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Rule ID(s): 5332 File Date: 10/25/12

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Rulemaking Hearing Rule(s) Filing Form

Rulemaking Hearing Rules are rules filed after and as a result of a rulemaking hearing. TCA Section 4-5-205

Agency/Board/Commission:	Board for Professional Counselors, Marital and Family Therapists, and Clinical Pastoral Therapists			
Division:				
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Revision Type (check all that apply):

X Amendment

New

Repeal

Rule(s) Revised (ALL chapters and rules contained in filing must be listed here. If needed, copy and paste additional tables to accommodate multiple chapters. Please enter only ONE Rule Number/Rule Title per row)

Chapter Number	Chapter Title
0450-01	General Rules Governing Professional Counselors
Rule Number	Rule Title
0450-0101	Definitions
0450-0104	Qualifications for Licensure
0450-0107	Application Review, Approval, Denial, Interviews
0450-0108	Examinations
0450-0110	Supervision – Post-Masters

(Place substance of rules and other info here. Statutory authority must be given for each rule change. For information on formatting rules go to http://state.tn.us/sos/rules/1360/1360.htm)

Rule 0450-01-.01 Definitions is amended by deleting paragraphs (4), (11), and (39) in their entirety and substituting instead the following language, so that as amended, the new paragraphs shall read:

- (4) Approved Supervisor An approved supervisor for professional experience subsequent to the master's degree must be a currently Licensed Professional Counselor, Licensed Marital and Family Therapist, Licensed Clinical Pastoral Therapist, Licensed Clinical Social Worker, Licensed Psychologist with Health Service Provider designation, Licensed Senior Psychological Examiner, or Licensed Psychiatrist, who has been licensed at least five (5) years and who takes responsibility for the practice of the supervisee during a specific time to enable the supervisee to meet the requirements of licensing. If the supervisor is a Licensed Professional Counselor who is supervising a candidate for Licensed Professional Counselor with Mental Health Service Provider designation.
- (11) Clinical setting A place where the practice of professional counseling occurs. An appropriate setting for an applicant's pre and post master's professional experience must meet the following criteria:
 - (a) The place or practice shall be a public, private, or community agency/mental health setting and must have integrated programs for the delivery of clinical mental health counseling in accordance with these rules and defined by definition (29) for non-Mental Health Service Provider designation and definition (30) for the Mental Health Service Provider designation.
 - (b) The place or practice shall offer adequate physical resources, such as a private space that meets HIPAA requirements, necessary to allow for supervision and appropriate service delivery.
 - (c) The place or practice shall have at least one licensed mental health professional on site for a cumulative minimum of 20 hours per week whose assigned job duties include being available to the applicant for supervision and/or consultation while the applicant is engaging in the practice of counseling or counseling related services. In addition, the place or practice shall have a written emergency plan in place to include method(s) of contacting supervisor(s) or other consultant(s), alternative contacts when supervisor(s) is(are) unavailable, information regarding crisis services, and crisis decision-making. The licensed mental health professional can serve as the applicant's supervisor if he or she meets the supervisor requirements pursuant to 0450-01-.10. If the licensed mental health professional on staff at the place or practice is unable or unwilling to serve as the applicant's supervisor, the applicant must secure a supervisor who meets the supervisor requirements pursuant to 0450-01-.10.
 - (d) For an applicant pursuing post-master's professional experience, the place or practice shall not be owned, or independently operated by the applicant. An applicant shall not seek a clinical setting or supervision that is in conflict with the multiple relationships addressed by the American Counseling Association's Code of Ethics. Prior to choosing a clinical setting, if an applicant is uncertain, he or she shall seek advice about what is considered acceptable from the Board.
 - (e) In the case of pre-master's professional experience, the place or practice shall have written provisions to provide supervision and training experience as defined by graduate counseling program expectations.
 - (f) The applicant shall be an employee of the place or practice, or shall be affiliated by agreement. All agreements shall include but not be limited to the following information: the name of the individual responsible for supervision, specific job duties/responsibilities, method for obtaining and scheduling clients, liability insurance information, payment arrangements, emergency plan, and facility and service logistics. Compensation for services provided by the applicant shall be paid directly to the place or

practice unless the applicant has a temporary license, at which time the applicant may be paid on an agreed upon basis or may provide services on a pro bono basis.

- (39) Supervision Ongoing, direct clinical oversight for the purpose of training or teaching. Supervision may include, without being limited to, the review of case presentations, audio tapes, video tapes, and direct observation.
 - (a) Supervision shall be by an approved supervisor.
 - (b) An approved supervisor shall monitor the performance of an applicant's interaction with a client and provide regular documented face-to-face or live video conferencing (with prior board approval based on hardship), consultation, guidance, and instructions with respect to the clinical skills and competencies of the applicant.
 - (c) Individual supervision is supervision as defined by models developed by the Council for Accreditation of Counseling and Related Educational Programs (CACREP) for individual (one supervisor to supervisee) or triadic supervision (one supervisor to two supervisees).
 - (d) Group supervision is supervision by one supervisor of a minimum of three (3) and a maximum of eight (8) supervisees. Of the 150 hours collected, no more than fifty (50) hours may be group supervision.

Authority: T.C.A. §§ 63-1-145, 63-22-102, 63-22-104, 63-22-117 and 63-22-120.

Rule 0450-01-.04 Qualifications for Licensure is amended by deleting paragraph (1), but not its subparagraphs, and substituting instead the following language, so that as amended, the new paragraph, but not its subparagraphs, shall read:

(1) Professional Counselor by Examination. To be eligible to submit an application, a candidate must show completion of the following qualifications:

Authority: T.C.A. §§ 63-22-102, 63-22-104, 63-22-107, 63-22-116, and 63-22-120.

Rule 0450-01-.04 Qualifications for Licensure is amended by deleting part (1)(c)2 in its entirety and substituting instead the following language, so that as amended, the new part shall read:

- 2. The graduate coursework should include, but is not limited to, core areas of (one course may satisfy study in more than one of the study areas):
 - (i) Theories of human behavior, learning and personality;
 - (ii) Abnormal behavior;
 - (iii) Theories of counseling and psychotherapy;
 - (iv) Evaluation and appraisal procedures;
 - (v) Group dynamics, theories and techniques;
 - (vi) Counseling techniques;
 - (vii) Multicultural counseling;
 - (viii) Ethics;
 - (ix) Research;

(x) Clinical practicum or internship (pursuant to T.C.A. § 63-22-104)

Authority: T.C.A. §§ 63-22-102, 63-22-104, 63-22-107, 63-22-116, and 63-22-120.

Rule 0450-01-.04 Qualifications for Licensure is amended by adding a new item (4)(a)3.(ii)(VII) and renumbering the remaining items appropriately, so that as amended, the items under subpart (4)(a)3.(ii) shall read:

- (I) Theories of human behavior, learning and personality
- (II) Abnormal behavior and psychopathology
- (III) Theories of counseling and psychotherapy
- (IV) Evaluation and appraisal procedures
- (V) Group dynamics, theories and techniques
- (VI) Counseling techniques
- (VII) Multicultural counseling
- (VIII) Ethics
- (IX) Research
- (X) Use of the DSM
- (XI) Treatment and treatment planning
- (XII) Clinical practicum or internship (pursuant to T.C.A. § 63-22-104);

Authority: T.C.A. §§ 63-22-102, 63-22-104, 63-22-107, 63-22-116, and 63-22-120.

Rule 0450-01-.04 Qualifications for Licensure is amended by deleting subpart (4)(a)4.(i) in its entirety and renumbering the remaining subparts, and by amending renumbered subpart (4)(a)4.(i) so that it reads:

- (i) Complete three thousand (3000) hours of supervised post-masters professional experience, including one hundred and fifty (150) contact hours of supervision obtained pursuant to Rule 0450-01-.10(6).
 - (I) One thousand and five hundred (1500) of the three thousand (3000) hours of supervised post-masters professional experience shall be face-to-face client contact hours.
 - One thousand and five hundred (1500) of the three thousand (3000) hours of supervised post-masters professional experience shall be clinically-related activities;

Authority: T.C.A. §§ 63-22-102, 63-22-104, 63-22-107, 63-22-116, and 63-22-120.

Rule 0450-01-.04 Qualifications for Licensure is amended by deleting subparagraph (4)(c) in its entirety.

Authority: T.C.A. §§ 63-22-102, 63-22-104, 63-22-107, 63-22-116, and 63-22-120.

Rule 0450-01-.07 Application Review, Approval, Denial, Interviews is amended by deleting paragraph (5) in its entirety and substituting instead the following language and new paragraph (5), and adding a new paragraph (6) and renumbering the remaining paragraphs appropriately so that, as amended, the new paragraphs shall read:

- (5) If a completed application has been denied and ratified as such by the board, the action shall become final and a notification of the denial shall be sent by the board's administrative office by certified mail return receipt requested. Specific reasons for denial will be stated, such as incomplete information, unofficial records, examination failure, or other matters judged insufficient for licensure and such notification shall contain all the specific statutory or rule authorities for the denial.
- (6) If an applicant believes that a denial was in error, they may request in writing to appear before the Board not less than thirty (30) days before the next regularly scheduled meeting of the Board.

Authority: T.C.A. §§ 63-22-102, 63-22-104, 63-22-107, 63-22-110, 63-22-116, and 63-22-120.

Rule 0450-01-.08 Examinations is amended by deleting subparagraph (1)(b) in its entirety and substituting instead the following language, so that as amended, the new subparagraph shall read:

(b) The Tennessee jurisprudence examination concerning Tennessee's professional counselor statutes and regulations and professional ethics based on the ACA Code of Ethics, which is administered by the NBCC.

Authority: T.C.A. §§ 63-22-102, 63-22-104, and 63-22-107.

Rule 0450-01-.10 Supervision - Post-Masters is amended by deleting paragraph (1) in its entirety and substituting instead the following language, and adding a new paragraph (2) and renumbering the remaining paragraphs accordingly, and is further amended by deleting newly renumbered paragraph (6) in its entirety and substituting instead the following language, so that as amended, the rule shall read:

- (1) Professional Counselor's Supervision. A supervisor providing supervision on or after January 31, 2013 must comply with the following requirements:
 - (a) Experience Supervisors must have been licensed at least five (5) years as a Licensed Professional Counselor, Licensed Professional Counselor with Mental Health Service Provider designation, Licensed Marital and Family Therapist, Licensed Clinical Pastoral Therapist, Licensed Psychologist with Health Service Provider designation, Licensed Senior Psychological Examiner, Licensed Psychiatrist, or Licensed Clinical Social Worker.
 - (b) Supervisors for applicants pursuing designation as Mental Health Service Provider shall be currently Licensed Professional Counselors with Mental Health Service Provider designation or equivalent, Licensed Marital and Family Therapists, Licensed Clinical Pastoral Therapists, Licensed Clinical Social Workers, Licensed Psychiatrists, Licensed Senior Psychological Examiners, or Licensed Psychologists with Health Service Provider designation, who have been licensed at least five (5) years and who are in good standing with their respective licensing boards and professional associations. A Licensed Professional Counselor without Mental Health Service Provider designation shall not supervise an applicant working toward the Mental Health Service Provider designation.
 - (c) For the purpose of mental health service provider designation, of the hundred and fifty (150) contact hours of supervision required, seventy-five (75) shall be conducted by a supervisor with Licensed Professional Counselor with Mental Health Service Provider designation.
 - (d) Ethics Supervisors shall comply with Section F of the current code of ethics adopted by the American Counseling Association, except to the extent that it conflicts with the laws of the State of Tennessee or the rules of the Board. If the code of ethics conflicts with state

law or rules, the state law or rules govern the matter. Violation of the code of ethics or state law or rules may subject a licensee or certificate holder to disciplinary action. Supervisors may also reference the Association for Counselor Education and Supervision (ACES) Ethical Guidelines for Counseling Supervisors.

