



Virginia Society for Clinical Social Work

REPORT

July 11, 2015

To: Virginia Board of Social Work

**“Mid-level” licensure**

Submitted by: Joseph G. Lynch LCSW, CSOTP

## **INTRODUCTION:**

At the meeting of the Regulatory Committee of the Virginia Board of Social Work on June 19, 2015 the Chair (Bernadette Winters) invited NASW VA and VSCSW to submit information to the committee prior to the August 28, 2015 committee meeting on the topic of “Mid-level” licensure. This report is in response to that invitation.

## **“MID-LEVEL LICENSURE:**

The term “Mid-level” licensure is not easily defined. Few articles in the professional literature use the term and there are few references to the term found on the professional association web sites. A more common term is “multi-tiered” licensure. “Multi-tiered” suggest that social work licensing be developed in a way that recognizes multi-levels or tiers of licensure. ASWB is a proponent of this and clearly identifies the levels in their Model Practice Act. Also the ASWB Practice Analysis delineates different exams that are associated with different levels. The ASWB levels are:

***Associate**—A few jurisdictions administer the Bachelors Examination to candidates who do not have degrees in social work for an Associate license. A lower passing score is used.*

***Bachelors**—The examination intended for use by individuals with a baccalaureate degree in social work.*

***Masters**—The examination that is intended for individuals who hold an MSW degree, but who do not have post-degree supervision.*

***Advanced Generalist**—The Advanced Generalist exam is designed for advanced practitioners who do more macro-level, generalist, administrative or management work. It is one of two exams intended to be taken by social workers with an MSW or higher degree, plus the required postgraduate supervised experience.*

***Clinical**—The Clinical exam has more emphasis on the provision of direct, micro-level mental health services. It is the second of two exams (along with the Advanced Generalist) intended to be taken by social workers with an MSW or higher degree, plus the required postgraduate supervised experience. The Advanced Generalist and clinical examinations are considered on par due to the advanced level of practice knowledge and*

experience expected of someone taking either exam. But they each emphasize different areas of practice as noted in their descriptions. <https://www.aswb.org/about/>

The ASWB Model Practice Act identifies three levels of social work practice:

1. Baccalaureate Social Worker
2. Master's Social Worker
3. Clinical Social Worker

Under the Code of Virginia § 54.1-3705. *Specific powers and duties of the Board* the Virginia Board of Social Work (VBSW) is granted authority "...To designate specialties within the profession..." The VBSW regulations identify two specialties:

License Title		ASWB exam for this license
Licensed Social Worker (LSW)	Bachelors	Bachelors exam
	Masters	Bachelors exam
Licensed Clinical Social Worker (LCSW)		Clinical exam

In email communication with Ms. Jennifer Henkel, MSSW, LCSW, and Director of Member Services for ASWB, she reported the following:

*"Based on my conversations with Sarah Georgen, I believe that Virginia's mid-level licensure and the Licensed Master's Social Worker (LMSW) are the same. The LMSW is what is used in the ASWB Model Practice Act."* (July 1, 2015)

So ASWB views the VBSW LSW-Master's Degree licensee- as the same as the LMSW.

The ASWB Model Practice Act also speaks to "Independent Practice" of Social Work as follows:

***Section 306. Independent Practice.***

*No Baccalaureate or Master's Social Worker licensed under Section 302 or Section 303 shall engage in Independent Practice until such time that the social worker shall have worked in a supervised setting for a specified period of time and under terms and conditions set by the Board.*

***Commentary by ASWB on Section 306. Independent Practice.***

*Independent practice in the Licensed Baccalaureate Social Worker or Licensed Master's Social Worker categories should not be construed as private practice, in which Clinical Social Workers accept fees for service from clients or third party payers on the client's behalf. LBSW and LMSW social workers are not qualified to conduct the diagnosis and treatment of mental illness, or provide psychotherapy services, although LMSW social workers may provide some clinical services under supervision by a Clinical Social Worker.*

**VIRGINIA BOARD OF HEALTH PROFESSIONS:**

The Virginia Board of Health Professions has developed a guidance document titled *Policies and Procedures for the Evaluation of the Need to Regulate Health Occupations and Professions*. This document established criteria to guide evaluations of the need for regulation of health occupations and professions. It seems prudent that if the VBSW were to consider

establishing a new level of licensure that it proceed in light of the guidance from these criteria. The criteria are listed below along with comments from VSCSW.

