories related to clinical mental health counseling, including the methods, models, and principles of clinical supervision.
6. Recognizes the potential for substance use disorders to mimic and coexist with a variety of medical and psychological disorders.
7. Is aware of professional issues that affect clinical mental health counselors (e.g., core provider status, expert witness status, access to and practice privileges within managed care systems).
8. Understands the management of mental health services and programs, including areas such as administration, finance, and accountability.
9. Understands the impact of crises, disasters, and other trauma-causing events on people.
10. Understands the operation of an emergency management system within clinical mental health agencies and in the community.

B. Skills and Practices

1. Demonstrates the ability to apply and adhere to ethical and legal standards in clinical mental health counseling.
2. Applies knowledge of public mental health policy, financing, and regulatory processes to improve service delivery opportunities in clinical mental health counseling.

COUNSELING, PREVENTION, AND INTERVENTION

C. Knowledge

1. Describes the principles of mental health, including prevention, intervention, consultation, education, and advocacy, as well as the operation of programs and networks that promote mental health in a multicultural society.
2. Knows the etiology, the diagnostic process and nomenclature, treatment, referral, and prevention of mental and emotional disorders.
3. Knows the models, methods, and principles of program development and service delivery (e.g., support groups, peer facilitation training, parent education, self-help).
4. Knows the disease concept and etiology of addiction and co-occurring disorders.
5. Understands the range of mental health service delivery—such as inpatient, outpatient, partial treatment and aftercare—and the clinical mental health counseling services network.
6. Understands the principles of crisis intervention for people during crises, disasters, and other trauma-causing events.
7. Knows the principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning.
8. Recognizes the importance of family, social networks, and community systems in the treatment of mental and emotional disorders.
9. Understands professional issues relevant to the practice of clinical mental health counseling.

D. Skills and Practices

1. Uses the principles and practices of diagnosis, treatment, referral, and prevention of mental and emotional disorders to initiate, maintain, and terminate counseling.

2. Applies multicultural competencies to clinical mental health counseling involving case conceptualization, diagnosis, treatment, referral, and prevention of mental and emotional disorders.
3. Promotes optimal human development, wellness, and mental health through prevention, education, and advocacy activities.
4. Applies effective strategies to promote client understanding of and access to a variety of community resources.
5. Demonstrates appropriate use of culturally responsive individual, couple, family, group, and systems modalities for initiating, maintaining, and terminating counseling.
6. Demonstrates the ability to use procedures for assessing and managing suicide risk.
7. Applies current record-keeping standards related to clinical mental health counseling.
8. Provides appropriate counseling strategies when working with clients with addiction and co-occurring disorders.
9. Demonstrates the ability to recognize his or her own limitations as a clinical mental health counselor and to seek supervision or refer clients when appropriate.

DIVERSITY AND ADVOCACY

E. Knowledge

1. Understands how living in a multicultural society affects clients who are seeking clinical mental health counseling services.
2. Understands the effects of racism, discrimination, sexism, power, privilege, and oppression on one's own life and career and those of the client.
3. Understands current literature that outlines theories, approaches, strategies, and techniques shown to be effective when working with specific populations of clients with mental and emotional disorders.
4. Understands effective strategies to support client advocacy and influence public policy and government relations on local, state, and national levels to enhance equity, increase funding, and promote programs that affect the practice of clinical mental health counseling.

5. Understands the implications of concepts such as internalized oppression and institutional racism, as well as the historical and current political climate regarding immigration, poverty, and welfare.
6. Knows public policies on the local, state, and national levels that affect the quality and accessibility of mental health services.

F. Skills and Practices

1. Maintains information regarding community resources to make appropriate referrals.
2. Advocates for policies, programs, and services that are equitable and responsive to the unique needs of clients.
3. Demonstrates the ability to modify counseling systems, theories, techniques, and interventions to make them culturally appropriate for diverse populations.

ASSESSMENT

G. Knowledge

1. Knows the principles and models of assessment, case conceptualization, theories of human development, and concepts of normalcy and psychopathology leading to diagnoses and appropriate counseling treatment plans.
2. Understands various models and approaches to clinical evaluation and their appropriate uses, including diagnostic interviews, mental status examinations, symptom inventories, and psychoeducational and personality assessments.
3. Understands basic classifications, indications, and contraindications of commonly prescribed psychopharmacological medications so that appropriate referrals can be made for medication evaluations and so that the side effects of such medications can be identified.
4. Identifies standard screening and assessment instruments for substance use disorders and process addictions.

H. Skills and Practices

1. Selects appropriate comprehensive assessment interventions to assist in diagnosis and treatment planning, with an awareness of cultural bias in the implementation and interpretation of assessment protocols.

2. Demonstrates skill in conducting an intake interview, a mental status evaluation, a biopsychosocial history, a mental health history, and a psychological assessment for treatment planning and caseload management.
3. Screens for addiction, aggression, and danger to self and/or others, as well as co-occurring mental disorders.
4. Applies the assessment of a client's stage of dependence, change, or recovery to determine the appropriate treatment modality and placement criteria within the continuum of care.

RESEARCH AND EVALUATION

I. Knowledge

1. Understands how to critically evaluate research relevant to the practice of clinical mental health counseling.
2. Knows models of program evaluation for clinical mental health programs.
3. Knows evidence-based treatments and basic strategies for evaluating counseling outcomes in clinical mental health counseling.