- (e) Training Supervisors shall provide documentation of the successful completion of one or more of the following:
 - 1. A passing grade at an accredited college or university in an academic course specific to supervision of counselors
 - Supervision certification by one, or more, of the following professional associations:
 - (i) AAMFT Approved Supervisor;
 - (ii) AAPC Approved Supervisor;
 - (iii) NBCC Approved Clinical Supervisor; or
 - (iv) Any other organization designated by the Board to provide supervisor qualification verification
 - Documentation of twelve (12) contact hours related to counseling supervision and other related supervision topics. Contact hours must be provided by an approved professional association or approved by a counseling related credentialing organization (e.g., NBCC).
- (f) Continuing Education Units Three (3) clock hours of the ten (10) clock hour requirement shall, every two (2) years, pertain to counseling supervision or related supervision topics.
- (2) All supervisors providing supervision starting before January 31, 2013 for LPC or LPC/MHSP candidates will be approved to continue providing supervision to those individuals according to the requirements of the former Rule 0450-01-.10. Supervisors providing supervision starting on or after January 31, 2013 must comply with the above requirements. All supervisors shall comply with subparagraphs (1)(d) and (1)(f) regardless of the date they start providing supervision.
- (3) Approved supervisors The applicant shall be responsible for submitting evidence at the time the application is submitted that the supervisor meets the rules of the board for eligibility.
- (4) Conflict of Interest Supervision Supervision provided by the applicant's parent, spouse, former spouse, siblings, children, cousins, in-laws, (present or former), aunts, uncles, grandparents, grandchildren, step-children, employees, or anyone sharing the same household shall not be acceptable toward fulfillment of licensure requirements. For the purposes of this rule, a supervisor shall not be considered an employee of the applicant, if the only compensation received by the supervisor consists of payment for actual supervisory hours.
- (5) Upon completion of the post-masters supervision requirement, pursuant to 0450-01-.04, the applicant must continue in supervision until a receipt of a license to practice as a Professional Counselor. Such post-supervision may be less intense and/or less frequent than the post-masters supervision experience, depending on the supervisor's judgment.
- (6) For the purpose of mental health service provider designation pursuant to T.C.A. § 63-22-150, one hundred and fifty (150) contact hours of supervision, of which no more than fifty (50) hours may be in a group setting, is required for licensure as a professional counselor with mental health service provider designation.
 - (a) The post-masters supervised experience must consist of a minimum of three thousand (3000) hours of direct clinical experience which is completed under supervision and

which is completed no sooner than two (2) years nor more than four (4) years following the beginning of supervised clinical practice.

- One thousand and five hundred (1500) of the three thousand (3000) hours of supervised post-masters professional experience shall be face-to-face client contact hours.
- 2. One thousand and five hundred (1500) of the three thousand (3000) hours of supervised post-masters professional experience shall be clinically-related activities.
- (b) The ratio of supervision time to direct client contact should be sufficient to ensure adequate learning. The minimum requirements are one hour per week of direct, individual, formal contact with a qualified individual who is responsible for the clinical education, development and guidance of the supervisee. Excluded are classwork, practicum experience, or other course-related experiences taken in pursuit of the required 60 semester hour master's degree.
- (c) The supervision must be for the direct provision of mental health services by the applicant to individuals or groups of clients. An applicant's own personal growth experience, i.e., personal therapy or encounter-type groups, is not acceptable. Supervision of others is not acceptable.

Authority: T.C.A. §§ 63-22-102, 63-22-104, 63-22-107, 63-22-117, and 63-22-120.

* If a roll-call vote was necessary, the vote by the Agency on these rulemaking hearing rules was as follows:

Board Member	Aye	No	Abstain	Absent	Signature (if required)
Susan Hammonds-White, EdD	Х				
Brenda Dew, PhD	Х				
James Philpott	X				
Stephen Caldwell	X				
Janet Scott,PhD	Х				

I certify that this is an accurate and complete copy of rulemaking hearing rules, lawfully promulgated and adopted

	Marital and Family Therapists, and Clinical Pastoral Therapists on sions of TCA 4-5-222.
I further certify the following:	
Notice of Rulemaking Hearing filed with the De	epartment of State on: 12/09/2010
Rulemaking Hearing(s) Conducted on:	01/28/2011
	Date: 09/07/12
Sign	nature: John & Reell
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Name of C	Officer: UJohanna L. Barde
Title of C	Assistant General Counsel Officer: Department of Health
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NOTARY NOTARY	Public Signature: Theodora P. Walkini
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All rule making hearing rules provided for here	in have been examined by the Attorney General and Reporter of the
State of Tennessee and are approved as to le	gality pursuant to the provisions of the Administrative Procedures
Act, Tennessee Code Annotated, Title 4, Chap	pter 5.
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	Robert E. Cooper, Jr.
	Attorney General and Reporter
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Public Hearing Comments

One copy of a document containing responses to comments made at the public hearing must accompany the filing pursuant to T.C.A. §4-5-222. Agencies shall include only their responses to public hearing comments, which can be summarized. No letters of inquiry from parties questioning the rule will be accepted. When no comments are received at the public hearing, the agency need only draft a memorandum stating such and include it with the Rulemaking Hearing Rule filing. Minutes of the meeting will not be accepted. Transcripts are not acceptable.

PUBLIC HEARING COMMENTS

RULEMAKING HEARING

TENNESSEE DEPARTMENT OF HEALTH

BOARD OF LICENSED PROFESSIONAL COUNSELORS, MARITAL AND FAMILY THERAPISTS, AND CLINICAL PASTORAL THERAPISTS

RULES AFFECTING LICENSED PROFESSIONAL COUNSELORS

The rulemaking hearing for the Tennessee Department of Health, Board of Licensed Professional Counselors, Marital and Family Therapists, and Clinical Pastoral Therapists was held on January 28, 2011 in the Department of Health Conference Center's Poplar Room on the First Floor of the Heritage Place Building in MetroCenter, Nashville, Tennessee. Rachel Appelt, Assistant General Counsel, presided over the hearing.

There were three (3) written comments received prior to the January 28th hearing. Additionally, several comments were received from the audience during the hearing.

Comments regarding the definition of clinical setting (0450-01-.01(11)):

<u>Comment 1:</u> The Tennessee Licensed Professional Counselors Association (TLPCA) submitted a written comment before the hearing and verbal comments by TLPCA representatives and submitted its proposed rule language addressing these concerns. Tennessee Mental Health Counselors Association also supported this language.

Board Response:

- a) The Board did not make changes to the definitions of mental health and non-mental health service providers, as the language in the rule currently mirrors the language in the §63-22-150, which is beyond the scope of this rulemaking to change.
- b) The Board determined it is best to let the standards of internship programs be dictated by the programs because each program has its own requirement. However, the Board felt that having written provisions ensures that all parties understand their respective roles and responsibilities and makes the arrangement easier to regulate.
- c) The Board agreed that private practice settings may be necessary for post-masters applicants to find places to get supervision. To address concerns of unlicensed persons in private practice the rule will include the provision that the facility may not be owned or operated by the applicant and will include a prohibition on clinical settings that violate the ACA code of ethics regarding multiple relationships.

The Board further adopted the TLPCA proposed language stating that the applicant must be an employee or affiliated by contract. However, the Board chose to leave out the proposed sentence stating that any money must be paid to the facility and not the applicant, opting for more flexibility in the payment arrangements. The Board felt the provisions preventing independent ownership and operation by the applicant would cover the issue because that language prevents wholly private practice. The Board did consider the fact that there is the provision of the statutes that allows for a temporary license, which might be a way to protect against unlicensed practice, however changing the method of earning a temporary license was beyond the scope of the rule-making notice so the Board chose not to make temporary licenses a requirement.

The Board agreed that another issue of protecting the public from persons in a completely autonomous independent practice could be solved by having a licensed mental health professional – either the supervisor or another staff member – available for consultation, as TLPCA suggested. However the Board chose to extend this even more to require the person to be present 20 hours a week, not just available by telephone for consultation as TLPCA suggested. There must also be a written emergency plan to handle scenarios where the applicant is unprepared for a crisis. This provides some protection without being too restrictive.

- Comment 2: Dr. Peter Wilson of Trevecca Nazarene's graduate counseling program submitted a written comment prior to the meeting and made verbal comments at the hearing, to the effect that Trevecca was in support of nearly all the proposed language by TLPCA. However, the program disagreed with TLPCA on the issue of whether applicants must be employees of the practice who cannot receive fees. If supervisors have to require that the applicant be an employee, provide the clients, and collect the fees directly, most supervisors would shy away from the responsibility, limiting the placements for graduates. As long as an applicant is working in a setting with a licensed professional available to them and they are under the supervision of an approved supervisor, the public is well protected even if they accept money directly.
- <u>Board Response</u>: The Board agreed with Trevecca's assertion that its program's graduates are well prepared to practice independent and should be allowed to accept money. The adoption of a rule that bars the applicant from independently owning or operating the practice and requiring that the applicant must be an employee or affiliated by contract protects the public without eliminating the possibility of direct compensation.
- Comment 3: Rob Rickman spoke as a recent graduate of the Vanderbilt counseling program who is concerned about the temporary license being required to practice. The classes he had to take to get to 60 hours are not the core classes (not CACREP). He graduated from Vanderbilt with a 48 hours program and he thinks it is unfair that he has to get to 60 hours to even be eligible to test for the temporary license. He suggested that there be a way upon graduation for people to take those tests, regardless of the hours required.
- <u>Board Response</u>: This is something the Board has been contemplating, but the requirements for temporary licensure are outside the scope of this rule-making hearing.

