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**MARRIAGE AND FAMILY THERAPY, PROFESSIONAL COUNSELING, AND  
SOCIAL WORK JOINT EXAMINING BOARD**  
**Room 121A, 1400 East Washington Avenue, Madison**  
**Contact: Dan Williams (608) 266-2112**  
**October 28, 2014**

*The following agenda describes the issues that the Board plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. Please consult the meeting minutes for a record of the actions of the Board.*

**9:00 A.M.**

**AGENDA**

**CALL TO ORDER – ROLL CALL – OPEN SESSION**

- A. Adoption of the Agenda (1-2)**
- B. Approval of the Minutes of July 29, 2014 (3-4)**
- C. Administrative Matters – Discussion and Consideration**
  - 1) Staff Updates
  - 2) Board Member – Term Expiration Date
    - a. Peter Fabian – 7/1/2014
    - b. Alice Hanson-Drew – 7/1/2013
    - c. Linda Pellmann – 7/1/2015
    - d. MFT Public Member – **Vacancy**
    - e. Allison Gordon – 7/1/2018
    - f. Charles Lindsey – 7/1/ 2016
    - g. Leslie Mirkin – 7/1/2009
    - h. PC Public Member – **Vacancy**
    - i. Jennifer Anderson-Meger – 7/1/2017
    - j. Elizabeth Krueger – 7/1/2016
    - k. Nicholas Smiar – 7/1/2014
    - l. **Gregory Winkler** – 7/1/2015
    - m. SOC Public Member – **Vacancy**
- D. Legislative and Administrative Rule Matters – Discussion and Consideration**
  - 1) Proposals for MPSW 1 Relating to Rules, Application, Exam and Renewal **(5-9)**
  - 2) MPSW 1.09 Relating to Specialty **(10-12)**
  - 3) Update on Pending and Possible Rule Projects
- E. Discussion and Consideration of Board Goals**

F. **Section Reports**

G. Discussion and Consideration of Items Received After Preparation of the Agenda:

- 1) Introductions, Announcements, and Recognition
- 2) Presentations of Petition(s) for Summary Suspension
- 3) Presentation of Proposed Stipulation(s), Final Decision(s) and Order(s)
- 4) Presentation of Final Decision and Order(s)
- 5) Informational Item(s)
- 6) DLSC Matters
- 7) Status of Statute and Administrative Rule Matters
- 8) Education and Examination Matters
- 9) Credentialing Matters
- 10) Practice Questions
- 11) Legislation / Administrative Rule Matters
- 12) Liaison Report(s)
- 13) Speaking Engagement(s), Travel, or Public Relations Request(s)
- 14) Consulting with Legal Counsel

H. Public Comments

**ADJOURNMENT**

**JOINT EXAMINING BOARD MEETING  
MARRIAGE AND FAMILY THERAPY, PROFESSIONAL COUNSELING  
AND SOCIAL WORK JOINT EXAMINING BOARD  
MEETING MINUTES  
July 29, 2014**

**PRESENT:** Charles Lindsey, Linda Pellmann (*joined at 9:08 a.m.*), Elizabeth Krueger, Jennifer Anderson-Meger, Peter Fabian, Allison Gordon (*left the meeting at 10:10 a.m.*), Alice Hanson-Drew, Leslie Mirkin, Nicholas Smiar

**STAFF:** Dan Williams – Executive Director; Jelena Gagula – Bureau Assistant; and other DSPS Staff

**CALL TO ORDER**

Charles Lindsey called the meeting to order at 9:00 a.m. A quorum of eight (8) members was confirmed.

**ADOPTION OF AGENDA**

*Amend Item D. to read “MFT Professional Member – Vacancy.”*

**MOTION:** Leslie Mirkin moved, seconded by Elizabeth Krueger, to adopt the agenda as amended. Motion carried unanimously.

**APPROVAL OF MINUTES OF APRIL 29, 2014**

**MOTION:** Elizabeth Krueger moved, seconded by Jennifer Anderson-Meger, to approve the minutes of April 29, 2014 as published. Motion carried unanimously.

*Linda Pellmann joined the meeting at 9:08 a.m.*

**LEGISLATION AND ADMINISTRATIVE RULE MATTERS**

**MOTION:** Nicholas Smiar moved, seconded by Allison Gordon, to approve the Adoption Order for Clearinghouse Rule 13-117. Motion carried unanimously.