J. Skills and Practices

1. Applies relevant research findings to inform the practice of clinical mental health counseling.
2. Develops measurable outcomes for clinical mental health counseling programs, interventions, and treatments.
3. Analyzes and uses data to increase the effectiveness of clinical mental health counseling interventions and programs.

DIAGNOSIS

K. Knowledge

1. Knows the principles of the diagnostic process, including differential diagnosis, and the use of current diagnostic tools, such as the current edition of the *Diagnostic and Statistical Manual of Mental Disorders (DSM)*.
2. Understands the established diagnostic criteria for mental and emotional disorders, and describes treatment modalities and placement criteria within the continuum of care.

3. Knows the impact of co-occurring substance use disorders on medical and psychological disorders.
4. Understands the relevance and potential biases of commonly used diagnostic tools with multicultural populations.
5. Understands appropriate use of diagnosis during a crisis, disaster, or other trauma-causing event.

L. Skills and Practices

1. Demonstrates appropriate use of diagnostic tools, including the current edition of the *DSM*, to describe the symptoms and clinical presentation of clients with mental and emotional impairments.
2. Is able to conceptualize an accurate multi-axial diagnosis of disorders presented by a client and discuss the differential diagnosis with collaborating professionals.
3. Differentiates between diagnosis and developmentally appropriate reactions during crises, disasters, and other trauma-causing events.

MARRIAGE, COUPLE, AND FAMILY COUNSELING

Students who are preparing to work as marriage, couple, and family counselors are expected to possess the knowledge, skills, and practices necessary to address a wide variety of issues in the context of relationships and families. In addition to the common core curricular experiences outlined in Section II.G, programs must provide evidence that student learning has occurred in the following domains:

FOUNDATIONS

A. Knowledge

1. Knows the history, philosophy, and trends in marriage, couple, and family counseling.
2. Understands the ethical and legal considerations specifically related to the practice of marriage, couple, and family counseling.
3. Knows the roles and functions of marriage, couple, and family counselors in a variety of practice settings and in relation to other helping professionals.
4. Knows the professional organizations, preparation standards, and credentials relevant to the practice of marriage, couple, and family counseling.
5. Understands a variety of models and theories of marriage, couple, and family counseling.
6. Understands family development and the life cycle, sociology of the family, family phenomenology, contemporary families, family wellness, families and culture, aging and family issues, family violence, and related family concerns.
7. Understands the impact of crises, disasters, and other trauma-causing events on marriages, couples, families, and households.

B. Skills and Practices

1. Demonstrates the ability to apply and adhere to ethical and legal standards in marriage, couple, and family counseling.
2. Demonstrates the ability to select models or techniques appropriate to couples' or families' presenting problems.

COUNSELING, PREVENTION, AND INTERVENTION

C. Knowledge

1. Understands issues of marriage, couple, and family life-cycle dynamics; healthy family functioning; family structures; and family of origin and intergenerational influences in a multicultural society.
2. Recognizes specific problems (e.g., addictive behaviors, domestic violence, suicide risk, immigration) and interventions that can enhance family functioning.
3. Understands human sexuality (e.g., gender, sexual functioning, sexual orientation) and its impact on family and couple functioning.
4. Understands professional issues relevant to the practice of marriage, couple, and family counseling, including recognition, reimbursement, and right to practice.

D. Skills/Practices

1. Uses preventive, developmental, and wellness approaches in working with individuals, couples, families, and other systems such as premarital counseling, parenting skills training, and relationship enhancement.
2. Uses systems theory to conceptualize issues in marriage, couple, and family counseling.
3. Uses systems theories to implement treatment, planning, and intervention strategies.
4. Demonstrates the ability to use procedures for assessing and managing suicide risk.
5. Adheres to confidentiality responsibilities, the legal responsibilities and liabilities of clinical practice and research, family law, record keeping, reimbursement, and the business aspects of practice.
6. Demonstrates the ability to recognize his or her own limitations as a marriage, couple, and family counselor and to seek supervision or refer clients when appropriate.

DIVERSITY AND ADVOCACY

E. Knowledge

1. Understands how living in a multicultural society affects couples and families.

2. Recognizes societal trends and treatment issues related to working with multicultural and diverse family systems (e.g., families in transition, dual-career couples, blended families, same-sex couples).
3. Understands current literature that outlines theories, approaches, strategies, and techniques shown to be effective in working with diverse family systems.
4. Understands the effects of racism, discrimination, sexism, power, privilege, and oppression on one's own life and that of the client(s).
5. Understands the effect of local, state, and national policies, programs, and services on diverse family systems.

F. Skills and Practices

1. Demonstrates the ability to provide effective services to clients in a multicultural society.
2. Maintains information regarding community resources to make appropriate referrals.
3. Advocates for policies, programs, and services that are equitable and responsive to the unique needs of couples and families.
4. Demonstrates the ability to modify counseling systems, theories, techniques, and interventions to make them culturally appropriate for diverse couples and families.

ASSESSMENT

G. Knowledge

1. Knows principles and models of assessment and case conceptualization from a systems perspective, including diagnostic interviews, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments.
2. Understands marriage, couple, and family assessment tools and techniques appropriate to clients' needs in a multicultural society.
3. Understands the impact of addiction, trauma, psychopharmacology, physical and mental health, wellness, and illness on marriage, couple, and family functioning.

H. Skills and Practices

1. Applies skills in interviewing, assessment, and case management for working with individuals, couples, and families from a system's perspective.
2. Uses systems assessment models and procedures to evaluate family functioning.
3. Determines which members of a family system should be involved in treatment.