Comments regarding the definition of supervision (0450-01-.01(39)):

- Comment 1:Francis Martin of TMHCA remarked that the definitions of supervision (a) and (b) are acceptable to the TMHCA. For (c), defining individual supervision as triadic, CACREP has not developed models of triadic clinical supervision. Post-degree supervision is different one cannot apply standards of CACREP to post-degree supervision as they apply to pre-degree programs. In addition, an analysis of licensees from TN revealed 38-40 institutions, but only 6 are accredited by CACREP, which means if the Board defines supervision to allow all 150 hours of triadic supervision, people from the majority of programs will become counselors having never had individual supervision. Rob Rickman echoed these comments.
- Board Response: One of the issues is trying to get people able to afford supervision. With triadic supervision at least they can split the fees with other applicants.
- <u>Comment 2</u>: Dr. Wilson, on behalf of Trevecca stated that the real issue is well trained supervisors, and not how many supervisors. TLPCA agrees and feels that that because the Board is increasing supervisor requirements, they will be more highly qualified and triadic supervision is adequate.
- <u>Board Response</u>: The Board deemed it appropriate to limit triadic supervision to 50 hours out of the 150 hours required for supervision. This will make a balance of 50 individual, 50 triadic, and 50 group hours.

Comments regarding the qualifications for licensure (0450-01-.04):

Comment 1: The Council on Rehabilitation Education submitted a written comment regarding qualifications for licensure. Specifically, the Council requested that the Board recognize the Council on Rehabilitation Education accreditation as an equivalent for the Council for Accreditation of Counseling and Related Educational Programs. Additionally, the Council requested that the Board consider the Certified Rehabilitation Counselor Examination as an equivalent to the National Board of Certified Counselor's

National Counselor Examination for licensure as a professional counselor.

Board Response: Because this comment addressed a part of the rule not noticed in the Notice of Rulemaking Hearing, the Board deferred the comment to consider it as correspondence at their next meeting on March 4, 2011.

Comments regarding the supervision requirements (0450-01-.10):

- Comment 1: Dr. Wilson of Trevecca raised concerns that the current rules do not state that LPC should not able to supervise LPC/MHSP, and that not only should this be made very clear in the changed rules, but that the new rules should state that no one can be grandfathered in without having gotten supervision by an LPC/MHSP simply because they started supervision prior to the rule change.
- <u>Board Response</u>: The Board pointed out that rules already state in 0450-01-.10(5)(e) that supervisors for LPC/MHSP candidates are limited to LPC/MHSP, licensed MFT and a list of other licenses that can do clinical work, so supervision by an LPC only should not be happening at all. Going forward, at least 75 of the 150 hours must be supervised by a LPC/MHSP and the other 75 hours must be by another licensed professional who can do clinical work i.e. NOT an LPC.
- Comment 2: TLPCA commented there needs to be a provision to deal with people coming from other states who were supervised only by LPCs, because those other states don't designate a difference between LPCs and LPC/MHSPs.
- Board Response: The Board agreed to insert "or equivalent" and add into the language in (e) "licensed clinical pastoral therapists".
- <u>Comment 3</u>: TLPCA asked to eliminate psychological examiners as supervisors and add psychiatric nurses. It has had discussions on and off over the years regarding this issue. TMHCA echoed this position. Dr. Wilson of Trevecca stated he is licensed by the Psych Board and the specification of senior psych examiners is sufficiently limiting. It is a very high level of training.
- <u>Board Response</u>: Because the Board is not familiar with the training for psychiatric nurses the Board put this issue aside.
- Comment 4: Francis Martin on behalf of TMHCA stated that some of the training methods for becoming a qualified supervisor take out the experiential aspect, which lowers the standard.
- Board Response: It was the Board's understanding that most accredited courses on supervision involve experiential learning as part of the course, so the standards do not seem to be so loose. Also, the Board was not prepared to immediately clamp down harshly on supervisor training because it would mean many fewer supervisors in a time period when people are already having difficulty finding supervisors and finding positions to complete their post-masters training in.

A special Board meeting was held on January 30, 2012 to address additional changes to the rules voted on at the 1/28/11 rulemaking hearing. These changes were requested by the Board's chairperson as a result of informal feedback she received from other professionals in the community and in an effort to ensure the Board was taking the proper steps to protect the public.

Comments regarding the definition of clinical setting (0450-01-.01(11)):

Comment 1: TLPCA representatives proposed draft rule language that would assign a job duty to the licensed mental health professionals on site requiring them to be immediately available to the applicant for supervision and or consultation at any time the applicant is engaging in the practice of counseling or counseling related services. In addition, TLPCA wanted to add to part (f) that compensation for services provided by the applicant would be paid directly to the place or practice and that the applicant may do probono work.

Board Response: After a short discussion the Board adopted all of the suggested provisions and added language specifying that it is in solo or group private practice that these protections are needed. In addition the Board changed the affiliation "by contract" language to affiliation "by agreement" so as to eliminate the impression that the applicant may be an independent contractor and added some elements the agreement must contain.

The Board was also concerned about how an unlicensed person defined themselves to the public. The Board discussed requiring persons who are working towards licensure to explain that they are not licensed and are being supervised. The Board further discussed the fact that requiring temporary licensure would solve this issue. However, the Board didn't want to require temporary licensure to begin supervision because it might discourage persons from attempting to get the LPC/MSHP – it would be an added hurdle – and making the temporary licensure easier to get is beyond the scope of this rule-making.

- Comment 2: Dr. Wilson of Trevecca Nazarene's graduate program in counseling argued that having a licensed professional on site at all times is very limiting and that the previously discussed twenty hours a week is sufficient.
- <u>Board Response</u>: The Board disagreed that twenty hours a week is enough, as that may not adequately protect the public. The language will reflect that the person must be on site at all times the applicant is engaging in counseling.

Comments regarding the definition of supervision (0450-01-.01(39)):

Comment 1: TLCPA urged the Board to allow more triadic or group hours of supervision for cost effectiveness.

<u>Board Response</u>: The Board found that TLPCA's statements were persuasive and deemed triadic supervision sufficient to protect the public, striking the language that limited triadic supervision to 50 of the 150 hours of supervision.

At the regularly scheduled board meeting on March 9, 2012 the Board addressed the possibility of rescinding the amendments to the rules that were made at the January 30, 2012 meeting and returning to the language of the original proposed rules of January 28, 2011. This change was contemplated by the Board due to numerous phone calls and other informal comments received from applicants, practitioners, supervising licensed mental health providers, and others professionals in the community, that prompted the Board to become concerned about the burden they were placing on applicants and the licensees that supervise the applicants during their clinical hours, as well as supervisorial liability.

Comments regarding the definition of clinical setting (0450-01-.01(11)):

<u>Comment 1</u>: TLPCA representatives reiterated their interest in keeping the language that was added during the January meeting that requires:

- a) That a licensed mental health professional be immediately available on the premises whenever an unlicensed applicant is engaging in counseling;
- b) That there be an agreement between the applicant and the place or practice that outlines supervision, job duties, liabilities, etc.
- c) That the payment should be directly to the practice; and
- d) That applicants may work pro bono.

In addition TLPCA proposed language to add detail to the rule requiring a facility emergency plan, which the Board implemented in the original proposed rules from the January 28, 2011 hearing.

Board Response:

- a) The Board polled other states and talked to members of the profession and decided to return to language from the original rulemaking hearing that requires a licensed mental health professional to be on site a minimum of 20 hours a week, but added that someone must be available at all times.
- b) The Board agreed that the supervisor takes on great responsibility and liability once they take on an applicant, so it is necessary to have an agreement to protect the supervisor. They retained the language suggested at the January 30, 2012 meeting by TLPCA.
- c) The Board agreed that having payment go directly to the practice will prevent the perception that

- applicants are practicing independently without a license. The Board retained this language.

 d) The Board agreed that pro bono work is good for society and retained this language.
- The Board adopted the language suggested by TLPCA that more specifically describes the written emergency plan that each clinical setting must have because this more adequately protects the public and the applicants and facility.
- <u>Comment 2</u>: Two licensees who are currently engaged in supervising applicants and one current applicant in supervision strongly encouraged the board to not adopt the provision prohibiting the applicant from accepting money directly.
- <u>Board Response</u>: The Board is sensitive to the need for more supervisors and more clinical settings, however they cannot allow unlicensed practice. They therefore required at least a specific agreement with or employment by the clinical setting, and if the practitioner will be accepting money directly from clients the Board required a temporary license. The Board adopted the provision because it provides protection for the public.
- Comment 3: Dr. Wilson of Trevecca Nazarene's graduate program in counseling suggested that a temporary license might become a requirement to prevent students from practicing unlicensed, especially if the requirements for earning a temporary license are eased.
- Board Response: Changing the requirements for a temporary licensure is outside the scope of this rulemaking hearing so the Board will not require temporary licensure, however the Board added an exception that if the applicant has a temporary license they may accept payment directly or practice pro bono.

At the Board meeting on September 7, 2012 the Board discussed changing some portions of the rule to clarify language and make the rules consistent throughout.

Comments regarding the supervision requirements (0450-01-.10):

Comment 1: Robin Lee of the TLCPA commented that TLPCA was in favor of some confusing language prohibiting supervision in a setting focused solely on one area of counseling was intended to have been removed in this section as it was removed from another section of the rules.

Board Response: The Board removed the language.

Regulatory Flexibility Addendum

Pursuant to T.C.A. § 4-5-401 through 4-5-404, prior to initiating the rule making process as described in T.C.A. § 4-5-202(a)(3) and T.C.A. § 4-5-202(a), all agencies shall conduct a review of whether a proposed rule or rule affects small businesses.

Regulatory Flexibility Analysis

- (1) The proposed rules do not overlap, duplicate, or conflict with other federal, state, or local government rules.
- (2) The proposed rules exhibit clarity, conciseness, and lack of ambiguity.
- (3) The proposed rules are not written with special consideration for the flexible compliance and/or reporting requirements because the licensing boards have, as their primary mission, the protection of the health, safety and welfare of Tennesseans. However, the proposed rules are written with a goal of avoiding unduly onerous regulations.
- (4) The compliance requirements throughout the proposed rules are as "user-friendly" as possible while still allowing the Division to achieve its mandated mission the protection of the health, safety and welfare of the citizens of Tennessee. There is sufficient notice between the rulemaking hearing and the final promulgation of rules to allow licensees to come into compliance with the proposed rules.
- (5) Compliance requirements are not consolidated or simplified for small businesses in the proposed rules for the protection of the health, safety and welfare of Tennesseans.
- (6) The standards required in the proposed rules are very basic and do not necessitate the establishment of performance standards for small businesses.
- (7) There are no unnecessary entry barriers or other effects in the proposed rules that would stifle entrepreneurial activity or curb innovation.

STATEMENT OF ECONOMIC IMPACT TO SMALL BUSINESSES

Name of Board, Committee or Council: Tennessee Department of Health, Board of Licensed Professional Counselors, Marital and Family Therapists, and Clinical Pastoral Therapists.

Rulemaking hearing date: January 28, 2011.

Types of small businesses that will be directly affected by the proposed rules:

These rule changes only affect licensed professional counselors. There is no impact on small businesses.

Types of small businesses that will bear the cost of the proposed rules:

These rule changes only affect licensed professional counselors. There is no cost to small businesses.