**MOTION:** Nicholas Smiar moved, seconded by Linda Pellmann, to submit Clearinghouse Rule 13-117 for publication on a timeframe in order that it would go into effect on March 1, 2015. Motion carried unanimously.

**MOTION:** Peter Fabian moved, seconded by Nicholas Smiar, to approve the Adoption Order for Clearinghouse Rule 13-118. Motion carried unanimously.

**MOTION:** Nicholas Smiar moved, seconded by Jennifer Anderson-Meger, to approve the Adoption Order for Clearinghouse Rule 13-094. Motion carried unanimously.

*Allison Gordon left the meeting at 10:10 a.m.*

### **ADJOURNMENT**

**MOTION:** Alice Hanson-Drew moved, seconded by Jennifer Anderson-Meger, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 10:30 a.m.

DRAFT

**State of Wisconsin  
Department of Safety & Professional Services**

**AGENDA REQUEST FORM**

1) Name and Title of Person Submitting the Request:  <b>Sharon Henes</b> <b>Administrative Rules Coordinator</b>		2) Date When Request Submitted:  <b>14 October 2014</b> Items will be considered late if submitted after 12:00 p.m. on the deadline date: ▪ 8 business days before the meeting	
3) Name of Board, Committee, Council, Sections:  <b>MPSW Joint Board</b>			
4) Meeting Date:  <b>28 October 2014</b>	5) Attachments: <input type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? <b>Legislation and Rule Matters – Discussion and Consideration</b> <b>1. Proposals for MPSW 1 Relating to Rules, Application, Exam and Renewal</b> <b>2. MSPW 1.09 Relating to Specialty</b> <b>3. Update on Pending and Possible Rule Projects</b>	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled?  <input type="checkbox"/> Yes ( <a href="#">Fill out Board Appearance Request</a> ) <input type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed:			
11) Authorization			
<i><b>Sharon Henes</b></i>		<i><b>14 October 2014</b></i>	
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda)		Date	
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

## Chapter MPSW 1

### AUTHORITY AND PRACTICE

MPSW 1.01	Authority.
MPSW 1.02	Definitions.
MPSW 1.03	Rule-making.
MPSW 1.04	Application procedures for all sections of the board.
MPSW 1.05	Examination provisions for all sections.
MPSW 1.06	Examination review procedure for all sections of the board.

MPSW 1.07	Claims of examination error.
MPSW 1.08	Credential renewal procedures for all sections of the board.
MPSW 1.09	Alcohol and drug counseling.
MPSW 1.10	Professional liability insurance.
MPSW 1.11	Psychometric testing.

**Note:** Chapter SFC 1 was created as an emergency rule effective April 26, 1993.  
**Note:** Chapter SFC 1 was renumbered ch. MPSW 1 under s. 13.93 (2m) (b) 1., Stats., and corrections made under s. 13.93 (2m) (b) 7., Stats., [Register October 2002 No. 562](#).

**MPSW 1.01 Authority.** This chapter is adopted pursuant to ss. [15.08 \(5\) \(b\)](#), [15.405 \(7c\) \(d\)](#) and [227.11 \(2\)](#), Stats.

**History:** Cr. [Register, November, 1993, No. 455](#), eff. 12-1-93.

**MPSW 1.02 Definitions.** In chs. [MPSW 1](#) to [6](#), [8](#), and [10](#) to [20](#):

(1) "AODA" means alcohol or other drug abuse.

(1g) "Board" means the marriage and family therapy, professional counseling, and social work examining board.

(1q) "Credential" means a certificate or a license granted by the board.

(2) "Department" means the department of safety and professional services.

(2d) "DSM" means the diagnostic and statistical manual of mental disorders and refers to the most recent edition.

(2h) "ICRC" means the international certification reciprocity consortium.

(2m) "Psychotherapy" means the diagnosis and treatment of mental, emotional, or behavioral disorders, conditions, or addictions through the application of methods derived from established psychological or systemic principles for the purpose of assisting people in modifying their behaviors, cognitions, emotions, and other personal characteristics, which may include the purpose of understanding unconscious processes or intrapersonal, interpersonal, or psychosocial dynamics.