<p style="text-align: center;"><b>VIRGINIA BOARD OF HEALTH PROFESSIONS</b>  <b>CRITERIA FOR EVALUATING THE NEED FOR REGULATION</b>            Initially Adopted October, 1991            Readopted February, 1998</p>	<p style="text-align: center;"><b>VSCSW</b>  <b>COMMENTS ON CRITERIA</b>  <b>AS THEY RELATE TO ESTABLISHING ANY NEW</b>  <b>“MID-LEVEL”</b>  <b>SOCIAL WORK LICENSE</b></p>
<p><b>Criterion One: Risk for Harm to the Consumer</b>            The unregulated practice of the health occupation will harm or endanger the public health, safety or welfare. The harm is recognizable and not remote or dependent on tenuous argument. The harm results from: (a) practices inherent in the occupation, (b) characteristics of the clients served, (c) the setting or supervisory arrangements for the delivery of health services, or (d) from any combination of these factors.</p>	<p><b>Criterion One: Risk for Harm to the Consumer</b>            According to ASWB the VBSW already has established a mid-level license with the LSW-Master’s Degree licensee. Thus there is no need for a new license as this level of practice is already regulated by the VBSW.</p>
<p><b>Criterion Two: Specialized Skills and Training</b>            The practice of the health occupation requires specialized education and training, and the public needs to have benefits by assurance of initial and continuing occupational competence.</p>	<p><b>Criterion Two: Specialized Skills and Training</b>            With the VBSW LSW license the public already has the benefits of initial and continuing occupational competence. Thus there is no need for a new license as this level of practice is already regulated by the VBSW.</p>
<p><b>Criterion Three: Autonomous Practice</b>            The functions and responsibilities of the practitioner require independent judgment and the members of the occupational group practice autonomously.</p>	<p><b>Criterion Three: Autonomous Practice</b>            The ASWB Model Practice Act recommends that the “mid-level” practitioner be under supervision and “<i>should not be construed as private practice.</i>” Thus there is no need for a new license as this level of practice is not designed for autonomous independent practice.</p>
<p><b>Criterion Four: Scope of Practice</b>            The scope of practice is distinguishable from other licensed, certified and registered occupations, in spite of possible overlapping of professional duties, methods of examination, instrumentation, or therapeutic modalities</p>	<p><b>Criterion Four: Scope of Practice</b>            The scope of practice of the LSW –Masters- is similar to the definition in the ASWB LMSW level of licensure (*See below comparison)</p>
<p><b>Criterion Five: Economic Impact</b>            The economic costs to the public of regulating the occupational group are justified. These costs result from restriction of the supply of practitioner, and the cost of operation of regulatory boards and agencies.</p>	<p><b>Criterion Five: Economic Impact</b>            Currently the VBSW is in the process of proposed fee increase to allow for a balanced operational budget. Adding a new level of licensure would surly increase cost of the operation of the board.</p>
<p><b>Criterion Six: Alternatives to Regulation</b>            There are no alternatives to State regulation of the occupation which adequately protect the public. Inspections and injunctions, disclosure requirements, and the strengthening of consumer protection laws and regulations are examples of methods of addressing the risk for public harm that do not require regulation of the occupation or profession.</p>	<p><b>Criterion Six: Alternatives to Regulation</b>            It appears that the LSW-Masters license is in place and provides sufficient regulation to reduce any risk of harm to the citizens of the Commonwealth and another level of license would not increase public protection</p>
<p><b>Criterion Seven: Least Restrictive Regulation</b>            When it is determined that the State regulation of the occupation or profession is necessary, the least restrictive level of</p>	<p><b>Criterion Seven: Least Restrictive Regulation</b>            The current LSW-Masters credential seems to be the “least restrictive regulation” and adding a new</p>

occupational regulation consistent with public protection will be recommended to the Governor, the General Assembly and the Director of the Department of Health Professions.	level of licensing is unnecessarily more restrictive on professionals with no greater public protection.
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**\* Criterion Four: Scope of Practice**