RESEARCH AND EVALUATION

I. Knowledge

1. Understands how to critically evaluate research relevant to the practice of marriage, couple, and family counseling.
2. Knows models of program evaluation relevant for the practice of marriage, couple, and family counseling.
3. Knows evidence-based treatments and basic strategies for evaluating counseling outcomes in marriage, couple, and family counseling.

J. Skills/Practices

1. Applies relevant research findings to inform the practice of marriage, couple, and family counseling.
2. Develops measurable outcomes for marriage, couple, and family counseling programs, interventions, and treatments.
3. Analyzes and uses data to increase the effectiveness of marriage, couple, and family counseling interventions and programs.

SCHOOL COUNSELING

Students who are preparing to work as school counselors will demonstrate the professional knowledge, skills, and practices necessary to promote the academic, career, and personal/social development of all K–12 students. In addition to the common core curricular experiences outlined in Section II.G, programs must provide evidence that student learning has occurred in the following domains.

FOUNDATIONS

A. Knowledge

1. Knows history, philosophy, and trends in school counseling and educational systems.
2. Understands ethical and legal considerations specifically related to the practice of school counseling.
3. Knows roles, functions, settings, and professional identity of the school counselor in relation to the roles of other professional and support personnel in the school.
4. Knows professional organizations, preparation standards, and credentials that are relevant to the practice of school counseling.
5. Understands current models of school counseling programs (e.g., American School Counselor Association [ASCA] National Model) and their integral relationship to the total educational program.
6. Understands the effects of (a) atypical growth and development, (b) health and wellness, (c) language, (d) ability level, (e) multicultural issues, and (f) factors of resiliency on student learning and development.
7. Understands the operation of the school emergency management plan and the roles and responsibilities of the school counselor during crises, disasters, and other trauma-causing events.

B. Skills and Practices

1. Demonstrates the ability to apply and adhere to ethical and legal standards in school counseling.
2. Demonstrates the ability to articulate, model, and advocate for an appropriate school counselor identity and program.

COUNSELING, PREVENTION, AND INTERVENTION

C. Knowledge

1. Knows the theories and processes of effective counseling and wellness programs for individual students and groups of students.
2. Knows how to design, implement, manage, and evaluate programs to enhance the academic, career, and personal/social development of students.
3. Knows strategies for helping students identify strengths and cope with environmental and developmental problems.
4. Knows how to design, implement, manage, and evaluate transition programs, including school-to-work, postsecondary planning, and college admissions counseling.
5. Understands group dynamics—including counseling, psycho-educational, task, and peer helping groups—and the facilitation of teams to enable students to overcome barriers and impediments to learning.
6. Understands the potential impact of crises, emergencies, and disasters on students, educators, and schools, and knows the skills needed for crisis intervention.

D. Skills and Practices

1. Demonstrates self-awareness, sensitivity to others, and the skills needed to relate to diverse individuals, groups, and classrooms.
2. Provides individual and group counseling and classroom guidance to promote the academic, career, and personal/social development of students.
3. Designs and implements prevention and intervention plans related to the effects of (a) atypical growth and development, (b) health and wellness, (c) language, (d) ability level, (e) multicultural issues, and (f) factors of resiliency on student learning and development.
4. Demonstrates the ability to use procedures for assessing and managing suicide risk.
5. Demonstrates the ability to recognize his or her limitations as a school counselor and to seek supervision or refer clients when appropriate.

DIVERSITY AND ADVOCACY

E. Knowledge

1. Understands the cultural, ethical, economic, legal, and political issues surrounding diversity, equity, and excellence in terms of student learning.
2. Identifies community, environmental, and institutional opportunities that enhance—as well as barriers that impede—the academic, career, and personal/social development of students.
3. Understands the ways in which educational policies, programs, and practices can be developed, adapted, and modified to be culturally congruent with the needs of students and their families.
4. Understands multicultural counseling issues, as well as the impact of ability levels, stereotyping, family, socioeconomic status, gender, and sexual identity, and their effects on student achievement.

F. Skills and Practices

1. Demonstrates multicultural competencies in relation to diversity, equity, and opportunity in student learning and development.
2. Advocates for the learning and academic experiences necessary to promote the academic, career, and personal/social development of students.
3. Advocates for school policies, programs, and services that enhance a positive school climate and are equitable and responsive to multicultural student populations.
4. Engages parents, guardians, and families to promote the academic, career, and personal/social development of students.

ASSESSMENT

G. Knowledge

1. Understands the influence of multiple factors (e.g., abuse, violence, eating disorders, attention deficit hyperactivity disorder, childhood depression) that may affect the personal, social, and academic functioning of students.
2. Knows the signs and symptoms of substance abuse in children and adolescents, as well as the signs and symptoms of living in a home where substance abuse occurs.

3. Identifies various forms of needs assessments for academic, career, and personal/social development.

H. Skills and Practices

1. Assesses and interprets students' strengths and needs, recognizing uniqueness in cultures, languages, values, backgrounds, and abilities.
2. Selects appropriate assessment strategies that can be used to evaluate a student's academic, career, and personal/social development.
3. Analyzes assessment information in a manner that produces valid inferences when evaluating the needs of individual students and assessing the effectiveness of educational programs.
4. Makes appropriate referrals to school and/or community resources.
5. Assesses barriers that impede students' academic, career, and personal/social development.

