PROPOSED AMENDMENTS
LPCC REQUIREMENTS TO WORK WITH COUPLES AND FAMILIES
Title 16, Division 18, California Code of Regulations

AMEND § 1820 - EXPERIENCE

(a) In order for experience to qualify under Section 4999.50(a)(2) of the Code, it must have been gained in accordance with Sections 4999.44 through 4999.47 of the Code and the regulations contained in this article.
(b) The term "supervision", as used in this article, includes ensuring that the extent, kind, and quality of counseling performed is consistent with the education, training, and experience of the person being supervised; reviewing client/patient records, monitoring and evaluating assessment, diagnosis, and treatment decisions of the intern; monitoring and evaluating the ability of the intern to provide services at the site(s) where he or she will be practicing and to the particular clientele being served; and ensuring compliance with laws and regulations governing the practice of professional clinical counseling. Supervision shall include that amount of direct observation, or review of audio or video tapes of counseling, as deemed appropriate by the supervisor.
(c) The term “clinical setting,” as used in this article means any setting that meets all the following requirements:
(1) Lawfully and regularly provides mental health counseling or psychotherapy; and,
(2) Provides oversight to ensure that the intern’s work at the setting meets the experience and supervision requirements set forth in Chapter 16 (Commencing with Section 4999.10) of Division 2 of the Business and Professions Code and is within the scope of practice of the profession as specified therein.
(d) The term “community mental health setting,” as used in Section 4999.46 of the Code, means a clinical setting that meets all of the following requirements:
(1) Lawfully and regularly provides mental health counseling or psychotherapy;
(2) Clients routinely receive psychopharmacological interventions in conjunction with psychotherapy, counseling, or other psycho-social interventions;
(3) Clients receive coordinated care that includes the collaboration of mental health providers; and,
(4) Is not a private practice owned by a licensed professional clinical counselor, licensed marriage and family therapist, a licensed psychologist, a licensed clinical social worker, a licensed physician or surgeon, a professional corporation of any of these licensed professions or a corporation of unlicensed individuals.
(e) Supervision shall be credited only upon the following conditions:
(1) During each week in which experience is claimed and for each work setting in which experience is gained, an applicant or intern shall have at least one (1) hour of one-on-one, individual, face-to-face supervisor contact or two (2) hours of face-to-face supervisor contact in a group of not more than eight (8) persons receiving supervision. No more than five (5) hours of supervision, whether individual or group, shall be credited during any single week.
(2) The applicant or intern shall have received at least one (1) hour of one-on-one, individual, face-to-face supervisor contact per week for a minimum of fifty-two (52) weeks.
(3) In a setting which is not a private practice, the authorized supervisor may be employed by the applicant's employer on either a paid or a voluntary basis. If such employment is on a voluntary basis, a written agreement must be executed between the supervisor and the organization, prior to commencement of supervision, in which the supervisor agrees to ensure that the extent, kind, and quality of counseling performed by the intern is consistent with the intern’s training, education, and experience, and is appropriate in extent, kind, and quality. The agreement shall contain an acknowledgment by the employer that the employer:

(A) Is aware of the licensing requirements that must be met by the intern and agrees not to interfere with the supervisor's legal and ethical obligations to ensure compliance with those requirements; and
(B) Agrees to provide the supervisor access to clinical records of the clients counseled by the intern.
(4) The applicant or intern maintains a record of all hours of experience gained toward licensure on the "Weekly Summary of Experience Hours for Professional Clinical Counselor Interns" (form No. 1800 37A-645 ~~New 3/10~~ Revised 02/15), hereby incorporated by reference. The record of hours must be signed by the supervisor on a weekly basis. An intern shall retain all "Weekly Summary of Experience Hours for Professional Clinical Counselor Interns" until such time as the applicant is licensed by the board. The board shall have the right to require an applicant to submit all or such portions of the "Weekly Summary of Experience Hours for Professional Clinical Counselor Interns" as it deems necessary to verify hours of experience.

(f) When an intern employed in private practice is supervised by someone other than the employer, the supervisor must be employed by and practice at the same site(s) as the intern's employer.

NOTE: Authority cited: Section 4990.20, 4999.48 and 4999.50, Business and Professions Code. Reference: Sections 4999.44, 4999.45, 4999.46, 4999.47 Business and Professions Code.