(3) "Section" means either the marriage and family therapist section, the professional counselor section, or the social worker section of the marriage and family therapy, professional counseling and social work examining board.

**History:** Cr. [Register, November, 1993, No. 455](#), eff. 12-1-93; am. (intro.), [Register, May, 1999, No. 521](#), eff. 6-1-99; [CR 02-105](#): am. (intro.), (1), (3), cr. (1q), (2m), [Register October 2002 No. 562](#), eff. 11-1-02; [CR 04-044](#): renum. (1) to be (1g), cr. (1), (2d) and (2h) [Register January 2005 No. 589](#), eff. 2-1-05; **correction in (2) made under s. 13.92 (4) (b) 6., Stats., Register November 2011 No. 671.**

**MPSW 1.03 Rule-making.** (1) **PROCEDURE.** The board may approve and adopt rules proposed by any section of the board.

(2) **RULES COMMITTEE.** (a) *Composition.* The rules committee of the board is composed of one professional member from each section, and the 3 public members.

(b) *Authority and responsibility.* Except for final approval under sub. (1), each section shall be responsible for proposing and drafting rules applying to its profession, and for holding public hearings on those rules. The rules committee shall review all rule changes proposed and drafted by the sections prior to final approval by the board.

**History:** Cr. [Register, November, 1993, No. 455](#), eff. 12-1-93; [CR 01-152](#): am. (2) [Register January 2003 No. 565](#), eff. 2-1-03.

**MPSW 1.04 Application procedures for all sections of the board.** (1) An application for certification is incomplete

until all materials requested are received by the board office, in English or accompanied by a certified English translation.

(2) An applicant for any credential under ch. [457](#), Stats., shall make application on forms prescribed by both the examination provider for the examination for the credential for which the applicant is applying and the board. The applicant may not sit for an examination unless the applicant meets the requirements of both the examination provider and the interested section of the board.

(a) The forms prescribed by the examination provider shall be supplied to the applicant by the department, but must be returned to the examination provider at least 60 days prior to the examination date for which the applicant is applying.

(b) The forms prescribed by the board shall be provided to the applicant by the department, and must be returned to the board office at least 60 days prior to the examination date for which the applicant is applying.

**Note:** The board's mailing address is Marriage and Family Therapy, Professional Counseling, and Social Work Examining Board, Department of Safety and Professional Services, P.O. Box 8935, Madison, Wisconsin 53708-8935.

**History:** Cr. [Register, November, 1993, No. 455](#), eff. 12-1-93; [CR 02-105](#): am. (2), [Register October 2002 No. 562](#), eff. 11-1-02.

**MPSW 1.05 Examination provisions for all sections.** (1) The board or its designee shall administer the examinations required of applicants for certification as a social worker, advanced practice social worker, or independent social worker, or for licensure as a clinical social worker, marriage and family therapist or professional counselor at least once a year.

(3) The examination process consists of a 2 part examination. Part I is an examination pertaining to the profession; part II is an examination on provisions of the Wisconsin Statutes and Administrative Code that pertain to the profession. Parts I and II of the examination administered under this chapter test entry level competency in the practice area for which the credential is sought. Parts I and II of the examination seek to determine that an applicant's knowledge is sufficient to protect public health, safety and welfare.

(5) The board may deny release of grades or issuance of a credential if the board determines that the applicant violated rules of conduct or otherwise acted dishonestly.

(6) Applicants shall pass each part of the examination. An applicant who fails either part I or part II of the examination shall retake that part of the examination. The passing grade on each part of the examination is determined by the board to represent competence sufficient to protect the public health, safety and welfare. The board may adopt the recommended passing score of the examination provider for part I of the examination.

(7) An applicant for certification as a social worker, advanced practice social worker, or independent social worker or for licensure as a clinical social worker, need not take part II of the examination if within the 5 years preceding the date of application, the applicant took and passed part II in the process of applying for and receiving another social worker credential from the section.