Types of small businesses that will directly benefit from the proposed rules:

These rule changes only affect licensed professional counselors. There is no benefit to small businesses.

Description of how small business will be adversely impacted by the proposed rules:

These rule changes only affect licensed professional counselors. There is no adverse impact on small businesses.

Alternatives to the proposed rule that will accomplish the same objectives but are less burdensome, and why they are not being proposed:

The Department of Health, Board of Licensed Professional Counselors, Marital and Family Therapists, and Clinical Pastoral Therapists does not believe there are less burdensome alternatives to the proposed rule amendments which achieve the same level protection for the public.

Comparison of the proposed rule with federal or state counterparts:

Federal: The Department of Health, Board of Licensed Professional Counselors, Marital and Family Therapists, and Clinical Pastoral Therapists is not aware of any federal counterparts.

State: The proposed rule amendments have no state counterpart.

Impact on Local Governments

Pursuant to T.C.A. 4-5-220 and 4-5-228 "any rule proposed to be promulgated shall state in a simple declarative sentence, without additional comments on the merits of the policy of the rules or regulation, whether the rule or regulation may have a projected impact on local governments." (See Public Chapter Number 1070 (http://state.tn.us/sos/acts/106/pub/pc1070.pdf) of the 2010 Session of the General Assembly)

These rule amendments are not expected to have an impact on local government.

Additional Information Required by Joint Government Operations Committee

All agencies, upon filing a rule, must also submit the following pursuant to TCA 4-5-226(i)(1).

(A) A brief summary of the rule and a description of all relevant changes in previous regulations effectuated by such rule;

0450-01-.01 Changes the definitions of Approved Supervisor, Clinical Setting and Supervision.

0450-01-.04 Deletes (1) and replaces it with a requirement that an applicant must complete the qualifications for licensure before submitting the application. Adds a course on multicultural counseling to the graduate coursework required for a professional counselor by examination and a professional counselor with mental health services provider designation. Deletes grandfathering period for up until June 30, 1997 for a professional counselor with mental health services provider designation. Deletes language regarding what the rules were before July 1, 2009.

0450-01-.07 Deletes the right to a contested case hearing for licensure denials in (5) and replaces it with an informal appeals process, which gives applicants an opportunity to appear before the Board.

0450-01-.08 Adds the ACA Code of Ethics to qualify the type of professional ethics tested on the jurisprudence examination.

0450-01-.10 Deletes (1) and replaces it with new requirements for supervisors, including adding clinical pastoral therapists to who can serve as a supervisor, training requirements, and a requirement that at least 75 of the 150 contact hours for those training for LPC/MHSP designation must come from supervision by a LPC/MHSP. Requires supervisors for LPC/MHSP to have the MHSP if they are licensed only as LPC. Adds a new (2) to provide a grandfathering period for up until January 31, 2013 for a LPC supervisor already providing supervision to someone training for LPC/MHSP designation. Deletes (5) and replaces it with renumbered (6) which eliminates language about requirements before July 1, 2009 and eliminates language which would be now duplicative of information in the new paragraph (1).

(B) A citation to and brief description of any federal law or regulation or any state law or regulation mandating promulgation of such rule or establishing guidelines relevant thereto;

The Office of General Counsel is unaware of any federal law or regulation or any state law or regulation mandating promulgation of such rule.

(C) Identification of persons, organizations, corporations or governmental entities most directly affected by this rule, and whether those persons, organizations, corporations or governmental entities urge adoption or rejection of this rule;

Persons seeking licensure under these rules as a Licensed Professional Counselor and a Licensed Professional Counselor with the designation of Mental Health Services Provider.

(D) Identification of any opinions of the attorney general and reporter or any judicial ruling that directly relates to the rule;

To the best of our knowledge, there are no Attorney General opinions relative to the new rules.

(E) An estimate of the probable increase or decrease in state and local government revenues and expenditures, if any, resulting from the promulgation of this rule, and assumptions and reasoning upon which the estimate is based. An agency shall not state that the fiscal impact is minimal if the fiscal impact is more than two percent (2%) of the agency's annual budget or five hundred thousand dollars (\$500,000), whichever is less;

There will be neither a positive nor a negative fiscal impact because the new rules concern a program that is self-sufficient.

(F) Identification of the appropriate agency representative or representatives, possessing substantial knowledge and understanding of the rule;

Johanna L. Barde, Assistant General Counsel, Department of Health, as well as the board administrator, Sherry Owens, are the appropriate agency representatives possessing substantial knowledge of these new rules.

(G) Identification of the appropriate agency representative or representatives who will explain the rule at a scheduled meeting of the committees;

Johanna L. Barde, Assistant General Counsel, Department of Health, as well as the board administrator, Sherry Owens, are the appropriate agency representatives who will explain the rule at a scheduled meeting of the committees.

(H) Office address, telephone number, and email address of the agency representative or representatives who will explain the rule at a scheduled meeting of the committees; and

Johanna L. Barde, Assistant General Counsel, Tennessee Department of Health, 220 Athens Way, Suite 210, Nashville, TN 37243, (615) 741-1611, Johanna.Barde@tn.gov; Sherry Owens, Bureau of Health Licensure and Regulation, 227 French Landing Drive, Suite 300 Nashville, TN 37243, (615) 532-5088, Sherry.Owens@tn.gov

(I) Any additional information relevant to the rule proposed for continuation that the committee requests.

RULES

OF

TENNESSEE BOARD FOR PROFESSIONAL COUNSELORS, MARITAL AND FAMILY THERAPISTS, AND CLINICAL PASTORAL THERAPISTS

CHAPTER 0450-01 GENERAL RULES GOVERNING PROFESSIONAL COUNSELORS

TABLE OF CONTENTS

0450-0101	Definitions	0450-0112	Continuing Education
0450-0102	Scope of Practice		Professional Ethics
0450-0103	Necessity of Certification or Licensure	0450-0114	Evidence of Professional Experience
0450-0104	Qualifications for Licensure		Disciplinary Actions and Civil Penalties
0450-0105	Procedures for Licensure	0450-0116	Duplicate Certificate or License
0450-0106	Fees	0450-0117	Change of Address and/or Name
0450-0107	Application Review, Approval, Denial, Interviews	0450-0118	Mandatory Release of Client Records
0450-0108	Examinations		Board Meetings, Officers, Consultants, Records.
0450-0109	Renewal of Certificate or License		Declaratory Orders, and Screening Panels
0450-0110	Supervision - Post-Masters	0450-0120	Consumer Right-To-Know Requirements
0450-0111	Retirement and Reactivation of Certificate or	0450-01-,21	
	License		

0450-01-.01 DEFINITIONS. As used in this rule, the terms and acronyms shall have the following meanings ascribed to them.

- (1) Actively engaged Engaged in the practice of professional counseling 10 clock or more faceto-face client contact hours per week.
- (2) Advertise Means, but is not limited to, the issuing or causing to be distributed any card, sign, or device to any person, or the causing, permitting or allowing any sign or marking on or in any building or structure, or in any newspaper, or magazine or in any directory, or on radio or television, or by advertising by any other means designed to secure public attention;
- (3) Applicant Any individual seeking licensure by the board who has submitted an official application and paid the application fee.
- (4) Approved Supervisor PC An approved supervisor for professional experience subsequent to the master's degree is defined as a currently Licensed Professional Counselor, Licensed Professional Counselor with Mental Health Service Provider designation, Licensed Marital and Family Therapist, Licensed Glinical Social Worker, Licensed Psychologist with Health Service Provider designation, Licensed Senior Psychological Examiner, or Licensed Psychiatrist, who has been licensed at least five (5) years and who takes responsibility for the practice of the supervisee during a specific time to enable the supervisee to meet the requirements of licensing.
 - (4) Approved Supervisor An approved supervisor for professional experience subsequent to the master's degree must be a currently Licensed Professional Counselor, Licensed Marital and Family Therapist, Licensed Clinical Pastoral Therapist, Licensed Clinical Social Worker, Licensed Psychologist with Health Service Provider designation, Licensed Senior Psychological Examiner, or Licensed Psychiatrist, who has been licensed at least five (5) years and who takes responsibility for the practice of the supervisee during a specific time to enable the supervisee to meet the requirements of licensing. If the supervisor is a Licensed Professional Counselor who is supervising a candidate for Licensed Professional Counselor with Mental Health Service Provider designation, the supervisor must have the Mental Health Service Provider designation.

- (5) Board The Board for Professional Counselors, Marital and Family Therapists, Clinical Pastoral Therapists.
- (6) Board administrative office The office of the administrator assigned to the board located at 227 French Landing, Suite 300, Heritage Place, MetroCenter, Nashville, TN 37243.
- (7) Board Designee Any person who has received a written delegation of authority from the board to perform board functions subject to review and ratification by the full board where provided by these rules.
- (8) Certified Associate Counselor Any person who has met the qualifications for CAC and holds a current, unsuspended or unrevoked certificate which has lawfully been issued by the board.
- (9) Certified Professional Counselor Any person who has met the qualifications for CPC and holds a current, unsuspended or unrevoked certificate which has lawfully been issued by the board.
- (10) Clinically-related activities Clinically-related workshops, trainings and seminars, treatment teams, clinical supervision, and research and leadership preparation for individual and group counseling. Graduate coursework in pursuit of licensure and administrative supervision in the work setting are not clinically-related activities.
- (11) Clinical setting. A setting that applies the principles, methods, and therapeutic techniques practiced by professional counselors including diagnosis, appraisal, assessment, treatment and treatment planning of a broad spectrum of client problems including, but not limited to, developmental, mental, emotional, family, and DSM disorders. A clinical setting is that which ensures adequate supervision by no fewer than two (2) licensed mental health professionals, as listed in Rule 0450-01-.05 (5) (b) 1, and shall provide adequate supervision and training experiences with the physical resources necessary to allow for supervision and appropriate service delivery. A clinical setting shall include, but not be limited to, mental health or community agency settings pursuant to T.C.A. §§ 63-22-104 (3) (B). Clinical settings which are exclusively in a private practice and/or clinical settings which focus exclusively on only one (1) aspect of professional counseling (i.e. counseling of children) are not acceptable for meeting the supervision requirements of Rule 0450-01-.10.
 - (11) Clinical setting A place where the practice of professional counseling occurs. An appropriate setting for an applicant's pre and post master's professional experience must meet the following criteria:
 - (a) The place or practice shall be a public, private, or community agency/mental health setting and must have integrated programs for the delivery of clinical mental health counseling in accordance with these rules and defined by definition (29) for non-Mental Health Service Provider designation and definition (30) for the Mental Health Service Provider designation.
 - (b) The place or practice shall offer adequate physical resources, such as a private space that meets HIPAA requirements, necessary to allow for supervision and appropriate service delivery.
 - (c) The place or practice shall have at least one licensed mental health professional on site for a cumulative minimum of 20 hours per week whose assigned job duties include being available to the applicant for supervision and/or consultation while the applicant is engaging in the practice of counseling or counseling related services. In addition, the place or practice shall have a written emergency plan in

place to include method(s) of contacting supervisor(s) or other consultant(s), alternative contacts when supervisors() is(are) unavailable, information regarding crisis services, and crisis decision-making. The licensed mental health professional can serve as the applicant's supervisor if he or she meets the supervisor requirements pursuant to 0450-01-.10. If the licensed mental health professional on staff at the place or practice is unable or unwilling to serve as the applicant's supervisor, the applicant must secure a supervisor who meets the supervisor requirements pursuant to 0450-01-.10.

