

PROFESSIONAL LICENSURE DIVISION[645]

Notice of Intended Action

**Proposing rule making related to supervision
and providing an opportunity for public comment**

The Iowa Board of Social Work and the Iowa Board of Behavioral Science hereby propose to amend Chapter 31, “Licensure of Marital and Family Therapists, Mental Health Counselors, Behavior Analysts, and Assistant Behavior Analysts,” and Chapter 280, “Licensure of Social Workers,” Iowa Administrative Code.

Legal Authority for Rule Making

This rule making is proposed under the authority provided in Iowa Code sections 154C.3 and 154D.3 and 2021 Iowa Acts, House File 891, division XVI.

State or Federal Law Implemented

This rule making implements, in whole or in part, 2021 Iowa Acts, House File 891, division XVI.

Purpose and Summary

2021 Iowa Acts, House File 891, division XVI, requires the Board of Behavioral Science and the Board of Social Work to jointly develop substantially identical supervision rules for social workers, mental health counselors, and marriage and family therapists who are completing their supervised practice hours toward meeting their independent level license requirements. The Board of Behavioral Science and the Board of Social Work created a joint committee and elicited public comments prior to this proposed rule making, which standardizes supervision requirements and reduces the minimum number of hours for certain requirements. The minimum number of total practice hours is set at 3,000 hours, and the minimum number of direct client contact hours is set at 2,000. Furthermore, the proposed rule making sets the minimum number of supervision meeting hours at 110 and requires that 24 of these hours involve direct observation of the supervisee providing services. Direct observation may be live or recorded.

The proposed rule making also limits the number of supervisors a supervisee can have at any one time to four, and it adds language that supervisors are responsible for ensuring they are not supervising more supervisees than can be safely and competently supervised.

Fiscal Impact

This rule making has no fiscal impact to the State of Iowa.

Jobs Impact

After analysis and review of this rule making, no impact on jobs has been found.

Waivers

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Board of Social Work or Board of Behavioral Science for a waiver of the discretionary provisions, if any, pursuant to 645—Chapter 18.

Public Comment

Any interested person may submit written or oral comments concerning this proposed rule making. Written or oral comments in response to this rule making must be received by the Board of Social Work or

Board of Behavioral Science no later than 4:30 p.m. on February 1, 2022. Comments should be directed to:

Tony Alden
Professional Licensure Division
Iowa Department of Public Health
Lucas State Office Building
321 East 12th Street
Des Moines, Iowa 50319
Phone: 515.281.4401
Fax: 515.281.3121
Email: tony.alden@idph.iowa.gov

Public Hearing

A public hearing at which persons may present their views orally or in writing will be held as follows:

February 1, 2022
9 to 10 a.m.

Fifth Floor Board Conference Room 526
Lucas State Office Building
Des Moines, Iowa

Persons who wish to make oral comments at the public hearing may be asked to state their names for the record and to confine their remarks to the subject of this proposed rule making. In an effort to ensure accuracy in memorializing a person's comments, a person may provide written comments in addition to or in lieu of oral comments at the hearing.

Any persons who intend to attend the public hearing and have special requirements, such as those related to hearing or mobility impairments, should contact the Board of Social Work or Board of Behavioral Science and advise of specific needs.

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee's meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

The following rule-making actions are proposed:

ITEM 1. Amend subrule 31.2(6) as follows:

31.2(6) The candidate for permanent licensure shall submit the required attestation of supervision forms documenting clinical experience for marital and family therapy and for mental health counseling as required in ~~rule 645—31.5(154D) for marital and family therapy and rule 645—31.7(154D) for mental health counseling.~~

ITEM 2. Amend subrule 31.2(7) as follows:

31.2(7) The candidate for temporary licensure for the purpose of fulfilling the postgraduate supervised clinical experience requirement must submit ~~the Supervised Clinical Experience: Approval and Attestation form~~ a supervision plan to the board and receive approval of the candidate's supervisor(s) prior to licensure. ~~The temporary licensee must notify the board immediately in writing of any proposed change in supervisor(s) and obtain approval of any change in supervisor(s).~~ Within 30 days of completion of the supervised clinical experience, the attestation of the completed supervised experience must be submitted to the board office. The temporary licensee shall remain under supervision until a permanent license is issued.

ITEM 3. Rescind and reserve rule **645—31.5(154D)**.

ITEM 4. Rescind rule 645—31.7(154D) and adopt the following **new** rule in lieu thereof:

645—31.7(154D) Supervised clinical experience. An applicant for licensure as a mental health counselor or marital and family therapist must complete a supervised clinical experience as set forth in this rule.