**History:** Cr. [Register, November, 1993, No. 455](#), eff. 12-1-93; r. (2) and (4), [Register, October, 1998, No. 514](#), eff. 11-1-98; [CR 01-064](#): cr. (7), [Register December](#)

2001 No. 552, eff. 1-1-02; CR 02-105: am. (1), (5) and (7), Register October 2002 No. 562, eff. 11-1-02.

**MPSW 1.06 Examination review procedure for all sections of the board.** An applicant who fails an examination may request a review of the examination, as permitted by the examination provider. If a review is permitted, the following conditions apply:

(1) The applicant shall file a written request to the board within 30 days of the date on which examination results were mailed and pay the fee under s. [SPS 4.05](#).

(2) Examination reviews are by appointment only, and shall be limited to the time permitted by the examination provider for part I of the examination and 1 hour for part II of the examination.

(3) Reviews shall be conducted prior to the application deadline date for the next examination for the particular certificate category.

(4) An applicant may review part I of the examination only once.

(5) Part II of the examination may be reviewed by telephone. During a telephone review an applicant shall be provided with the statute or administrative code reference number and the topic of the test questions the applicant failed.

(6) An applicant may not be accompanied during the review by any person other than the proctors.

(7) Bound reference books shall be permitted. Applicants may not remove any notes from the area. Notes shall be retained by the proctor and made available to the applicant for use at a hearing, if desired. The proctor shall not defend the examination nor attempt to refute claims of error during the review.

**History:** Cr. Register, November, 1993, No. 455, eff. 12-1-93; correction in (1) made under s. [13.92 \(4\) \(b\) 7., Stats., Register November 2011 No. 671.](#)

**MPSW 1.07 Claims of examination error.** An applicant for any credential issued by the board who claims an error in the examination may file a written request for board review in the board office within 30 days of the date the examination was reviewed. The board shall review the claim and notify the applicant in writing of the board's decision and any resulting grade changes. Claims of examination error which are not filed within 30 days of an examination review shall be denied. The request shall include:

(1) The applicant's name and address.

(2) The type of credential applied for.

(3) A description of the perceived error, including specific questions or procedures claimed to be in error.

(4) The facts which the applicant intends to prove, including reference text citations or other supporting evidence for the applicant's claim.

**History:** Cr. Register, November, 1993, No. 455, eff. 12-1-93; CR 02-105: am. (intro.) and (2), Register October 2002 No. 562, eff. 11-1-02.

**MPSW 1.08 Credential renewal procedures for all sections of the board.** (1) Each person granted a credential under ch. [457](#), Stats., is certified or licensed for the current period only. To renew certification or licensure, a credential holder shall by July 1 of the odd-numbered year following initial certification or licensure and every 2 years thereafter file with the board an application for renewal on a form prescribed by the board, and submit the fee under s. [440.08 \(2\)](#), Stats.

(2) A credential holder who fails to renew certification or licensure shall cease and desist from practice and from use of the professional title. Within 5 years following the renewal date, a credential holder may renew the expired credential without examination by filing the required renewal application, the renewal fee, and the late renewal fee under s. [440.08 \(3\)](#), Stats. A credential holder who fails to renew certification or licensure within 5 years of the renewal date may be reinstated by complying

with the requirements for obtaining initial certification or licensure, including educational and examination requirements which apply at the time application is made.

(3) An applicant for reinstatement of certification or licensure following disciplinary action shall meet requirements in sub. (1) and may be required to successfully complete an examination as the board prescribes. An applicant who applies for reinstatement more than 5 years after the date of the order imposing discipline against the applicant may be reinstated by complying with the requirements for obtaining initial certification or licensure, including educational and examination requirements which apply at the time the application for reinstatement is made.

(4) The credential and certificate of biennial certification or licensure shall be displayed in a prominent place by each person while certified or licensed by the board.

(5) Every credential holder shall notify the department, in writing, of a change of name or address within 30 days of the change.

**History:** Cr. Register, November, 1993, No. 455, eff. 12-1-93; CR 02-105: am., Register October 2002 No. 562, eff. 11-1-02.

**MPSW 1.09 Alcohol and drug counseling.** (1) USE OF TITLE AND SCOPE OF PRACTICE. (a) A person credentialed by the board may use the title "alcohol and drug counselor" or "chemical dependency counselor" only if he or she is certified as an alcohol and drug counselor or as a chemical dependency counselor through a process recognized by the department of health services.