- (d) For an applicant pursuing post-master's professional experience, the place or practice shall not be owned, or independently operated by the applicant. An applicant shall not seek a clinical setting or supervision that is in conflict with the multiple relationships addressed by the American Counseling Association's Code of Ethics. Prior to choosing a clinical setting, if an applicant is uncertain, he or she shall seek advice about what is considered acceptable from the Board.
- (e) In the case of pre-master's professional experience, the place or practice shall have written provisions to provide supervision and training experience as defined by graduate counseling program expectations.
- (f) The applicant shall be an employee of the place or practice, or shall be affiliated by agreement. All agreements shall include but not be limited to the following information: the name of the individual responsible for supervision, specific job duties/responsibilities, method for obtaining and scheduling clients, liability insurance information, payment arrangements, emergency plan, and facility and service logistics. Compensation for services provided by the applicant shall be paid directly to the place or practice unless the applicant has a temporary license, at which time the applicant may be paid on an agreed upon basis or may provide services on a pro bono basis.
- (12) Client Contact Hour A 50 minute period a counselor or therapist spends working with an individual, family or group.
- (13) Closed Files An administrative action which renders an incomplete or denied file inactive.
- (14) Clock hour Sixty minutes in a continuing education activity. Providers who measure continuing education activities in "continuing education units" shall define CEU in clock hours.
- (15) Continuing education Education beyond the basic licensing educational requirement which is related to the practice of professional counseling.
- (16) Department Tennessee Department of Health.
- (17) Division The Division of Health Related Boards, Tennessee Department of Health, from which the board receives administrative support.
- (18) Fee Money, gift, services or anything of value offered or received as compensation in return for rendering services.
- (19) Fee Splitting The practice of paying commissions to colleagues out of fees received from clients who have been referred by the colleague for services.
- (20) Good Moral Character Any individual being highly regarded in personal behavior and professional ethics.

- (21) He/she His/her When he or his appears in the text of these rules the word represents both the feminine and masculine genders.
- (22) HRB When the acronym HRB appears in this rule, it is intended to mean Health Related Boards.
- (23) Internship The supervised, planned, practical experience completed near the end of the education process and obtained in the clinical setting by observing and applying the principles, methods, and techniques learned in training and/or educational settings. The internship involves a longer period of time than the practicum.
- (24) License Document issued to an applicant who successfully completes the licensure process. The license takes the form of an "artistically designed" license as well as other versions bearing an expiration date.
- (25) Licensed Professional Counselor Any person who has met the qualifications for professional counselor and holds a current, unsuspended, or unrevoked license which has been lawfully issued by the board.
- (26) Mental health/community agency setting For purposes of the supervision requirements of this chapter, a clinical setting as defined in paragraph (11).
- (27) NBCC When the acronym NBCC appears in this rule, it is intended to mean National Board for Certified Counselors and may be referred to in these rules as the "testing agency".
- (28) Person Any individual, firm, corporation, partnership, organization, or body politic.
- (29) Practice of Professional Counseling (without the designation as a mental health service provider) –Rendering or offering to render to individuals, groups, organizations, or the general public any service involving the application of principles, techniques, methods, or procedures of the counseling profession, including appraisal activities, as defined by the law, counseling, consulting and referral activities. Nothing in this section shall be construed to permit the treatment of any mental, emotional or adjustment disorder other than marital problems, parent-child problems, child, and adolescent antisocial behavior, adult antisocial behavior, other specified family circumstances, other interpersonal problems, phase of life problems, other life circumstance problems, occupational problems, and uncomplicated bereavement.
- (30) Practice of counseling as a mental health services provider the application of mental health and human development principles in order to:
 - (a) facilitate human development and adjustment throughout the life span;
 - (b) prevent, diagnose, and treat mental, emotional or behavioral disorders and associated disorders which interfere with mental health;
 - (c) conduct assessments and diagnoses for the purpose of establishing treatment goals and objectives within the limitations prescribed in T.C.A. § 63-22-150(1); and
 - (d) plan, implement, and evaluate treatment plans using counseling treatment interventions. Counseling treatment interventions shall mean the application of cognitive, affective, behavioral and systemic counseling strategies which include principles of development, wellness, and pathology that reflect a pluralistic society. Nothing in this definition shall be construed to permit the performance of any act which licensed professional counselors designated as mental health service providers are not

- educated and trained to perform, nor shall it be construed to permit the designation of testing reports as "psychological".
- (31) Practicum The supervised, planned, practical experience occurring in a clinical setting, for an early introduction to subject matter. It is generally time-bound and for a shorter period of time than an internship, but it allows for demonstration and testing of information, knowledge, and skills acquired. (30) Professional Counseling Assisting an individual, through the counseling relationship, in a manner intended to facilitate normal human growth and development, using a combination of mental health and human development principles, methods and techniques, to achieve mental, emotional, physical, social, moral, educational, spiritual, and/or career development and adjustment through the lifespan.
- (32) Professional Counseling Assisting an individual, through the counseling relationship, in a manner intended to facilitate normal human growth and development, using a combination of mental health and human development principles, methods and techniques, to achieve mental, emotional, physical, social, moral, educational, spiritual, and/or career development and adjustment through the lifespan.
- (33) Professional Experience A minimum of 10 client contact hours per week engaged in activities as described in the definition of professional counseling, and practice of counseling excluding volunteer hours.
- (34) Private Practice Practice of counseling or therapy other than in a public or nonprofit agency or entity.
- (35) Recognized educational institution Any educational institution that is accredited by a nationally or regionally recognized educational body.
- (36) Registrant Any person who has been lawfully issued a certificate or license.
- (37) Relative Parent, spouse, former spouse, siblings, children, cousins, in-laws (present and former), aunts, uncles, grandparents, grandchildren, step-children, employees, or anyone sharing the same household.
- (38) Supervisee An individual who is engaged in post graduate or graduate, supervised experience under the direction of a supervisor.
- (39) Supervision The ongoing, direct clinical review, for the purpose of training or teaching, by an approved supervisor who monitors the performance of a person's supervised interaction with a client and provides regular documented face to face consultation, guidance, and instructions with respect to the clinical skills and competencies of the person supervised. Supervision may include, without being limited to, the review of case presentations, audio tapes, video tapes, and direct observation.
 - (39) Supervision Ongoing, direct clinical oversight for the purpose of training or teaching.

 Supervision may include, without being limited to, the review of case presentations, audio tapes, video tapes, and direct observation.
 - (a) Supervision shall be by an approved supervisor.
 - (b) An approved supervisor shall monitor the performance of an applicant's interaction with a client and provide regular documented face-to-face or live video conferencing (with prior board approval based on hardship), consultation, guidance, and instructions with respect to the clinical skills and competencies of the applicant.

- (c) Individual supervision is supervision as defined by models developed by the Council for Accreditation of Counseling and Related Educational Programs (CACREP) for individual (one supervisor to supervisee) or triadic supervision (one supervisor to two supervisees).
- (d) Group supervision is supervision by one supervisor of a minimum of three (3) and a maximum of eight (8) supervisees. Of the 150 hours collected, no more than fifty (50) hours may be group supervision.
- (40) Use a title or description of To hold oneself out to the public as having a particular status by means of stating on signs, mailboxes, address plates, stationery, announcements, business cards or other instruments of professional identification.
- (41) Written evidence Includes, but is not limited to, verification from supervisors or other professional colleagues familiar with the applicant's work.

Authority: T.C.A. §§ 4-5-202, 4-5-204, 63-1-145, 63-22-102, 63-22-104, 63-22-117 and 63-22-120. Administrative History: Original rule filed October 9, 1986; effective November 23, 1986. Repeal and new rule filed April 29, 1992; effective June 13, 1992. Amendment filed April 16, 1996; effective June 30, 1996. Amendment filed June 18, 1996; effective September 4, 1996. Amendment filed December 13, 2000; effective February 26, 2001. Amendment filed November 21, 2001; effective February 4, 2002. Amendment filed April 30, 2002; effective July 14, 2002. Amendment filed August 16, 2002; effective October 30, 2002. Amendment filed October 30, 2002; effective January 13, 2003. Amendment filed July 21, 2004; effective October 4, 2004. Amendment filed April 17, 2007; effective July 1, 2007. Amendment filed November 26, 2008; effective February 9, 2009.

0450-01-.02 SCOPE OF PRACTICE.

- (1) The following shall be considered necessary when addressing the scope of practice for professional counselors:
 - (a) Assisting an individual, through the counseling relationship, in a manner intended to facilitate normal human growth and development, using a combination of mental health and human development principles, methods and techniques, to achieve mental, emotional, physical, social, moral, educational, spiritual and/or career development and adjustment through the lifespan.
 - (b) Rendering or offering to render to individuals, groups, organizations, or the general public any service involving the application of principles, techniques, methods or procedures of the counseling profession, including appraisal activities, counseling, consulting and referral activities. Nothing in this section shall be construed to permit the treatment of any mental, emotional or adjustment disorder other than marital problems, parent-child problems, child and adolescent antisocial behavior, adult antisocial behavior, other specified family circumstances, other interpersonal problems, phase of life problems, other life circumstance problems, occupational problems, and uncomplicated bereavement.
 - (c) Selecting, administering, scoring, and interpreting instruments designed to assess an individual's aptitudes, achievements, or interests, which are used to understand, measure or facilitate such individual's normal human growth and development, but shall not include the use of projective techniques in the assessment of personality, nor the use of psychological or clinical tests designed to identify or classify abnormal or pathological human behavior, nor the use of individually administered intelligence tests. Consistent with each counselor's formal education and training, licensed or certified

- (4) These rules shall not apply to any Christian Science practitioner or to any priest, rabbi, or minister of the gospel of any religious denomination when performing counseling services as part of his pastoral or professional duties, or to any person who is licensed to practice medicine, when providing counseling services as part of his professional practice.
- (5) No other person shall hold himself out to the public by a title or description of services incorporating the words "certified professional counselor" (CPC) or "licensed professional counselor" (LPC), and he shall not state or imply that he is certified or licensed. Nothing in this rule shall prohibit a person from stating or using the educational degrees which he has obtained.
- (6) Use of Titles -
 - (a) Any person who possesses a valid, unsuspended and unrevoked certificate issued by the Board has the right to use the title "Certified Professional Counselor" and to practice professional counseling, as defined in Rule 0450-01-.01.
 - (b) Any person who possesses a valid, unsuspended and unrevoked license issued by the Board has the right to use the title "Licensed Professional Counselor" and to practice professional counseling, as defined in T.C.A. § 63-22-150.
 - (c) Any person licensed by the Board to whom this rule applies must use the titles authorized by this rule whenever he or she is "advertising" [as that term is defined in rule 0450-01-.01 (2)] or the failure to do so will constitute an omission of a material fact which makes the advertisement misleading and deceptive and subjects the professional counselor to disciplinary action pursuant to T.C.A. §§ 63-22-110 (b) (4) and 63-22-117 (a) (1).
- (7) These provisions do not apply to counselors working in a community/human services agency nor to professional counselors whose work is directly being supervised by an approved supervisor while obtaining the required years of work experience.

