

Policy on LPC Clinical Setting Requirements

Rule 0450-01-.01(11) defines the appropriate clinical setting in which LPCs and LPC/MHSP applicants can complete their supervision. The Board has received numerous questions regarding these requirements and so adopts this policy, on June 27, 2014 to further explain the rule.

Typical questions the Board hopes to answer with this policy include:

Can I work in a private practice setting? Yes.

Can I open my own practice? No.

Does my supervisor have to be onsite at my practice location? No.

Do I need a temporary license? It depends on how you are employed or affiliated with the clinical setting facility/practice.

Can I be an independent contractor? If you have a temporary license, yes, as long as you work out of a facility which meets all other rule requirements, - i.e. not your home or a coffee shop, etc.

For other questions or explanations, please see the bulleted section below. If, after reviewing this, you are still not sure whether your clinical setting arrangement is appropriate, please contact the Board for guidance before you begin supervision. If the Board determines at any time that your clinical setting is not appropriate, the hours earned in that setting will not count for licensure. It is best to check with the Board before you begin rather than spend years of your life working in a setting that is not appropriate.

An appropriate clinical setting can be a “public, private, or community agency/mental health setting” as long as it meets the following requirements:

- *Has 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.* These programs must offer the same scope of services in which the applicant seeks to be trained. For example, an applicant seeking LPC/MHSP licensure cannot work in a facility which only provides non-MHSP services, as that setting would not offer opportunities to observe and counsel clients diagnosed under the DSM.
- *Has physical resources to provide those services.* This includes private spaces for counseling sessions, a secure facility for storing records, administrative resources to support the program and ensure compliance with HIPAA and other regulations, etc.
- *Has an appropriately licensed mental health professional onsite 20 hours a week who is available for consultation while the applicant is counseling.* The 20 hours a week can be covered by multiple people. However, each licensee must be licensed to provide the scope of services the applicant seeks to practice – i.e. the clinical setting for an LPC/MHSP applicant must have LPC/MHSPs, LCSWs, LMFTs, or other mental health

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professionals who are licensed to diagnose and treat mental health disorders on site 20 hours a week. The 20 hours should overlap with the time in which the applicant is working so that the licensee is actually available for consultation. If the applicant works over 20 hours a week at the facility the remaining hours may be worked without the licensed person on site, at which point the emergency plan would provide support and backup to the applicant. The onsite licensed personnel do not need to be the “approved supervisor” for licensure or even be qualified to perform that supervision for licensure – the applicant may work with an offsite supervisor for licensure purposes.

- *Have a written emergency plan.* This plan must include methods of contacting licensed professionals for consultation in a crisis, information for crisis management and services and crisis decision-making.
- *The place or practice shall not be owned, or independently operated by the applicant.* The applicant may not own their own business or open their own practice – even if they hire a licensed person to be on site and comply with the other rules.
- *The place or practice may not be owned or operated by and the applicant may not be supervised by someone with a relationship to applicant that would violate the ACA’s code of ethics.*
- *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.* An applicant may either be an employee of a practice, in which case the liability issues and payment arrangements are handled by the practice, or must be affiliated by written agreement. If the written agreement is an independent contractor arrangement in which the applicant is paid directly from client fees or third party reimbursements, or if the arrangement is that the applicant will work *pro bono*, the applicant must have a Temporary License. Independent contractor arrangements and volunteer counseling arrangements often leave the public confused about who has responsibility for supervising the applicant. In addition, arrangements in which applicant pay is based on the amount the money the applicant brings in through counseling fees encourage the applicant to advertise. Confusion and concern amongst the public about these types of arrangements leads to numerous unlicensed practice complaints which the Board must investigate. The written agreement and Temporary License safeguard the public and the applicant by providing more information to both the public and the Board about the supervisory arrangement, allowing the Board to ensure that the applicant is operating and advertising in accordance with the laws and regulations.