(b) A person credentialed by the board who treats alcohol or substance dependency or abuse in a clinic certified under ch. [DHS 75](#), shall be a substance abuse counselor as defined in s. [DHS 75.02 \(84\)](#).

(c) A person credentialed by the board may treat alcohol or substance dependency or abuse as a specialty under s. [457.02 \(5m\)](#), Stats., only if he or she is qualified to do so by education, training and experience. In order to treat persons with a DSM diagnosis of substance dependence, to treat the substance dependence issues of a person with a dual diagnosis, to advertise as an AODA specialist, or to be employed in a position identified as an AODA specialist, a person credentialed by the board who provides services in a setting other than a clinic certified under ch. [DHS 75](#), must either be certified as a substance abuse counselor under s. [DHS 75.02 \(84\)](#), or must be authorized by the board to treat alcohol or substance dependence or abuse as a specialty after satisfying all of the requirements in sub. (2).

(d) Any credential holder may prepare a client for substance dependence treatment by referral, may continue to work with a client until a referral for dependence treatment is completed, may continue to work with the non-AODA issues of a person who had been referred for dependence treatment, and may continue to treat a client who is in recovery following treatment for substance dependence.

(2) QUALIFICATIONS. To be authorized by the board to treat alcohol or substance dependence or abuse as a specialty, a person credentialed by the board must submit evidence of all of the following:

(a) Successful passage of the ICRC written counselor certification examination.

(b) At least 1,000 hours of face-to-face client counseling experience, supervised by an individual defined in sub. (4), with individuals diagnosed with substance use disorders, which can be either the same as or separate from the hours for initial licensure.

(c) One-hundred and eighty (180) contact hours of AODA-relevant education, including at least 45 hours of education in psychopharmacology, across the following 4 knowledge domains, further defined in the U.S. department of health and human ser-

vices technical assistance publication series number 21 (TAP-21):

1. 'Understanding addiction.' a. Understand a variety of models and theories of addiction and other problems related to substance abuse.

b. Recognize the social, political, economic and cultural context within which addiction and substance abuse exist, including risk and resiliency factors that characterize individuals and groups and their living environments.

c. Describe the behavioral, psychological, physical health, and social effects of psychoactive substances on the user and significant others.

d. Recognize the potential for substance use disorders to mimic a variety of medical and psychological disorders and the potential for medical and psychological disorders to co-exist with addiction and substance abuse.

2. 'Treatment knowledge.' a. Describe the philosophies, practices, policies and outcomes of the most generally accepted and scientifically supported models of treatment, recovery, relapse prevention, and continuing care for addiction and other substance-related problems.

b. Recognize the importance of family, social networks, and community systems in the treatment and recovery process.

c. Understand the importance of research and outcome data and their application in clinical practice.

d. Understand the value of an interdisciplinary approach to addiction treatment.

3. 'Application to practice.' a. Understand the established diagnostic criteria for substance use disorders and describe treatment modalities and placement criteria within the continuum of care.

b. Describe a variety of helping strategies for reducing the negative effects of substance use, abuse and dependence.

c. Tailor helping strategies and treatment modalities to the client's stage of dependence, change or recovery.

d. Provide treatment services appropriate to the personal and cultural identity and language of the client.

e. Adapt practice to the range of treatment settings and modalities.

f. Be knowledgeable in medical and pharmacological resources in the treatment of substance use disorders.

g. Understand the variety of insurance and health maintenance options available and the importance of helping clients access those benefits.

h. Recognize that crisis may indicate an underlying substance use disorder and may be a window of opportunity for change.

i. Understand the need for and the use of methods for measuring treatment outcome.

4. 'Professional readiness.' a. Understand diverse cultures and incorporate the relevant needs of culturally diverse groups, as well as people with disabilities, into clinical practice.

b. Understand the importance of self-awareness in one's personal, professional and cultural life.

c. Understand the addiction professional's obligations to adhere to ethical and behavioral standards of conduct in the helping relationship.

d. Understand the importance of ongoing supervision and continuing education in the delivery of client services.

e. Understand the obligation of the addiction professional to participate in prevention as well as treatment.

f. Understand and apply setting-specific policies and procedures for handling crises or dangerous situations, including safety measures for clients and staff.