RESEARCH AND EVALUATION

I. Knowledge

1. Understands how to critically evaluate research relevant to the practice of school counseling.
2. Knows models of program evaluation for school counseling programs.
3. Knows basic strategies for evaluating counseling outcomes in school counseling (e.g., behavioral observation, program evaluation).
4. Knows current methods of using data to inform decision making and accountability (e.g., school improvement plan, school report card).
5. Understands the outcome research data and best practices identified in the school counseling research literature.

J. Skills and Practices

1. Applies relevant research findings to inform the practice of school counseling.
2. Develops measurable outcomes for school counseling programs, activities, interventions, and experiences.
3. Analyzes and uses data to enhance school counseling programs.

ACADEMIC DEVELOPMENT

K. Knowledge

1. Understands the relationship of the school counseling program to the academic mission of the school.
2. Understands the concepts, principles, strategies, programs, and practices designed to close the achievement gap, promote student academic success, and prevent students from dropping out of school.
3. Understands curriculum design, lesson plan development, classroom management strategies, and differentiated instructional strategies for teaching counseling- and guidance-related material.

L. Skills and Practices

1. Conducts programs designed to enhance student academic development.
2. Implements strategies and activities to prepare students for a full range of postsecondary options and opportunities.
3. Implements differentiated instructional strategies that draw on subject matter and pedagogical content knowledge and skills to promote student achievement.

COLLABORATION AND CONSULTATION

M. Knowledge

1. Understands the ways in which student development, well-being, and learning are enhanced by family-school-community collaboration.
2. Knows strategies to promote, develop, and enhance effective teamwork within the school and the larger community.
3. Knows how to build effective working teams of school staff, parents, and community members to promote the academic, career, and personal/social development of students.
4. Understands systems theories, models, and processes of consultation in school system settings.
5. Knows strategies and methods for working with parents, guardians, families, and communities to empower them to act on behalf of their children.

6. Understands the various peer programming interventions (e.g., peer meditation, peer mentoring, peer tutoring) and how to coordinate them.
7. Knows school and community collaboration models for crisis/disaster preparedness and response.

N. Skills and Practices

1. Works with parents, guardians, and families to act on behalf of their children to address problems that affect student success in school.
2. Locates resources in the community that can be used in the school to improve student achievement and success.
3. Consults with teachers, staff, and community-based organizations to promote student academic, career, and personal/social development.
4. Uses peer helping strategies in the school counseling program.
5. Uses referral procedures with helping agents in the community (e.g., mental health centers, businesses, service groups) to secure assistance for students and their families.

LEADERSHIP

O. Knowledge

1. Knows the qualities, principles, skills, and styles of effective leadership.
2. Knows strategies of leadership designed to enhance the learning environment of schools.
3. Knows how to design, implement, manage, and evaluate a comprehensive school counseling program.
4. Understands the important role of the school counselor as a system change agent.
5. Understands the school counselor's role in student assistance programs, school leadership, curriculum, and advisory meetings.

P. Skills and Practices

1. Participates in the design, implementation, management, and evaluation of a comprehensive developmental school counseling program.

2. Plans and presents school-counseling-related educational programs for use with parents and teachers (e.g., parent education programs, materials used in classroom guidance and advisor/advisee programs for teachers).

STUDENT AFFAIRS AND COLLEGE COUNSELING

Students who are preparing to work in professional positions in higher education will demonstrate the knowledge, skills and practices necessary to promote the development of postsecondary students. In addition to the common core curricular experiences outlined in Section II.G, programs must provide evidence that student learning has occurred in the following domains.

FOUNDATIONS

A. Knowledge

1. Understands the history, philosophy, and trends in student affairs and college counseling.
2. Understands ethical and legal considerations specifically related to the practice of student affairs and college counseling.
3. Understands the interrelationships among the educational, personal/social, and career roles and responsibilities of students and others in the learning community.
4. Knows the diversity of roles, functions, and settings of student affairs professionals and counselors working in postsecondary education.
5. Knows professional organizations, preparation standards, and credentials relevant to the practice of student affairs and college counseling.
6. Understands student development theories, including holistic wellness and research relevant to student learning and personal development.
7. Recognizes current trends in higher education and the diverse character of postsecondary education environments.
8. Understands organizational, management, and leadership theory and practice.
9. Understands strategies and leadership required for services encompassed by college student development in postsecondary education, such as admissions, financial aid, academic advising, judicial services, recreational sports, disability services, international student affairs, and health services.
10. Is familiar with the concepts of organizational culture, budgeting and finance, and personnel practices in postsecondary education.
11. Understands the impact of crises, disasters, and other trauma-causing events on people in the postsecondary education community.

12. Understands the operation of the institution's emergency management plan and the roles of student affairs professionals and counselors in postsecondary education during crises, disasters, and other trauma-causing events.

B. Skills and Practices

1. Demonstrates the ability to apply and adhere to ethical and legal standards in student affairs and college counseling.
2. Demonstrates an understanding of the interrelationships among the educational, personal/social, and career roles and responsibilities of students and others in the learning community.
3. Demonstrates the ability to understand, support, and advocate for postsecondary student learning and development.
4. Applies knowledge of issues that affect student affairs practice (e.g., public policy, finance, governance, cultural contexts, international education, global understanding).
5. Demonstrates an understanding of leadership, organization, and management practices that help institutions accomplish their missions.
6. Participates in the design, implementation, management, and evaluation of student affairs programs, and is aware of various systems and environmental contexts that affect participants.
7. Demonstrates an understanding of the psychological impact of crises, disasters, and other trauma-causing events on students, faculty, and institutions.