Authority: T.C.A. §§ 4-5-202, 4-5-204, 63-1-145, 63-1-146, 63-22-102, 63-22-110, 63-22-117, and 63-22-150. **Administrative History:** Original rule filed October 9, 1986; effective November 23, 1986. Repeal and new rule filed April 29, 1992; effective June 13, 1992. Amendment filed April 10, 2002; effective June 24, 2002. Amendment filed April 17, 2007; effective July 1, 2007. Amendment filed November 26, 2008; effective February 9, 2009.

0450-01-.04 QUALIFICATIONS FOR LICENSURE.

- (1) Professional Counselor by Examination. To be eligible to submit an application, a candidate must show completion of the following qualifications:
- (1) Professional Counselor by Examination. Prior to submitting an application each of the following qualifications must be met by a candidate for professional counselor by examination.
 - (a) Be at least 18 years of age.
 - (b) Must provide evidence that he is highly regarded in moral character and professional ethics (rule 0450-01-.05).
 - (c) Education. The educational requirements must be completed prior to the date of application.

- Sixty (60) graduate semester hours, based upon a program of studies with a major in counseling, completed from an institution accredited by the Southern Association of Colleges and Schools, the Counsel for Accreditation of Counseling and Related Educational Programs, or a comparable accrediting body.
- 2. The graduate coursework should include, but is not limited to, core areas of (one course may satisfy study in more than one of the study areas):
 - (i) Theories of human behavior, learning and personality;
 - (ii) __ Abnormal behavior;
 - (iii) Theories of counseling and psychotherapy:
 - (iv) Evaluation and appraisal procedures;
 - (v) Group dynamics, theories and techniques;
 - (vi) Counseling techniques:
 - (vii) Multicultural counseling:
 - (viii) Ethics;
 - (ix) Research:
 - (x) Clinical practicum or internship (pursuant to T.C.A. § 63-22-104)
- 2. The graduate coursework should include, but is not limited to, core areas of (one course may satisfy study in more than one of the study areas):

Theories of human behavior, learning and personality

Abnormal behavior

Theories of counseling and psychotherapy

Evaluation and appraisal procedures

Group dynamics, theories and techniques

Counseling techniques

Ethics

Research

Clinical practicum or internship (pursuant to T.C.A. § 63-22-104)

- (d) A minimum of two (2) years of supervised post master professional experience consisting of not less than ten (10) hours per week and fifty (50) contact hours of supervision per year as defined by Rule 0450-01-.10 (1).
- (e) Pass the examination pursuant to rule 0450-01-.08.
- (f) Until receipt of a license to practice as a Professional Counselor, an applicant will be required to practice under supervision, pursuant to Rule 0450-01-.10.
- (2) Upgrading from Certified Professional Counselor Status to Licensed Professional Counselor Status
 - (a) Individuals certified on July 1, 1991, as professional counselors may upgrade from certification to licensure by any of the following methods:

- 1. Providing a copy of his current CPC renewal certificate and verification to the board's satisfaction, that he has had five years work experience, pursuant to rule 0450-01-.14, as a certified professional counselor.
- 2. Providing a copy of his current CPC renewal certificate and evidence that he has been certified by the NBCC.
- 3. Providing a copy of his current CPC renewal certificate and complying with the requirements pursuant to rule 0450-01-.04(1).
- (b) Upgrading from Certified Associate Professional Counselor Status to Licensed Professional Counselor Status
 - Any person certified as an Associate Counselor on July 1, 1991, shall be deemed to be a Certified Professional Counselor, but only for the purpose of upgrading to Licensed Professional Counselor.
 - For the purpose of upgrading to Licensed Professional Counselor from Certified Associate Counselor, the board will accept a passing score on the PES examination, which was previously required for Associate Professional Counselors, as fulfilling the requirement of 0450-01-.08.
- (3) Licensed Professional Counselor by Reciprocity. Individuals seeking licensure by reciprocity must meet the following qualifications:
 - (a) Hold a current professional counselor license from another state;
 - (b) Meet licensure requirements pursuant to Rule 0450-01-.04(1)(a) through (d); and
 - (c) Pass all the examinations required pursuant to Rule 0450-01-.08.
- (4) Professional Counselor with Mental Health Services Provider designation.
 - (a) Prior to submitting an application, each of the following qualifications must be met by a candidate for professional counselor with Mental Health Services Provider designation:
 - 1. Be at least 18 years of age.
 - 2. Must provide evidence that he is highly regarded in moral character and professional ethics (Rule 0450-01-.05).
 - 3. Meet the following educational requirements prior to the date of application:
 - (i) Sixty (60) graduate semester hours, based upon a program of studies with a major in counseling, completed from an institution accredited by the Southern Association of Colleges and Schools, the Counsel for Accreditation of Counseling and Related Educational Programs, or a comparable accrediting body;
 - (ii) The graduate coursework should include, but is not limited to, the following core areas (one course may satisfy study in more than one of the study areas):
 - (I) Theories of human behavior, learning and personality
 - (II) Abnormal behavior and psychopathology

- (III) Theories of counseling and psychotherapy
- (IV) Evaluation and appraisal procedures
- (V) Group dynamics, theories and techniques
- (VI) Counseling techniques
- (VII) Multicultural counseling
- (VIII) Ethics
- (IX) Research
- (X) Use of the DSM
- (XI) Treatment and treatment planning
- (XII) Clinical practicum or internship (pursuant to T.C.A. § 63-22-104);
- (I) Theories of human behavior, learning and personality
- (II) Abnormal behavior and psychopathology
- (III) Theories of counseling and psychotherapy
- (IV) Evaluation and appraisal procedures
- (V) Group dynamics, theories and techniques
- (VI)—Counseling-techniques
- (VII) Ethics
- (VIII) Research
- (IX) Use of the DSM
- (X) Treatment and treatment planning
- (XI) Clinical practicum or internship (pursuant to T.C.A. § 63-22-104);

4. Meet the following requirements for post-masters professional experience:

- (i) Until July 1, 2009, complete 1000 hours of post-masters professional experience, including 100 hours of supervised experience obtained pursuant to Rule 0450-1--10(5).
- (i) Complete three thousand (3000) hours of supervised post-masters professional experience, including one hundred and fifty (150) contact hours of supervision obtained pursuant to Rule 0450-01-10(6).
- (ii) As of July 1, 2009, complete three thousand (3000) hours of supervised post-masters professional experience, including one hundred and fifty (150) contact hours of supervision obtained pursuant to Rule 0450-01-10(5).

- (I) One thousand and five hundred (1500) of the three thousand (3000) hours of supervised post-masters professional experience shall be face-to-face client contact hours.
- (II) One thousand and five hundred (1500) of the three thousand (3000) hours of supervised post-masters professional experience shall be clinically-related activities;
- 5. Pass the examination pursuant to Rule 0450-01-.08.
- (b) For the purpose of mental health service provider designation pursuant to T.C.A. § 63-22-150, "has completed a minimum of nine (9) graduate semester hours of coursework specifically related to diagnosis, treatment, appraisal and assessment of mental disorders" will be interpreted to mean passing nine (9) semester hours, either during the course of a graduate degree or as post-graduate work, in courses which include diagnosis, treatment and treatment planning, appraisal and assessment of mental disorders, psychopathology, and the use of the DSM, were the entire focus of the course or comprised a substantial portion of the course work.
- (c) Until June 30, 1997, the Board will designate as mental health service provider any professional counselor holding licensure in Tennessee as of July 1, 1995, provided such person submits an application according to the following procedure for such designation to the Board by June 30, 1997.
 - Each applicant for designation as a mental health service provider must complete an application which specifies those mental health services, such as diagnosis, treatment, appraisal and assessment of mental disorders, which the applicant has provided to the public for a minimum of two (2) years prior to the application. This may include teaching courses in the above indicated areas for a minimum of three (3) years in a graduate program of an institution of higher education which is accredited by a regional or national accrediting agency such as listed in Rule 0450-01-04(1)(c)1.
 - 2. All applicants must be qualified by a combination of education, training and experience to have delivered such services as diagnosing, treating, appraisal and assessment and must indicate the nature of the education, training and experience being offered for consideration.
 - 3. The applicant must be able to demonstrate evidence of having provided mental health services within the bounds of ethics, standards, law and the rules and regulations in effect at the time of provision of these health services. This evidence shall consist of an affidavit of two (2) licensed professional counselors, licensed clinical social workers, licensed psychologists with designation as health service provider, or licensed psychiatrists, each of whom attest that the applicant has been engaged for two (2) years in the provision of mental health services and appears qualified to provide such services.
 - 4. If the applicant is claiming mental health services experience which was provided in another state, the applicant must submit the affidavits of two (2) licensed professional counselors, licensed clinical social workers, licensed psychologists with designation as health services provider, or licensed psychiatrists in that state which attest the applicant has been engaged for two (2) years in the provision of mental health services and is qualified to provide such services.
 - 5. All affidavits must be received directly by the Board from the attesting person and must include the following information:

- (i) specification of the types of mental health services provided,
- (ii) the setting in which they were provided, including the duration in that setting,
- (iii) the nature of the relationship between the attesting individual submitting the affidavit and the applicant, and
- (iv) the manner in which the attesting individual submitting the affidavit acquired the personal knowledge of the mental health services which the applicant is claiming as qualifying.
- 6. All applicants must provide documentation of such education and training which supports their eligibility of the Board's designation as mental health service provider. Acceptable documentation for training and education consists of transcripts, certificates of attendance for relevant workshops/seminars, brochures, programs, agendas and cancelled checks or receipts indicating attendance.
- (5) Licensed Professional Counselor with Mental Health Service Provider designation, by reciprocity. Individuals seeking licensure by reciprocity as Licensed Professional Counselors with Mental Health Service Provider designation must meet the following qualifications.
 - (a) Hold a current professional counselor license with a Mental Health Provider designation, or its equivalent, from another state.
 - (b) Meet licensure requirements pursuant to Rules 0450-01-.04(4)(a)1. through 4. and 0450-01-.04(4)(b).
 - (c) Pass all the examinations required pursuant to Rule 0450-01-.08.