**Note:** Copies of TAP-21 may be obtained from the Wisconsin Certification Board, 10930 W. Potter Road, Suite B., Wauwatosa, WI 53226-3450.

**(3) VERIFICATION AND AUTHORIZATION.** (a) Verification that a credential holder satisfies the requirements of sub. (2) shall be administered by the department of health services or its designee pursuant to an interagency agreement or other contractual arrangement with the department.

(b) Upon verification by the department of health services or its designee that a credential holder satisfies the requirements of sub. (2), the board shall notify the credential holder and record the credential holder's authority to treat alcohol or substance dependency or abuse as a specialty.

**(4) QUALIFIED SUPERVISORS.** (a) For purposes of sub. (2) (b), any of the following may supervise face-to-face client counseling experience by credential holders:

1. A supervisor qualified under s. [DHS 75.02 \(11\)](#).

2. Any of the following, if knowledgeable in psychopharmacology and addiction treatment:

a. A licensed marriage and family therapist.

b. A licensed professional counselor.

c. A licensed clinical social worker.

d. A licensed clinical psychologist.

e. A licensed physician.

(b) To maintain his or her qualification to supervise face-to-face counseling experience by credential holders, a supervisor must complete at least 10 continuing education hours in psychopharmacology or substance abuse treatment during each biennial credentialing period.

(c) A credential holder acquiring supervised experience to satisfy sub. (2) (b), may practice under the supervision of an individual qualified in par. (a).

**(5) CONTINUING EDUCATION.** To maintain his or her authority to treat alcohol or substance dependency or abuse as a specialty, a credential holder must complete at least 10 continuing education hours in alcohol or substance dependency or abuse education during each biennial credentialing period, and will be eligible for credit against the required biennial continuing education requirement for credential renewal for up to 18 hours in alcohol or substance dependency or abuse education.

**History:** CR 02-105; cr. Register October 2002 No. 562, eff. 11-1-02; CR 04-044; renum. MPSW 1.09 to be (1) (a) and am., cr. (1) (b) to (d) and (2) to (5) Register January 2005 No. 589, eff. 2-1-05; correction in (1) (a) to (c), (3) (a), (b), (4) (a) 1. made under s. [13.92 \(4\) \(b\) 6., 7., Stats., Register November 2011 No. 671](#).

#### **MPSW 1.10 Professional liability insurance.**

**(1)** Except as provided in sub. (2), a person licensed as a clinical social worker, marriage and family therapist, or professional counselor may not practice clinical social work, marriage and family therapy, or professional counseling unless he or she has in effect professional liability insurance in the amount of at least \$1,000,000 for each occurrence and \$3,000,000 for all occurrences in one year.

**(2)** Subsection (1) does not apply to a person practicing clinical social work, marriage and family therapy, or professional counseling as an employee of a federal, state, or local governmental agency, if the practice is part of the duties for which he or she is employed and is solely within the confines of or under the jurisdiction of the agency by which he or she is employed.

**History:** CR 02-105; cr. Register October 2002 No. 562, eff. 11-1-02.

#### **MPSW 1.11 Psychometric testing. (1) AUTHORITY.**

This rule is adopted pursuant to ss. [15.08 \(5\) \(b\)](#), [227.11 \(2\)](#) and [457.033](#), Stats.

**(2) DEFINITION.** In this section, the term "psychometric test" means a procedure for measuring psychological, behavioral or interpersonal characteristics in which a sample of an examinee's behavior is obtained and subsequently evaluated and scored using a standardized process. A person credentialed by the board may not use a testing instrument for diagnostic or assessment purposes unless he or she satisfies the requirements in sub. (5). Psychometric testing does not include a test instrument used solely to screen

for problems, to assist in treatment planning, to clarify treatment goals, to plan for interventions, to monitor progress in treatment or an unstandardized questionnaire, unstructured behavior sample or a test used to evaluate performance in education or training or training prepared by a teacher or trainer.

**(3) REQUIREMENTS FOR PERFORMING PSYCHOMETRIC TESTING.** The competent use of a psychometric test requires that the licensee or person supervised by the licensee have the requisite knowledge, skills, training and experience needed to do all of the following:

- (a) Independently select and administer tests appropriate to the practice setting and area of practice.
- (b) Accurately administer, score, and interpret the test.
- (c) Understand and communicate the strengths and limitations of the test appropriate to the context in and purpose for which it is given.
- (d) Use culturally appropriate and sensitive instruments and norms.
- (e) Analyze the results within a broad context of information about the examinee's life.
- (f) Seek supervision or consultation as needed from any licensee who are authorized to perform psychometric testing under this subsection.