COUNSELING, PREVENTION, AND INTERVENTION

C. Knowledge

1. Identifies the specific factors related to personal, social, educational, and career planning and development appropriate for students in postsecondary education.
2. Understands individual and group dynamics related to advising, counseling, instructing, mediating, and facilitating student opportunities in postsecondary education.
3. Knows principles of addiction intervention, consultation, education, and outreach for students in postsecondary education.

4. Understands the principles of intervention for people in the learning community during times of crises and disasters in postsecondary education.
5. Demonstrates the ability to recognize his or her own limitations as a college counselor and/or student affairs professional and to seek supervision or refer clients when appropriate.

D. Skills and Practices

1. Applies multicultural competencies to the practice of student affairs and college counseling.
2. Demonstrates the skills necessary to facilitate the academic, social, and career success of postsecondary students.
3. Demonstrates skills in helping postsecondary students cope with personal and interpersonal problems, as well as skills in crisis intervention in response to personal, educational, and community crises.
4. Demonstrates the ability to use procedures for assessing and managing suicide risk.
5. Demonstrates a general understanding of principles and models of biopsychosocial assessment and case conceptualization that lead to appropriate counseling for students in postsecondary education.
6. Participates in the design, implementation, and evaluation of programs that promote wellness, as well as prevention and intervention services for students in postsecondary education.

DIVERSITY AND ADVOCACY

E. Knowledge

1. Understands postsecondary student development in a multicultural society, including characteristics such as immigrant status, disability, extreme ability or talent, cultural background, spirituality, and family situation.
2. Understands learning styles as well as institutional, systemic, interpersonal, and intrapersonal barriers to learning in postsecondary education.
3. Knows the sociopolitical and socioeconomic forces that affect all students.
4. Understands the effect of discrimination and oppression in postsecondary education.

5. Recognizes the special needs of students in postsecondary education, including residents, commuters, distance learners, students with disabilities, adult learners, and student athletes, as well as nontraditional, international, and first-generation students.
6. Understands the cultural, ethical, economic, legal, and political issues surrounding diversity, equity, and efficacy in the postsecondary environment.

F. Skills and Practices

1. Demonstrates how student learning and learning opportunities are influenced by the characteristics of both the student and the postsecondary environment.
2. Analyzes postsecondary student needs for appropriate learning and developmental opportunities.
3. Collaborates with the postsecondary community to assist students, and uses postsecondary community resources to improve student learning and development.
4. Applies multicultural competencies to serve diverse postsecondary student populations.
5. Addresses multicultural counseling issues as they relate to student development and progress in postsecondary education (e.g., discrimination, power, privilege, oppression, values).
6. Advocates for policies, programs, and services that are equitable and responsive to the unique needs of postsecondary students.

ASSESSMENT

G. Knowledge

1. Knows principles and models of assessment for postsecondary student development, case conceptualization, theories of human development, and concepts of normalcy and psychopathology leading to referral or to the development of appropriate counseling treatment plans.
2. Knows current theories and methods of using assessment data, especially program evaluation and environmental assessment models, to support data-based decision making.

H. Skills and Practices

1. Assesses and interprets postsecondary student needs, recognizing uniqueness in culture, languages, values, backgrounds, and abilities.
2. Analyzes and uses multiple data sources, including institutional data, to make decisions about improving differentiated student programs.

RESEARCH AND EVALUATION

I. Knowledge

1. Understands how to critically evaluate research relevant to the practice of student affairs and college counseling.
2. Knows models of program evaluation for student affairs and college counseling that include measures for learning processes and outcomes and assessment of postsecondary environments and organizations.
3. Knows basic strategies for evaluating counseling outcomes and/or programmatic outcomes in student affairs and college counseling.

J. Skills and Practices

1. Applies relevant research findings to inform the practice of student affairs and college counseling.
2. Develops measurable outcomes for college counseling and student development activities.
3. Analyzes and uses data to enhance student affairs and college counseling programs.
4. Demonstrates the ability to prepare a research proposal for a human subjects/institutional review board review.

DOCTORAL STANDARDS COUNSELOR EDUCATION AND SUPERVISION

Doctoral degree programs in Counselor Education and Supervision are intended to prepare graduates to work as counselor educators, supervisors, researchers, and practitioners in academic and clinical settings. The doctoral program standards are intended to accommodate the unique strengths of different programs. Doctoral programs for which accreditation is sought must encompass all the entry-level program standards. Therefore, when programs admit doctoral students who have not graduated from a CACREP entry-level program, the program must demonstrate that the student has completed curricular experiences the equivalent of (a) the CACREP entry-level standards in Sections II and III, and (b) curricular requirements of a specific program area before beginning doctoral-level counselor education coursework.

SECTION I THE LEARNING ENVIRONMENT

THE INSTITUTION

- A. Access is provided to library and other learning resources appropriate for doctoral-level scholarly inquiry, study, and research by students and program faculty.

THE PROGRAM

- B. The doctoral program consists of a minimum of four academic years of graduate-level preparation (including entry-level preparation), defined as eight semesters or 12 quarters with a minimum of 96 semester hours or 144 quarter hours of graduate-level credits required of all students in the program.
- C. Doctoral programs accept as primary obligations:
 - 1. Extending the knowledge base of the counseling profession in a climate of scholarly inquiry.
 - 2. Supporting faculty and students in publishing and/or presenting the results of scholarly inquiry.
 - 3. Preparing students to contribute to the conversations that inform professional practice by generating new knowledge for the profession through dissertation research focusing on areas relevant to counseling practice, counselor education, and/or supervision.
 - 4. Preparing students to assume positions of leadership in the profession and/or their area(s) of specialization.