31.7(1) Minimum requirements. The supervised clinical experience must satisfy all of the following requirements:

a. Timing. The supervised clinical experience cannot begin until after all graduate coursework has been completed with the exception of the thesis.

b. Duration. The supervised clinical experience must be for a minimum of two years.

c. Minimum number of hours. The supervised clinical experience must consist of at least 3,000 hours of practice.

d. Minimum number of direct client hours. The supervised clinical experience must consist of at least 2,000 hours of direct client contact.

e. Minimum number of direct supervision hours. The supervised clinical experience must consist of at least 110 hours of direct supervision equitably distributed throughout the supervised clinical experience, including at least 24 hours of live or recorded direct observation of client interaction. A maximum of 50 hours of direct supervision may be obtained through group supervision. Direct supervision can occur in person or by using videoconferencing. After 110 hours of direct supervision are complete, ongoing direct supervision must continue to occur for the remainder of the supervised clinical experience.

f. Number of supervisors. A supervisee may utilize a maximum of four supervisors at any given time. A supervisee is responsible for notifying each supervisor if another supervisor is also being utilized to allow for coordination as appropriate.

g. Number of supervisees. A supervisor shall determine the number of supervisees who can be supervised safely and competently and shall not exceed that number.

h. Content. The supervised clinical experience must involve performing psychosocial assessments, diagnostic practice using the current edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM), and providing treatment, including the establishment of treatment goals, psychosocial therapy using evidence-based therapeutic modalities, and differential treatment planning. The supervised clinical experience must prepare the supervisee for independent practice and must include training on practice management, ethical standards, legal and regulatory requirements, documentation, coordination of care, and self-care.

31.7(2) Eligible supervisors. A supervisor must satisfy all of the following requirements:

a. A supervisor must hold an active license as an independent level social worker, mental health counselor, or marital and family therapist in Iowa.

b. A supervisor must have a minimum of three years of independent practice.

c. A supervisor must have completed at least a six-hour continuing education course in supervision or one graduate-level course in supervision.

d. A supervisor must be knowledgeable of the applicable ethical code and licensing rules governing the supervisee.

31.7(3) Supervision plan. Prior to beginning supervision, the supervisee must submit a written supervision plan to the board using the current form published by the board. The supervisee must also submit a written supervision plan to the board prior to beginning supervision with a new supervisor.

31.7(4) Supervision report. When supervision is complete, or when a supervisor ceases providing supervision to the supervisee, the supervisee must ensure a completed supervision report using the current form published by the board is submitted to the board. If the supervisor reports that the supervisee is not adequately prepared for independent licensure, or reports violations of the board's rules or applicable ethical code, the board may require the supervisee to complete additional supervision or training as deemed appropriate prior to licensure.

31.7(5) Supervised clinical experience in other states. An applicant who completed some or all of the supervised clinical experience in another state without obtaining licensure in that state should contact the board to determine whether some or all of the supervised clinical experience that has been completed can be used to qualify for licensure in Iowa.

ITEM 5. Rescind rule 645—280.6(154C) and adopt the following **new** rule in lieu thereof:

645—280.6(154C) Supervised clinical experience. An applicant for licensure as an independent level social worker must complete a supervised clinical experience as set forth in this rule.

280.6(1) Minimum requirements. The supervised clinical experience must satisfy all of the following requirements:

a. Timing. The supervised clinical experience cannot begin until after licensure as a master level social worker.

b. Duration. The supervised clinical experience must be for a minimum of two years.

c. Minimum number of hours. The supervised clinical experience must consist of at least 3,000 hours of practice.

d. Minimum number of direct client hours. The supervised clinical experience must consist of at least 2,000 hours of direct client contact.

e. Minimum number of direct supervision hours. The supervised clinical experience must consist of at least 110 hours of direct supervision equitably distributed throughout the supervised clinical experience, including at least 24 hours of live or recorded direct observation of client interaction. A maximum of 50 hours of direct supervision may be obtained through group supervision. Direct supervision can occur in person or by using videoconferencing. After 110 hours of direct supervision are complete, ongoing direct supervision must continue to occur for the remainder of the supervised clinical experience.

f. Number of supervisors. A supervisee may utilize a maximum of four supervisors at any given time. A supervisee is responsible for notifying each supervisor if another supervisor is also being utilized to allow for coordination as appropriate.

g. Number of supervisees. A supervisor shall determine the number of supervisees who can be supervised safely and competently and shall not exceed that number.

h. Content. The supervised clinical experience must involve performing psychosocial assessments, diagnostic practice using the current edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM), and providing treatment, including the establishment of treatment goals, psychosocial therapy using evidence-based therapeutic modalities, and differential treatment planning. The supervised clinical experience must prepare the supervisee for independent practice and must include training on practice management, ethical standards, legal and regulatory requirements, documentation, coordination of care, and self-care.

280.6(2) Eligible supervisors. A supervisor must satisfy all of the following requirements:

a. A supervisor must hold an active license as an independent level social worker, mental health counselor, or marital and family therapist in Iowa.

b. A supervisor must have a minimum of three years of independent practice.

c. A supervisor must have completed at least a six-hour continuing education course in supervision or one graduate-level course in supervision.

d. A supervisor must be knowledgeable of the applicable ethical code and licensing rules governing the supervisee.

280.6(3) Supervision plan. Prior to beginning supervision, the supervisee must submit a written supervision plan to the board using the current form published by the board. The supervisee must also submit a written supervision plan to the board prior to beginning supervision with a new supervisor.

280.6(4) Supervision report. When supervision is complete, or when a supervisor ceases providing supervision to the supervisee, the supervisee must ensure a completed supervision report using the current form published by the board is submitted to the board. If the supervisor reports that the supervisee is not adequately prepared for independent licensure, or reports violations of the board's rules or applicable

ethical code, the board may require the supervisee to complete additional supervision or training as deemed appropriate prior to licensure.

280.6(5) *Supervised clinical experience in other states.* An applicant who completed some or all of the supervised clinical experience in another state without obtaining licensure in that state should contact the board to determine whether some or all of the supervised clinical experience completed can be used to qualify for licensure in Iowa.