**(4) LICENSES AUTHORIZED TO PERFORM PSYCHOMETRIC TESTING.** Psychometric testing may be performed by the following individuals:

- (a) A psychologist licensed under ch. 455, Stats.
- (b) A licensed or training licensed marriage and family therapist, a licensed or training licensed professional counselor or a licensed or training licensed clinical social worker or a certified advanced practice social worker or independent social worker who satisfies the requirements in sub. (5) (a) and is acting under the supervision of a licensed psychologist.
- (c) A licensed marriage and family therapist, licensed professional counselor or licensed clinical social worker who satisfies the requirements in sub. (5) (a) and (b).

(d) A licensed or training licensed marriage and family therapist, a licensed or training licensed professional counselor or a licensed or training licensed clinical social worker or a certified advanced practice social worker or independent social worker who satisfies the requirements in sub. (5) (a) and is acting under the supervision of another licensee of the board specified in par. (c).

**(5) EDUCATIONAL REQUIREMENTS FOR PERFORMING PSYCHOMETRIC TESTING WITHOUT SUPERVISION.** A person who meets the requirements in s. MPSW 1.11 (4) (b), (c) or (d) may engage in psychometric testing without supervision only if the appropriate section of the board has received and approved the following information demonstrating generic and specific qualifications to perform psychometric testing:

- (a) Academic training at the graduate or postgraduate level from a regionally accredited program that covered:
  1. Descriptive statistics.
  2. Reliability and measurement error.
  3. Validity and meaning of test scores.
  4. Normative interpretation of test scores.
  5. Selection of appropriate tests.
  6. Test administration procedures.
  7. Ethnic, racial, cultural, gender, age and linguistic variables.
  8. Testing individuals with disabilities.
- (b) A signed statement from a professional qualified to supervise psychometric testing as set forth in sub. (4) (a) and (c) that the supervised licensee meets the requirements to use psychometric tests as set forth in this subsection. A licensee determined to be qualified to use psychometric tests by prior affidavit is not required to resubmit a signed statement and is deemed to meet the requirements of pars. (a) and (b).

**(6) LICENSES QUALIFIED TO SUPERVISE PSYCHOMETRIC TESTING.** The only professionals qualified to supervise psychometric testing are licensed psychologists, licensed marriage and family therapists, licensed professional counselors, and licensed clinical social workers who meet the requirements in sub. (5) (a) and (b).

**History:** CR 02-105: cr. Register October 2002 No. 562, eff. 11-1-02; CR 10-013: r. and recr. Register December 2010 No. 660, eff. 1-1-11.

**MPSW 1.09 Alcohol and drug counseling. (1) USE OF TITLE AND SCOPE OF PRACTICE.**

(a) A person credentialed by the board may use the title “alcohol and drug counselor” or “chemical dependency counselor” only if he or she is certified as an alcohol and drug counselor or as a chemical dependency counselor through a process recognized by the department.

(b) A person who is credentialed by the board may treat alcohol or substance dependency or abuse as a specialty if the person is credentialed under s. 440.88 or satisfies the educational and supervised training requirements established in this section.

(c) Pursuant to s. SPS 161.01(1)(b), a person who is licensed by the board may provide substance use disorder counseling, treatment or prevention services within the scope of the person’s license.

(d) Any credential holder may do all of the following:

1. Prepare a client for substance dependence treatment by referral.
2. Continue to work with a client until a referral for dependence treatment is completed.
3. Continue to work with the non–AODA issues of a person who had been referred for dependence treatment.
4. Continue to treat a client who is in recovery following treatment for substance dependence.