Authority: T.C.A. §§ 4-5-202, 4-5-204, 63-22-102, 63-22-104, 63-22-107, 63-22-116, 63-22-120, and Public Chapter 318, Acts of 1995. Administrative History: Original rule filed October 9, 1986; effective November 23, 1986. Repeal and new rule filed April 29, 1992; effective June 13, 1992. Amendment filed October 18, 1995; effective January 1, 1996. Amendment filed April 16, 1996; effective June 30, 1996. Amendment filed June 18, 1996; effective September 4, 1996. Amendment filed January 31, 2000; effective April 15, 2000. Amendment filed September 4, 2003 was effective November 18, 2003. However; Stay of effective date filed by the Board for Professional Counselors, Marital and Family Therapists, and Clinical Pastoral Therapists on November 7, 2003; new effective date January 17, 2004. Amendment filed November 26, 2008; effective February 9, 2009.

0450-01-.05 PROCEDURES FOR LICENSURE. To become licensed as a professional counselor in Tennessee a person must comply with the following procedures and requirements.

- (1) Professional Counselor by Examination
 - (a) An application shall be requested from the Board's administrative office or shall be downloaded from the Internet.
 - (b) An applicant shall respond truthfully and completely to every question or request for information contained in the form, and submit it along with all documentation and fees required by the form and this rule to the board's administrative office. It is the intent of this rule that all steps necessary to accomplish the filing of the required documentation

0450-01-.07 APPLICATION REVIEW, APPROVAL, DENIAL, INTERVIEWS.

- (1) An application shall be requested from the Board's administrative office or shall be downloaded from the Internet. The submitted application shall be accompanied by the nonrefundable application fee pursuant to rule 0450-01-.06.
- (2) Applications for licensure will be accepted throughout the year and files which are completed on or before the 30th day prior to the meeting will ordinarily be processed at the next board meeting scheduled for the purpose of reviewing files.
- (3) Initial review of all applications to determine whether or not the application file is complete may be delegated to the board's administrator. Initial approval or denial must then be made by at least one member of the board or its designated consultant after review by that person. Any such initial approval or denial must be ratified or reversed by the board.
- (4) If an application is incomplete when received in the Board's administrative office, a deficiency letter will be sent to the applicant notifying him/her of the deficiency. The requested information must be received in the Board's administrative office before a licensure decision will be made. Under no circumstances shall licensure be granted to any applicant whose application the board has determined to be incomplete.
- (5) If a completed application has been denied and ratified as such by the board, the action shall become final and a notification of the denial shall be sent by the board's administrative office by certified mail return receipt requested. Specific reasons for denial will be stated, such as incomplete information, unofficial records, examination failure, or other matters judged insufficient for licensure and such notification shall contain all the specific statutory or rule authorities for the denial.
- (6) If an applicant believes that a denial was in error, they may request in writing to appear before the Board not less than thirty (30) days before the next regularly scheduled meeting of the Board.
- (5) If a completed application has been denied and ratified as such by the board, the action shall become final and the following shall occur:
 - (a) A notification of the denial shall be sent by the board's administrative office by certified mail return receipt requested. Specific reasons for denial will be stated, such as incomplete information, unofficial records, examination failure, or other matters judged insufficient for licensure and such notification shall contain all the specific statutory or rule authorities for the denial.
 - (b) The notification, when appropriate, shall also contain a statement of the applicant's right to request a contested case hearing under the Tennessee Administrative Procedures Act (T.C.A. §§ 4-5-301, et seq.) to contest the denial and the procedure necessary to accomplish that action.
 - (c) An applicant has a right to a contested case hearing only if the licensure denial was based on subjective or discretionary criteria.
 - (d) An applicant may be granted a contested case hearing if licensure denial is based on an objective, clearly defined criteria only if after review and attempted resolution by the board's administrative staff, the licensure application can not be approved and the reasons for continued denial present a genuine issue of fact and/or law which is appropriate for appeal. Such request must be made in writing to the board within 30 days of the receipt of the notice from the board.

- (67) If the board finds it has erred in the issuance of a license, the board will give written notice by certified mail of its intent to revoke the license. The notice will allow the applicant the opportunity to meet the requirements of licensure within 30 days from date of receipt of the notification. If the applicant does not concur with the stated reason and the intent to revoke the license, the applicant shall have the right to proceed according to rule 0450-01-.07(5).
- (78) Whenever requirements for licensure are not completed within six (6) months from the date of the initial review of application and credentials, written notification will be mailed to the applicant and the application file will be closed. An applicant whose file has been closed shall subsequently be considered for licensure only upon the filing of a new application and payment of all appropriate fees.
- (89) Abandonment of Application An application shall be deemed abandoned and closed if the application has not been completed by the applicant within six (6) months after it was initially reviewed.
 - (a) The above action must be ratified by the Board.
 - (b) An application submitted subsequent to the abandonment of a prior application shall be treated as a new application.
- (910) If an applicant requests one entrance for licensure and after Board review, wishes to change that application to a different type of entrance, a new application, with supporting documents and an additional application fee must be submitted, i.e., reciprocity to examination.

Authority: T.C.A. §§4-5-202, 4-5-204, 63-22-102, 63-22-104, 63-22-107, 63-22-110, 63-22-116, and 63-22-120. Administrative History: Original rule filed October 9, 1986; effective November 23, 1986. Repeal and new rule filed April 29, 1992; effective June 13, 1992. Amendment filed January 31, 2000; effective April 15, 2000. Amendment filed July 31, 2000; effective October 14, 2000. Amendment filed July 16, 2003; effective September 29, 2003. Amendment filed September 4, 2003 was effective November 18, 2003. However; Stay of effective date filed by the Board for Professional Counselors, Marital and Family Therapists, and Clinical Pastoral Therapists on November 7, 2003; new effective date January 17, 2004. Amendment filed October 6, 2004; effective December 20, 2004.

0450-01-.08 EXAMINATIONS. Prior to submitting an application to the Board for consideration for licensure, individuals shall pass the examinations required by this rule.

- (1) The Board adopts as its licensure examination for professional counselors the following examinations or their successor examinations given by the National Board for Certified Counselors (NBCC):
 - (a) The National Counselor Examination; and
- (b) The Tennessee jurisprudence examination concerning Tennessee's professional counselor statutes and regulations which is administered by the NBCC; and
 - (b) The Tennessee jurisprudence examination concerning Tennessee's professional counselor statutes and regulations and professional ethics based on the ACA Code of Ethics, which is administered by the NBCC.
 - (c) If applying for licensure as a professional counselor with Mental Health Service Provider designation, the National Clinical Mental Health Counseling Examination.
 - (2) Admission to, application for, and fees to sit for the examinations are governed by and must be submitted directly to NBCC.

- (3) The applicant may receive additional information concerning NBCC examinations and NBCC administered examinations by writing to NBCC, 3 Terrace Way, Suite D, Greensboro, NC 27403-3660.
- (4) Passing scores on NBCC examinations and NBCC administered examinations are determined by NBCC. Such passing scores as certified by the Board are adopted by the Board as constituting successful completion of the examinations.
- (5) Certification of passing the examinations must be submitted directly to the Board from NBCC in conjunction with the applicant's filing an application for licensure with this Board. It is the applicant's responsibility to initiate the submission of the exam scores to the Board.
- (6) If an applicant neglects, fails, or refuses to take an examination or fails to pass the examination for a license under these rules within twelve (12) months after being deemed eligible to sit by the Board, the application for licensure will be denied. However, such an applicant may thereafter make a new application accompanied by the required fee. The applicant shall meet any requirements in effect at the time of the new application.

Authority: T.C.A. §§4-5-202, 4-5-204, 63-22-102, 63-22-104, and 63-22-107. Administrative History: Original rule filed October 9, 1986; effective November 23, 1986. Repeal and new rule filed April 29, 1992; effective June 13, 1992. Amendment filed June 18, 1996; effective September 4, 1996. Amendment filed September 4, 2003 was effective November 18, 2003. However; Stay of effective date filed by the Board for Professional Counselors, Marital and Family Therapists, and Clinical Pastoral Therapists on November 7, 2003; new effective date January 17, 2004.

0450-01-.09 RENEWAL OF CERTIFICATE OR LICENSE.

(1) Renewal Application

(a) The due date for certificate and license renewal is the last day of the month in which a licensee's birthdate falls pursuant to the Division of Health Related Board's biennial birthdate renewal system as contained as the expiration date on renewal certificates.

(b) Methods of Renewal

1. Internet Renewals - Individuals may apply for renewal and pay the necessary fees via the Internet. The application to renew can be accessed at:

www.tennesseeanytime.org

- 2. Paper Renewals For licensees or certificate holders who have not renewed their license or certificate online via the Internet, a renewal application form will be mailed to each licensee and certificate holder to the last address provided to the Board. Failure to receive such notification does not relieve the individual of the responsibility of timely meeting all requirements for renewal.
- (c) A certificate or license issued pursuant to these rules is renewable by the expiration date indicated on the certificate or license. To be eligible for renewal, an individual must submit to the Division of Health Related Boards on or before the expiration date all of the following:
 - A completed and signed renewal application form.
 - 2. The renewal and state regulatory fees as provided in rule 0450-01-.06.

(a) The due date for certificate and license renewal is the last day of the month in which a licensee's birthdate falls pursuant to the Division of Health Related Board's biennial birthdate renewal system as contained as the expiration date on renewal certificates.

(b) Methods of Renewal

1. Internet Renewals - Individuals may apply for renewal and pay the necessary fees via the Internet. The application to renew can be accessed at:

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- Paper Renewals For licensees or certificate holders who have not renewed their license or certificate online via the Internet, a renewal application form will be mailed to each licensee and certificate holder to the last address provided to the Board. Failure to receive such notification does not relieve the individual of the responsibility of timely meeting all requirements for renewal.
- (c) A certificate or license issued pursuant to these rules is renewable by the expiration date indicated on the certificate or license. To be eligible for renewal, an individual must submit to the Division of Health Related Boards on or before the expiration date all of the following:
 - 1. A completed and signed renewal application form.
 - 2. The renewal and state regulatory fees as provided in rule 0450-01-.06.
- (d) Licensees or certificate holders who fail to comply with the renewal rules or notification received by them concerning failure to timely renew shall have their licenses or certificates processed pursuant to rule 1200-10-1-.10.
- (2) Reinstatement of an Expired Certificate or License
 - (a) Certificates or licenses that have expired may be reinstated upon meeting the following conditions:
 - 1. Payment of all past due renewal fees;
 - 2. Payment of the late renewal fee provided in Rule 0450-01-.06; and
 - 3. Submission of evidence of completion of continuing education requirements pursuant to Rule 0450-01-.12.
 - (b) Renewal issuance decisions pursuant to this rule may be made administratively or upon review by any board member or the board's designee.
 - (c) Anyone submitting a signed renewal form or letter which is found to be untrue may be subject to disciplinary action as provided in rule 0450-01-.15.