- D. In addition to entry-level considerations, doctoral program admission criteria include consideration of the following:
1. Academic aptitude for doctoral-level study.
 2. Previous professional experience.
 3. Fitness for the profession, including self-awareness and emotional stability.
 4. Oral and written communication skills.
 5. Potential for scholarship, professional leadership, and advocacy.
- E. Consistent with institutional standards, each student establishes an approved doctoral committee and completes a planned program of study in conjunction with this committee.
- F. Students attend planned meetings with their doctoral committee during their doctoral programs.

FACULTY AND STAFF

- G. Faculty teaching loads, scholarship, and service expectations are equivalent to comparable doctoral programs in the institution.
- H. Any academic unit offering the doctorate requires a minimum of five full-time core faculty positions (see Standard I.W).
- I. Faculty members participate in professional counseling organizations appropriate to their teaching responsibilities and scholarly interests.
- J. Faculty dissertation advising loads and expectations are equivalent to comparable doctoral programs in the institution.
- K. Faculty members are engaged in ongoing research, writing, publication, and presentation in the counseling profession.

EVALUATION

- L. The doctoral program is evaluated using criteria specified in the entry-level standards (Section I.AA–DD).

SECTION II PROFESSIONAL IDENTITY

FOUNDATIONS

- A. Doctoral program objectives address the professional leadership roles of counselor education, supervision, counseling practice, and research competencies expected of doctoral graduates.
- B. It is expected that doctoral students will have experiences designed to help them accomplish the following:
 - 1. Develop an area of professional counseling expertise as demonstrated through scholarly publications and/or presentations.
 - 2. Develop collaborative relationships with program faculty in teaching, supervision, research, professional writing, and service to the profession and the public.
 - 3. Participate in appropriate professional counseling organizations.
 - 4. Contribute to and promote scholarly counseling research.

KNOWLEDGE

- C. Learning experiences beyond the entry level are required in all of the following content areas:
 - 1. Theories pertaining to the principles and practice of counseling, career development, group work, systems, consultation, and crises, disasters, and other trauma causing events.
 - 2. Theories and practices of counselor supervision.
 - 3. Instructional theory and methods relevant to counselor education.
 - 4. Pedagogy relevant to multicultural issues and competencies, including social change theory and advocacy action planning.
 - 5. Design, implementation, and analysis of quantitative and qualitative research.
 - 6. Models and methods of assessment and use of data.
 - 7. Ethical and legal considerations in counselor education and supervision (e.g., *ACA Code of Ethics*, other relevant codes of ethics, standards of practice).

SECTION III PROFESSIONAL PRACTICE

CLINICAL EXPERIENCE

- A. Doctoral students are required to participate in a supervised doctoral-level practicum of a minimum of 100 hours in counseling, of which 40 hours must be in direct service with clients. The nature of the doctoral-level practicum experience is to be determined in consultation with program faculty and/or a doctoral committee. During the doctoral student's practicum, supervision will occur as outlined in entry-level standards III.A and III.C–E. The use of student supervisors is not allowed in a doctoral-level practicum.

- B. Doctoral students are required to complete doctoral-level counseling internships that total a minimum of 600 clock hours. The 600 hours include supervised experiences in counselor education and supervision (e.g., clinical practice, research, teaching). The internship includes most of the activities of a regularly employed professional in the setting. The 600 hours may be allocated at the discretion of the doctoral advisor and the student on the basis of experience and training.

- C. During internships, the student must receive weekly individual and/or triadic supervision, usually performed by a supervisor with a doctorate in counselor education or a related profession. Group supervision is provided on a regular schedule with other students throughout the internship and is usually performed by a program faculty member.

SECTION IV DOCTORAL LEARNING OUTCOMES

Programs must provide evidence that doctoral students will demonstrate knowledge, skills, and practices beyond the entry-level program requirements in *all* of the following areas. Programs may choose to emphasize one or more of the following areas congruent with program mission.

SUPERVISION

- A. Knowledge
 - 1. Understands the purposes of clinical supervision.
 - 2. Understands theoretical frameworks and models of clinical supervision.
 - 3. Understands the roles and relationships related to clinical supervision.
 - 4. Understands legal, ethical, and multicultural issues associated with clinical supervision.

B. Skill/Practices

1. Demonstrates the application of theory and skills of clinical supervision.
2. Develops and demonstrates a personal style of supervision.

TEACHING

C. Knowledge

1. Understands the major roles, responsibilities, and activities of counselor educators.
2. Knows instructional theory and methods relevant to counselor education.
3. Understands ethical, legal, and multicultural issues associated with counselor preparation training.

D. Skill and Practices

1. Develops and demonstrates a personal philosophy of teaching and learning.
2. Demonstrates course design, delivery, and evaluation methods appropriate to course objectives.
3. Demonstrates the ability to assess the needs of counselors in training and develop techniques to help students develop into competent counselors.

RESEARCH AND SCHOLARSHIP

E. Knowledge

1. Understands univariate and multivariate research designs and data analysis methods.
2. Understands qualitative designs and approaches to qualitative data analysis.
3. Knows models and methods of instrument design.
4. Knows models and methods of program evaluation.