AMEND §1820.5 ~~EXPERIENCE WORKING DIRECTLY WITH COUPLES, OR FAMILIES, OR CHILDREN~~ EXEMPTIONS FOR WORKING WITH COUPLES OR FAMILIES

~~(a) Professional clinical counselor interns and clinical counselor trainees shall be exempt from Section 4999.20 (a)(3) of the Code if the intern or trainee meets both of the following requirements:~~
~~(1) Is gaining supervised experience to comply with 4999.20(a)(3)(B), sections 4999.32(c)(3)(I), or 4999.33(c)(3)(K) of the Code; and,~~
~~(2) The supervised experience is gained under the direct supervision of a marriage and family therapist or a licensed professional clinical counselor who meets all requirements specified in Section 4999.20 (a)(3) of the Code.~~
~~(b) A licensed professional clinical counselor shall be exempt from Section 4999.20 (a)(3) of the Code if the licensee meets all of the following requirements:~~
~~(1) Is gaining supervised experience to comply with Section 4999.20(a)(3)(B) of the Code;~~
~~(2) The supervised experience is gained under the direct supervision of a marriage and family therapist or a licensee who meets all requirements specified in Section 4999.20 (a)(3) of the Code.~~
~~(3) The licensed professional clinical counselor gaining the hours of supervised work experience to comply with Section 4999.20(a)(3) of the Code meets both of the following requirements:~~
~~(A) Has completed, beyond the minimum training and education, six semester units or nine quarter units specifically focused on the theory and application of marriage and family therapy or a named specialization or emphasis area on the qualifying degree in marriage and family therapy; marital and family therapy; marriage, family, and child counseling; or couple and family therapy.~~
~~(B) Completes a minimum of six hours of continuing education specific to marriage and family therapy, completed in each renewal cycle.~~

(a) Clinical counselor trainees, as defined in Section 4999.12, shall be exempt from Section 4999.20 (a)(3) of the Code if the trainee is gaining supervised practicum experience to comply with sections 4999.32(c)(3)(I), or 4999.33(c)(3)(K) of the Code.

(b) Trainees may not count supervised experience with couples or families toward the requirements of section 4999.20(a)(3) of the Code.

(c) Professional clinical counselor interns and licensees shall be exempt from the scope of practice restrictions set forth in section 4999.20(a)(3) of the Code if the intern or licensee meets all of the following requirements:

(1) Is gaining supervised experience to comply with Section 4999.20(a)(3)(B) or 4999.46(b)(2) of the Code.

(2) The supervised experience is gained under the direct supervision of a licensee who meets the definition of an "approved supervisor" as described in Section 4999.12(h) of the Code. If the supervisor is a licensed professional clinical counselor, he or she must also meet all requirements specified in Section 4999.20(a)(3) of the Code. A supervisor who is a licensed clinical social worker, licensed psychologist, or licensed physician who is board certified in psychiatry, shall have sufficient education and experience in treating couples and families to competently practice couples and family therapy in California.

(d) Collateral consultation may be provided to a family of an individual who is being treated by an LPCC or intern who does not meet the requirements of section 4999.20(a)(3) of the Code, and who is not working under supervision toward meeting the requirements of section 4999.20(a)(3) of the Code. Collateral contact with the family may include, but is not limited to, treatment planning, recommending resources, monitoring progress, or termination and aftercare planning.

NOTE: Authority cited: Sections 4990.20 ~~and 4999.20,~~ Business and Professions Code. Reference: Sections 4990.20, ~~4999.20,~~ 4999.32, and 4999.33 Business and Professions Code.

ADD §1820.7 - CONFIRMATION OF QUALIFICATIONS TO TREAT COUPLES OR FAMILIES

(a) Effective January 1, 2017, a licensed professional clinical counselor shall obtain written confirmation from the board that he or she meets the requirements specified in 4999.20(a)(3) to treat couples and families, and shall provide a copy of this written confirmation to the clients prior to commencement of couple or family treatment.

(b) Effective January 1, 2017, a licensed professional clinical counselor shall obtain written confirmation from the board that he or she meets the requirements specified in 4999.20(a)(3) to treat couples and families, and shall provide a copy of this written confirmation to the supervisees listed below prior to commencement of supervision:

(1) A marriage and family therapist intern or trainee.

(2) A licensed professional clinical counselor or professional clinical counselor intern gaining supervised experience to comply with section 4999.20(a)(3).

(c) The board shall accept any of the following as documentation of the supervised experience required by section 4999.20(a)(3)(B) of the Code to treat couples and families:

(1) Hours of experience verified by a qualified supervisor.

(2) Hours of experience and supervisor's license information verified by the employer if the

former supervisor is no longer available.

(3) The board may consider other documentation deemed equivalent by the board on a case-by-case basis.

NOTE: Authority cited: Section 4990.20 Business and Professions Code. Reference: Sections 4990.20, 4999.32, and 4999.33 Business and Professions Code.

AMEND § 1822 - SUPERVISORY PLAN

(a) All licensed mental health professionals acceptable to the board as defined in Section 4999.12 of the Code who assume responsibility for providing supervision under section 4999.46 of the Code shall develop a supervisory plan that describes the goals and objectives of supervision and shall complete and sign under penalty of perjury the "Supervisory Plan", (form no. 1800 37A-521, Rev. 3/10), hereby incorporated by reference.
(b) This supervisory plan shall be completed by each supervisor providing supervision and the original signed plan shall be submitted by the professional clinical counselor intern to the board upon application for examination eligibility.