Authority: T.C.A. §§4-5-202, 4-5-204, 63-1-107, 63-22-102, 63-22-108, 63-22-110, and 63-22-111. Administrative History: Original rule filed October 9, 1986; effective November 23, 1986. Repeal and new rule filed April 29, 1992; effective June 13, 1992. Amendment filed June 18, 1996; effective September 4, 1996. Amendment filed April 30, 2002; effective July 14, 2002.

0450-01-.10 SUPERVISION - POST-MASTERS.

- (1) Professional Counselor's Supervision. A supervisor providing supervision on or after January 31, 2013 must comply with the following requirements:
 - (a) Experience Supervisors must have been licensed at least five (5) years as Licensed Professional Counselor, Licensed Professional Counselor with Mental Health Service Provider, Licensed Marital and Family Therapist, Licensed Clinical Pastoral Therapist, Licensed Psychologist with Health Service Provider designation, Licensed Senior Psychological Examiner, Licensed Psychiatrist, or Licensed Clinical Social Worker.
 - (b) Supervisors for applicants pursuing designation as Mental Health Service Provider shall be currently Licensed Professional Counselors with Mental Health Service Provider designation or equivalent, Licensed Marital and Family Therapists, Licensed Clinical Pastoral Therapists, Licensed Clinical Social Workers, Licensed Psychiatrists, Licensed Senior Psychological Examiners, or Licensed Psychologists with Health Service Provider designation, who have been licensed at least five (5) years and who are in good standing with their respective licensing boards and professional associations. A Licensed Professional Counselor without Mental Health Service Provider designation shall not supervise an applicant working toward the Mental Health Service Provider designation.
 - (c) For the purpose of mental health service provider designation, of the hundred and fifty (150) contact hours of supervision required, seventy-five (75) shall be conducted by a supervisor with LPC/MHSP designation.
 - (d) Ethics Supervisors shall comply with Section F of the current code of ethics adopted by the American Counseling Association, except to the extent that it conflicts with the laws of the State of Tennessee or the rules of the Board. If the code of ethics conflicts with state law or rules, the state law or rules govern the matter. Violation of the code of ethics or state law or rules may subject a licensee or certificate holder to disciplinary action. Supervisors may also reference the Association for Counselor Education and Supervision (ACES) Ethical Guidelines for Counseling Supervisors.
 - (e) Training Supervisors shall provide documentation of the successful completion of one or more of the following:
 - A passing grade at an accredited college or university in an academic course specific to supervision of counselors
 - Supervision certification by one, or more, of the following professional associations:
 - (i) AAMFT Approved Supervisor:
 - (ii) AAPC Approved Supervisor;
 - (iii) NBCC Approved Clinical Supervisor; or
 - (iv) Any other organization designated by the Board to provide supervisor qualification verification
 - Documentation of twelve (12) contact hours related to counseling supervision and other related supervision topics. Contact hours must be

provided by an approved professional association or approved by a counseling related credentialing organization (e.g., NBCC).

- (f) Continuing Education Units Three (3) clock hours of the ten (10) clock hour requirement shall, every two (2) years, pertain to counseling supervision or related supervision topics.
- All supervisors providing supervision starting before January 31, 2013 for Licensed Professional Counselors or Licensed Professional Counselors with Mental Health Service Provider candidates will be approved to continue providing supervision to those individuals according to the requirements of the former Rule 0450-01-.10. Supervisors providing supervision starting on or after January 31, 2013 must comply with the above requirements. All supervisors shall comply with subparagraphs (1)(d) and (1)(f) regardless of the date they start providing supervision.
- (1) Professional Counselor's Supervision. Supervision required by this rule shall be a professional experience which is supervised by a currently Licensed Professional Counselor, Licensed Professional Counselor with Mental Health Service Provider designation, licensed marital and family therapist, licensed clinical social worker, licensed psychologist with health service provider designation, licensed senior psychological examiner, or licensed psychiatrist, pursuant to rule 0450-01-.01, who has been licensed at least five (5) years and who is providing engoing, direct clinical review for the purpose of training or teaching and who menitors the performance of a person's supervised interaction with a client and provides regular, documented, face to face consultation, guidance, and instructions with respect to the clinical skills and competencies of the person supervised. Supervision may include, without being limited to, the review of case presentations, audio tapes, video tapes, and direct observation.
- (23) Approved supervisors The applicant shall be responsible for submitting evidence at the time the application is submitted that the supervisor meets the rules of the board for eligibility.
- (34) Conflict of Interest Supervision Supervision provided by the applicant's parent, spouse, former spouse, siblings, children, cousins, in-laws, (present or former), aunts, uncles, grandparents, grandchildren, step-children, employees, or anyone sharing the same household shall not be acceptable toward fulfillment of licensure requirements. For the purposes of this rule, a supervisor shall not be considered an employee of the applicant, if the only compensation received by the supervisor consists of payment for actual supervisory hours.
- (45) Upon completion of the post-masters supervision requirement, pursuant to 0450-01-.04, the applicant must continue in supervision until a receipt of a license to practice as a Professional Counselor. Such post-supervision may be less intense and/or less frequent than the post-masters supervision experience, depending on the supervisors judgment.
- (6) For the purpose of mental health service provider designation pursuant to T.C.A. § 63-22-150, one hundred and fifty (150) contact hours of supervision, of which no more than fifty (50) hours may be in a group setting, is required for licensure as a professional counselor with mental health service provider designation.
 - (a) The post-masters supervised experience must consist of a minimum of three thousand (3000) hours of direct clinical experience which is completed under supervision and which is completed no sooner than two (2) years nor more than four (4) years following the beginning of supervised clinical practice.
 - One thousand and five hundred (1500) of the three thousand (3000) hours of supervised post-masters professional experience shall be face-to-face client contact hours.

- One thousand and five hundred (1500) of the three thousand (3000) hours of supervised post-masters professional experience shall be clinically-related activities.
- (b) The ratio of supervision time to direct client contact should be sufficient to ensure adequate learning. The minimum requirements are one hour per week of direct, individual, formal contact with a qualified individual who is responsible for the clinical education, development and guidance of the supervisee. Excluded are classwork, practicum experience, or other course-related experiences taken in pursuit of the required 60 semester hour master's degree.
- (c) The supervision must be for the direct provision of mental health services by the applicant to individuals or groups of clients. An applicant's own personal growth experience, i.e., personal therapy or encounter-type groups, is not acceptable. Supervision of others is not acceptable.
- _(56) For the purpose of mental health service provider designation pursuant to T.C.A. § 63-22-150 and until July 1, 2009, 100 contact hours of post-masters supervised experience, of which no more than 40 hours may be in a group setting, is required for licensure as a professional counselor with mental health service provider designation. As of July 1, 2009 and for the purpose of mental health service provider designation pursuant to T.C.A. § 63-22-150, one hundred and fifty (150) contact hours of supervision, of which no more than fifty (50) hours may be in a group setting, is required for licensure as a professional counselor with mental health service provider designation.
 - (a) Until July 1, 2009, the post-masters supervised experience must consist of a minimum of 1000 hours of direct clinical experience which is completed under supervision and which is completed no sooner than two (2) years nor more than four (4) years following the beginning of supervised clinical practice.
 - (b) As of July 1, 2009, the post-masters supervised experience must consist of a minimum of three thousand (3000) hours of direct clinical experience which is completed under supervision and which is completed no sooner than two (2) years nor more than four (4) years following the beginning of supervised clinical practice. A clinical setting for the post-masters supervised experience which is exclusively in a private practice and/or which focuses exclusively on only one (1) aspect of professional counseling (i.e. counseling of children) is not acceptable for meeting the requirements of this rule.
 - One thousand and five hundred (1500) of the three thousand (3000) hours of supervised post-masters professional experience shall be face-to-face client contact hours.
 - 2. One thousand and five hundred (1500) of the three thousand (3000) hours of supervised post-masters professional experience shall be clinically-related activities.
 - (c) The ratio of supervision time to direct client contact should be sufficient to ensure adequate learning. The minimum requirements is one hour per week of direct, individual, formal contact with a qualified individual who is responsible for the clinical, education development and guidance of the supervisee. Excluded are classwork, practicum experience, or other course related experiences taken in pursuit of the required 60 semester hour master's degree.
 - (d) The supervision must be for the direct provision of mental health services by the applicant to individuals or groups of clients. An applicant's own personal growth

- experience, i.e., personal therapy or encounter-type groups, is not acceptable. Supervision of others is not acceptable.
- (e) Supervisors for applicants pursuing designation as mental health service provider may be currently Licensed Professional Counselors with Mental Health Service Provider designation, licensed marital and family therapists, licensed clinical social workers, licensed psychiatrists, licensed senior psychological examiners, or licensed psychologists with health service provider designation, who have been licensed at least five (5) years and who are in good standing with their respective licensing boards and professional associations.

Authority: T.C.A. §§4-5-202, 4-5-204, 63-22-102 63-22-104, 63-22-107, 63-22-117, 63-22-120, and Public Chapter 318, Acts of 1995. Administrative History: Original rule filed April 29, 1992; effective June 13, 1992. Amendment filed June 10, 1994; effective October 28, 1994. Amendment filed October 18, 1995; effective January 1, 1996. Amendment filed April 16, 1996; effective June 30, 1996. Amendment filed August 16, 2002; effective October 30, 2002. Amendment filed October 30, 2002; effective January 13, 2003. Amendment filed July 21, 2004; effective October 4, 2004. Amendment filed November 26, 2008; effective February 9, 2009.

0450-01-.11 RETIREMENT AND REACTIVATION OF CERTIFICATE OR LICENSE.

- (1) Once a certified professional counselor or associate counselor obtains the status of licensed professional counselor, his certification will be automatically administratively retired by the board office.
- (2) A person who holds a current certificate or license and does not plan to practice in Tennessee and who does not intend to use the title "certified professional counselor" or "licensed professional counselor" may apply to convert an active certificate or license to inactive ("retired") status. An individual who holds a retired certificate or license will not be required to pay the renewal fee.
- (3) A person who holds an active certificate or license may apply for retired status in the following manner:
 - (a) Obtain from, complete and submit to the board's administrative office an affidavit of retirement form.
 - (b) Submit any documentation which may be required to the board's administrative office.
- (4) Certification or licensure holders whose certificate or license has been retired may reenter active status by doing the following:
 - (a) Submit a written request to the board's administrative office for certification or licensure reactivation;
 - (b) Pay the licensure or certificate renewal fee and state regulatory fee as provided in rule 0450-01-.06 and if retirement was pursuant to rule 0450-01-.09, and reactivation was requested prior to the expiration of one year from the date of retirement, the board may require payment of the late renewal fee, past due renewal fees, and state regulatory fees as provided in rule 0450-01-.06; and
 - (c) Comply with the continuing education provisions of rule 0450-01-.12 applicable to reactivation of retired license or certificate.
- (5) Certification or licensure reactivation applications shall be treated as certification or licensure applications and review and decisions shall be governed by rule 0450-01-.05.