F. Skill/Practices

1. Demonstrates the ability to formulate research questions appropriate for professional research and publication.

2. Demonstrates the ability to create research designs appropriate to quantitative and qualitative research questions.
3. Demonstrates professional writing skills necessary for journal and newsletter publication.
4. Demonstrates the ability to develop and submit a program proposal for presentation at state, regional, or national counseling conferences.
5. Demonstrates the ability to write grant proposals appropriate for research, program enhancement, and/or program development.
6. Demonstrates the ability to create and implement a program evaluation design.

COUNSELING

G. Knowledge

1. Knows the major counseling theories, including their strengths and weaknesses, theoretical bases for efficacy, applicability to multicultural populations, and ethical/legal considerations.
2. Understands various methods for evaluating counseling effectiveness.
3. Understands the research base for existing counseling theories.
4. Understands the effectiveness of models and treatment strategies of crises, disasters, and other trauma-causing events.

H. Skills and Practices

1. Demonstrates a personal theoretical counseling orientation that is based on a critical review of existing counseling theories.
2. Demonstrates effective application of multiple counseling theories.
3. Demonstrates an understanding of case conceptualization and effective interventions across diverse populations and settings.

LEADERSHIP AND ADVOCACY

I. Knowledge

1. Understands theories and skills of leadership.

2. Understands advocacy models.
3. Identifies current multicultural issues as they relate to social change theories.
4. Understands models, leadership roles, and strategies for responding to community, national, and international crises and disasters.
5. Understands current topical and political issues in counseling and how those issues affect the daily work of counselors and the counseling profession.

J. Skills and Practices

1. Demonstrates the ability to provide leadership or contribute to leadership efforts of professional organizations and/or counseling programs.
2. Demonstrates the ability to advocate for the profession and its clientele.

GLOSSARY

ACADEMIC TERM — an institutionally defined unit of course delivery (e.g., quarter, semester)

ACADEMIC UNIT — the academic department or specifically defined subsection of a department identified and defined in a college or university that has responsibility for curricular and clinical experiences for which accreditation is sought. An academic unit includes allocated faculty and physical facilities.

ACCULTURATIVE EXPERIENCES — the product of interactions among culturally distinct persons that result in attitudinal and behavioral changes.

ACCREDITATION — a system for recognizing educational institutions and professional programs affiliated with those institutions for a level of performance and integrity based on review against a specific set of published criteria or standards. The process includes (1) the submission of a self-study document that demonstrates how standards are being met; (2) an onsite review by a selected group of peers; and (3) a decision by an independent board or commission that either grants or denies accredited status on the basis of how well the standards are met.

ADVOCACY — action taken on behalf of clients or the counseling profession to support appropriate policies and standards for the profession; promote individual human worth, dignity, and potential; and oppose or work to change policies and procedures, systemic barriers, long-standing traditions, and preconceived notions that stifle human development.

BIOPSYCHOSOCIAL — pertaining to biological, psychological, and social functioning.

BIWEEKLY CONSULTATION — communication regarding the student's progress between the site supervisor and the program faculty advisor that occurs at least every other week throughout the student's practicum experience.

CERTIFICATION — the process by which an agency or association grants recognition to a person who has met predetermined qualifications specified by that agency or association.

COMMON CORE CURRICULAR AREAS — eight areas of curricular experience required by CACREP to prepare all counselors: (1) professional identity, (2) social and cultural diversity, (3) human growth and development, (4) career development, (5) helping relationships, (6) group work, (7) assessment, and (8) research and program evaluation. The common core curricular areas represent knowledge areas that are fundamental to the counseling profession.

CONSULTATION — relationship between professionals or other pertinent persons for the purpose of aiding the consultee(s).

CONTINUOUS SYSTEMATIC PROGRAM EVALUATION — planned and ongoing collection and evaluation of data from multiple sources and at multiple points in time for use in program improvement throughout the accreditation cycle.

CONTINUUM OF CARE — the spectrum of mental health services required to accommodate the diverse counseling and treatment needs of addiction and clinical mental health clients.

COOPERATING AGENCY — an institution, organization, or agency external to and independent of the academic program seeking accreditation.

CORE FACULTY — faculty members whose full-time academic appointments are in counselor education for at least one academic year.

COUNSELOR EDUCATION AND SUPERVISION — doctoral programs with titles and missions that clearly indicate that they prepare and supervise professional counselors.

CREDENTIALING — formal recognition of professional competence designated by certification, licensure, or registry. Program or institutional accreditation is a kind of credentialing.

CURRICULAR EXPERIENCES — planned, structured, and formal teaching activities intended to enable students to learn and apply the specific information, principles, values, and skills that are the intended consequences of the formal education offered by an academic unit. In general, the term is used in these standards to mean either an academic course or a readily identifiable portion of an academic course.

DIFFERENTIATED INSTRUCTION — matching curriculum materials, teacher, delivery style, classroom management strategies, and behavioral/learning expectations to the student's motivation and learning needs.

DIRECT SERVICE — interaction with clients that includes the application of counseling, consultation, or human development skills. In general, the term is used in these standards to refer to time spent by practicum or internship students working directly with clients.

DISEASE CONCEPT — the recognition of addiction as an illness that is primary, permanent, predictable, and progressive.

DIVERSITY — distinctiveness and uniqueness among and between human beings.

DUE PROCESS POLICY — written procedures by the institution to safeguard the rights of individuals.

ENDORSEMENT — approving or sanctioning a program or program graduate. Institutions and academic units claim CACREP accreditation only for specific CACREP-accredited programs. CACREP-accredited program officials and program faculty recommend program students and graduates only for employment or credentialing for which students and graduates meet established criteria.

ENTRY-LEVEL — the preparation requirements considered necessary to enter professional practice after completing a program of study; the first level at which one can be considered a professional counselor.