<p align="center"><b>Chapter 37 - Title 54.1</b>  <b>Code of Virginia</b>  <b>Social Work</b>  <b>Definition of “Social Worker” and “Practice of Social Work”</b></p>	<p align="center"><b>ASWB</b>  <b>Section 105.</b>  <b>Practice of Master's Social Work</b></p>
<p><b>"Social worker"</b> means a person trained to provide service and action to effect changes in human behavior, emotional responses, and the social conditions by the application of the values, principles, methods, and procedures of the profession of social work.</p>	<p>Subject to the limitations set forth in Article III, Section 306, the practice of Master's Social Work means the application of social work theory, knowledge, methods and ethics and the professional use of self to restore or enhance social, psychosocial, or biopsychosocial functioning of individuals, couples, families, groups, organizations and communities. Master's Social Work practice includes the application of specialized knowledge and advanced practice skills in the areas of assessment, treatment planning, implementation and evaluation, case management, information and referral, counseling, supervision, consultation, education, research, advocacy, community organization and the development, implementation, and administration of policies, programs and activities. Under supervision as provided in this act, the practice of Master's Social Work may include the practices reserved to Clinical Social Workers.</p>
<p><b>"Practice of social work"</b> means rendering or offering to render to individuals, families, groups, organizations, governmental units, or the general public service which is guided by special knowledge of social resources, social systems, human capabilities, and the part conscious and unconscious motivation play in determining behavior. Any person regularly employed by a licensed hospital or nursing home who offers or renders such services in connection with his employment in accordance with patient care policies or plans for social services adopted pursuant to applicable regulations when such services do not include group, marital or family therapy, psychosocial treatment or other measures to modify human behavior involving child abuse, newborn intensive care, emotional disorders or similar issues, shall not be deemed to be engaged in the "practice of social work." Subject to the foregoing, the disciplined application of social work values, principles and methods includes, but is not restricted to, casework management and supportive services, casework, group work, planning and community organization, administration, consultation and education, and research.</p>	

**COMPARISON WITH OTHER SOCIAL WORK REGULATORY BOARDS:**

ASWB has compiled the *Social Work Laws & Regulations Comparison Guide* that provides information on each social work regulatory board’s requirements for licensure (See attached). Of the 63 social work regulatory boards listed 45 include the word “Clinical” in the title of the license and if the word “Clinical” is in the title then the applicant must take the Clinical exam. Of the remaining boards 4 use the title “Certified” and 5 use the title “Independent” and require the Clinical exam. Some boards use combinations of Clinical, Independent and Certified. The title “Licensed Masters Social Worker” appears in the regulations of 26 boards and 21 of those require the applicant to take the “Masters” exam.

## **SUMMARY:**

From the above information the following conclusions can be drawn:

- It appears that the VBSW currently has a version of “mid-level” licensure with the Licensed Social Worker – Masters level license.
- ASWB offered the view that the LSW-Masters license is the same as the LMSW in the ASWB Model Practice Act.
- The ASWB commentary notes that “...*LMSW social workers are not qualified to conduct the diagnosis and treatment of mental illness, or provide psychotherapy services...*”
- The ASWB report *Social Work Laws & Regulations Comparison Guide* notes that 26 regulatory boards use the title LMSW and of those 21 use the Masters exam.
- The VBSW uses the Bachelors exam for both the LSW – Bachelors and LSW- Masters licensee. It would be worth exploring the possibility of requiring the LSW-Masters to take the ASWB Masters exam.
- A brief review of the Board of Health Professions *Policies and Procedures for the Evaluation of the Need to Regulate Health Occupations and Professions* Guidance Document indicates that “mid-level” licensure currently exist and a new specialty license is not justified by the criteria.

For all of the above reasons the VSCSW recommends to the VBSW that the current regulations sufficiently provide for “mid-level” licensure and that no further regulatory action by the VBSW is necessary for the protection of the public health, safety and welfare.