Note: Authority cited: Section 4990.20 and 4999.48 Business and Professions Code. Reference: Sections 4999.12, 4999.34, 4999.36, 4999.44 through 4999.48 and 4999.54 Business and Professions Code.

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WEEKLY SUMMARY OF EXPERIENCE HOURS FOR PROFESSIONAL CLINICAL COUNSELOR INTERNS

FOR HOURS GAINED ON OR AFTER JANUARY 1, 2014

This form shall be completed pursuant to title 16, California Code of Regulations (CCR) section 1820~~(e)~~. Use a separate log for each supervised work setting. Keep a separate weekly summary form for hours gained prior to your Intern registration number being issued.

(*Please type or print clearly in ink*)

Name of PCC Intern: Last	First	Middle	BBS File No (if known)

Name of Supervisor:	Name of Work Setting:

Address of Work Setting: Number and Street	City, State, Zip

~~Indicate the status of the hours logged:~~ The hours recorded on this form were gained while I was:	Is this setting a hospital or community mental health setting that meets the requirements of Title 16, CCR Section 1820(d)?
☐ A Registered PCC Intern (PCC Intern No. _____)	Yes ☐ No ☐ *NOTE: A minimum of 150 hours of clinical experience in this type of setting is required.*
☐ A Post-Degree Applicant ~~with Application~~ Pending ~~for~~ Intern Registration	

~~Note: Child counseling can be logged in any appropriate category as specified by your supervisor~~

YEAR: **WEEK OF:**													Total Hours
1. ~~Individual Psychotherapy (performed by you)~~ Direct Counseling of individuals (including children), groups, couples, or families* (min. 1,750 hours)													
a. Of the types of clients in category #1, how many hours were gained treating couples, families, or children?**													
b. Of the hours in category #1, how many were Group Therapy or Counseling? (max. 500)													
c. Of the hours in category #1, how many were ~~Telephone~~ Telehealth Counseling? (max. ~~250~~ 375)													
2. Administering & evaluating psych. tests, writing clinical reports, writing progress or process notes (max. 250)***													
3. Workshops, seminars, training sessions, or conferences directly related to professional clinical counseling (max. 250)***													
4. Client Centered Advocacy (CCA)***													
5. Supervision, Individual Face-to-Face***													
6. Supervision, Group***													
Total Per Week:													

*If seeing couples or families, your supervisor must meet qualifications listed in 16 CCR section 1820.5(c) **This line is for the purpose of tracking experience toward meeting the scope of practice requirements of Business and Professions Code (BPC) section 4999.20(a)(3)(B) *****When combined, these categories shall not exceed 1,250 hours of experience (BPC section 4999.46 (b)(6))	Signature of Supervisor												
	Signature of Supervisor	Signature of Supervisor	Signature of Supervisor	Signature of Supervisor	Signature of Supervisor	Signature of Supervisor	Signature of Supervisor	Signature of Supervisor	Signature of Supervisor	Signature of Supervisor	Signature of Supervisor	Signature of Supervisor	

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SUPERVISORY PLAN

Title 16, California Code of Regulations (CCR) Sections 1870.1 and 1822 require all associate clinical social workers and professional clinical counselor interns and licensed mental health professionals acceptable to the Board as defined in Business and Professions Code Section 4996.23(a), 4999.12(h) ,and CCR Section 1874, who assume responsibility for providing supervision to those working toward a license as a Clinical Social Worker or Professional Clinical Counselor to complete and sign the following supervisory plan. The original signed plan shall be submitted by the registrant to the board upon application for examination eligibility.

REGISTRANT: ***(Please type or print clearly in ink.)***

Legal name: Last	First	Middle	Registration Number

Address: Number and Street

City	State	Zip Code

Business Telephone	Residence Telephone
( )	( )

LICENSED SUPERVISOR: ***(Please type or print clearly in ink.)***

Name: Last	First	Middle	License No:	Expiration Date:

Employer Name:	Telephone Number: ( )

Address: Number and Street

City	State	Zip Code

Employment Setting:

a. Private Practice ☐
a. Governmental Entity ☐
b. Nonprofit and Charitable Corporation ☐
c. School, College, or University ☐
d. Licensed Health Facility ☐
e. Social Rehabilitation Facility/Community Treatment Facility ☐
f. Pediatric Day Health and Respite Care Facility ☐
g. Licensed Alcoholism or Drug Abuse Recovery or Treatment Facility ☐
h. Community Mental Health Facility ☐

Briefly describe the goals and objectives:

I certify that I understand the responsibilities regarding clinical supervision, including the supervisor's responsibility to perform ongoing assessments of the supervisee, and I declare under penalty of perjury under the laws of the State of California that the information submitted on this form is true and correct.

Supervisor's Signature	Date signed

Registrant's Signature	Date signed

The **original** of this form must be submitted to the board upon application for examination eligibility**.**