FULL-TIME EQUIVALENT — when calculating FTE ratios, programs use their institution’s definition of full-time student loads and faculty teaching loads, including part-time students and faculty at their percentage of full time.

INSTITUTIONAL ACCREDITATION — in U.S. higher education, institutional accreditation is granted by regional and national accrediting commissions that review entire institutions such as universities or colleges.

INTERNSHIP — a distinctly defined, post-practicum, supervised “capstone” clinical experience in which the student refines and enhances basic counseling or student development knowledge and skills, and integrates and authenticates professional knowledge and skills appropriate to his or her program and initial postgraduate professional placement.

LPC — the regulated title of Licensed Professional Counselor. In the United States, licensure as an LPC occurs at the state level and requires a master’s degree in counseling or a closely related field. In addition to obtaining the graduate degree, LPCs must obtain post-master’s-degree supervised clinical experience and must pass a state licensing exam. LPCs are regulated by state laws that protect the use of the title and, in some states, protect and define the scope of practice of a professional counselor

LICENSURE — the process by which a state agency or government grants permission to a person to engage in a given profession and to use the designated title of that profession after the applicant has attained the minimal degree of competency necessary to ensure that public health, safety, and welfare are reasonably well protected.

METHODS OF INSTRUCTION — how course content is delivered (e.g., lecture, seminar, supervised practical application, distance learning).

MULTICULTURAL — term denoting the diversity of racial, ethnic, and cultural heritage; socioeconomic status; age; gender; sexual orientation; and religious and spiritual beliefs, as well as physical, emotional, and mental abilities.

NEUROBIOLOGICAL BEHAVIOR — the relationship among brain anatomy, function, biochemistry, and learning and behavior.

NCC — the title of Nationally Certified Counselor. This certification is granted by the National Board for Certified Counselors (NBCC). NCCs hold a master’s degree or higher in counseling or a degree containing a major study in counseling, with specific course content areas and practicum/internship experiences. In addition, NCCs have completed at least two years of professional counseling experience under supervision and have passed the National Counselor Examination for Licensure and Certification (NCE).

PLURALISTIC — a condition of society in which numerous distinct ethnic, racial, religious, and social groups coexist and cooperatively work toward the interdependence needed for the enhancement of each group. This condition is based on the belief that all members of society benefit when diverse groups participate fully in the dominant society, yet maintain their differences.

PRACTICUM — a distinctly defined, supervised clinical experience in which the student develops basic counseling skills and integrates professional knowledge. The practicum is completed prior to internship.

PROCESS ADDICTION — an addiction to a behavior or action, such as gambling, shopping, eating, or sexual activities.

PROFESSIONAL COUNSELOR — a counselor who has received a master’s degree or higher from an entry-level program in counselor education matching the standards outlined by CACREP. A professional counselor remains active in the counseling professional by participating in professional development and seeking appropriate licensure and certification.

PROFESSIONAL ORGANIZATIONS — in the counseling field, the American Counseling Association (ACA) and its divisions, branches, and affiliate organizations.

PROGRAM — a structured sequence of curricular and clinical experiences for which accreditation is sought. In the context of these standards, “programs” are housed within an “academic unit.” Academic units may offer programs in Addiction Counseling; Career Counseling; Clinical Mental Health Counseling; College Counseling and Student Development; Marriage, Couple, and Family Counseling; and School Counseling, as well as Counselor Education and Supervision at the doctoral level.

PSYCHOLOGICAL FIRST AID — pragmatically oriented interventions with survivors or emergency responders targeting acute stress reactions and immediate needs and fostering short- and long-term adaptive functioning (source: American Red Cross).

RELATED PROFESSION — a profession closely related to counseling. Supervision qualifications must be commensurate with the clinical preparation and experience of professional counselors. The CACREP Board will review supervisor qualifications based on degree, licensure, and/or certification (e.g., LPC, NCC).

SPIRITUALITY — a sense of a relationship with or belief in a higher power or entity greater than oneself that involves a search for wholeness and harmony.

STANDARD — a minimal criterion that must be met.

STUDENT RETENTION POLICY — the policy by which program faculty members evaluate each student for academic, professional, and personal fitness to continue in a counseling program. In addition, the policy outlines procedures to be followed if a student does not meet program criteria.

SUPERVISION — a tutorial and mentoring form of instruction in which a supervisor monitors the student's activities in practicum and internship, and facilitates the associated learning and skill development experiences. The supervisor monitors and evaluates the clinical work of the student while monitoring the quality of services offered to clients.

Individual supervision — a tutorial and mentoring relationship between a member of the counseling profession and a counseling student.

Triadic supervision — a tutorial and mentoring relationship between a member of the counseling profession and two counseling students.

Group supervision — a tutorial and mentoring relationship between a member of the counseling profession and more than two counseling students.

SYSTEMATIC — a regular, ongoing, comprehensive method through which a program conducts evaluations of program and student outcomes. This also applies to efforts to recruit and retain a diverse faculty and student population.

TRAUMA-CAUSING EVENT — direct personal experience of an event that involves actual or threatened death or serious injury, or other threat to one's physical integrity; witnessing an event that involves death, injury, or a threat to the physical integrity of another person; or learning about unexpected or violent death, serious harm, or threat of death or injury experienced by a family member or close associate (*DSM IV-TR*, p. 463)

WELLNESS — a culturally defined state of being in which mind, body, and spirit are integrated in a way that enables a person to live a fulfilled life.