**(2) REQUIREMENTS FOR CREDENTIALS REQUIRING A MASTER’S DEGREE.** To be authorized to treat alcohol or substance dependency or abuse as a specialty, a credential holder who has obtained a master’s degree for a credential issued by this board shall meet all of the following:

(a) A minimum of 135 contact hours of substance use disorder education, which may be obtained during degree or additional to the degree. The education shall be in all the following areas:

1. Understanding addiction.
2. Treatment Knowledge.
3. Application to Practice.
4. Professional Readiness.

(b) A minimum of 200 hours of face-to-face client experience, under the supervision of a qualified supervisor, with individuals diagnosed with substance use disorders which can be either the same as or separate from the hours obtained for the credential issued by the board.

**(3) REQUIREMENTS FOR CREDENTIALS REQUIRING A BACHELOR’S DEGREE.** To be authorized to treat alcohol or substance dependency or abuse as a specialty, a credential holder who has obtained a bachelor’s degree for a credential issued by this board shall meet all of the following:

(a) A minimum of 180 contact hours of substance use disorder education, which may be obtained during degree or additional to the degree. The education shall be in all the following areas:

1. Understanding addiction including all of the following:
  - a. Knowledge of drug use, abuse and interaction.
  - b. Understand a variety of models and theories of addiction and other problems related to substance use.
  - c. Recognize the social, political, economic, and cultural context within which addiction and substance abuse exist, including risk and resiliency factors that characterize individuals and groups and their living environments.

- d. Describe the behavioral, psychological, physical health, and social effects of psychoactive substances on the person using and significant others.
  - e. Recognize the potential for substance use disorders to mimic a variety of medical and mental health conditions and the potential for medical and mental health conditions to coexist with addiction and substance abuse.
2. Treatment knowledge including all of the following:
- a. Describe the philosophies, practices, policies, and outcomes of the most generally accepted and scientifically supported models of treatment, recovery, relapse prevention, and continuing care for addiction and other substance-related problems.
  - b. Recognize the importance of family, social networks, and community systems in the treatment and recovery process.
  - c. Understand the importance of research and outcome data and their application in clinical practice.
  - d. Understand the value of an interdisciplinary approach to addiction treatment.
3. Application to practice including all of the following:
- a. Understand the established diagnostic criteria for substance use disorders, and describe treatment modalities and placement criteria within the continuum of care.
  - b. Describe a variety of helping strategies for reducing the negative effects of substance use, abuse and dependence.
  - c. Tailor helping strategies and treatment modalities to the client's stage of dependence, change, or recovery.
  - d. Provide treatment services appropriate to the personal and cultural identity and language of the client.
  - e. Adapt practice to the range of treatment settings and modalities.
  - f. Be familiar with medical and pharmacological resources in the treatment of substance use disorders.
  - g. Understand the variety of insurance and health maintenance options available and the importance of helping clients access those benefits.
  - h. Recognize that crisis may indicate an underlying substance use disorder and may be a window of opportunity for change.
  - i. Understand the need for and the use of methods for measuring treatment outcome.
4. Professional readiness including all of the following:
- a. Understand diverse cultures, and incorporate the relevant needs of culturally diverse groups, as well as people with disabilities, into clinical practice.
  - b. Understand the importance of self-awareness in one's personal, professional, and cultural life.
  - c. Understand the addiction professional's obligations to adhere to ethical and behavioral standards of conduct in the helping relationship.
  - d. Understand the importance of ongoing supervision and continuing education in the delivery of client services.
  - e. Understand the obligation of the addiction professional to participate in prevention and treatment activities.
  - f. Understand the apply setting-specific policies and procedures for handling crisis or dangerous situations, including safety measures for clients and staff.

(b) A minimum of 1,000 hours of face-to-face client experience, under the supervision of a qualified supervisor, with individuals diagnosed with substance use disorders which can be either the same as or separate from the hours obtained for the credential issued by the board.

(4) **QUALIFIED SUPERVISORS.** A qualified supervisor is a person who is knowledgeable in psychopharmacology and addiction treatment and is any of the following:

(a) A clinical supervisor as defined by DHS 75.02(11).

(b) A licensed marriage and family therapist.

(c) A licensed professional counselor.

(d) A licensed clinical social worker.

(e) A licensed psychologist.

(f) A licensed physician.

(5) **CONTINUING EDUCATION.** To maintain the authority to treat alcohol or substance dependency or abuse as a specialty, a credential holder must complete at least 10 continuing education hours in substance abuse disorder. The continuing education may be counted toward the continuing education required for renewal of the underlying credential.