Title 10 DEPARTMENT OF HEALTH AND MENTAL HYGIENE

Subtitle 58 BOARD OF PROFESSIONAL COUNSELORS AND THERAPISTS

Chapter 12 Supervision Requirements

Authority: Health Occupations Article, §§17-101(s) and (v) and 17-301—17-309, Annotated Code of Maryland
.01 Scope.

A. This chapter establishes standards of supervision and the responsibilities of supervisors and supervisees in the practice of clinical professional counseling.

B. This chapter applies to licensees who practice clinical professional counseling, clinical marriage and family therapy, and clinical alcohol and drug counseling in this State, and who provide supervision for licensed graduate professional counselors.

C. This chapter also applies to licensed graduate professional counselors obtaining the supervised clinical experience required by Health Occupations Article, §17-304, Annotated Code of Maryland.

D. Except as otherwise specified in this chapter, this chapter does not apply to personnel or management practices associated with contractual relationships or employment.

E. Licensed graduate professional counselors who are in the process of completing their supervision requirements before August 22, 2011, may continue to complete their requirements as previously agreed to with their supervisor. A licensed graduate professional counselor whose supervision begins after August 22, 2011, shall follow the requirements set forth in Regulation .03 of this chapter.
B. Terms Defined.

(1) “Applicant” means an individual applying for licensure as a clinical professional counselor.

(2) “Board” means the Maryland Board of Professional Counselors and Therapists.

(3) Face-to-Face.

(a) “Face-to-face” means in the physical presence of the individuals involved in the supervisory relationship during either individual or group supervision, or using video conferencing which allows individuals to hear and see each other in actual points of time.

(b) “Face-to-face” does not include:

(i) Telephone supervision; or

(ii) Internet communication that does not involve actual or real time video conferencing, such as instant messaging services and social networking sites.

(4) “Licensed mental health care provider” means:

(a) A licensed clinical professional counselor; or

(b) A licensed clinical alcohol and drug counselor, licensed clinical marriage and family therapist, licensed certified social worker-clinical, psychiatrist, psychologist, or psychiatric nurse practitioner who is authorized by law to practice a health occupation which includes the diagnosis, prevention, treatment, and amelioration of psychological problems and emotional or mental conditions of individuals or groups.

(5) “Relative” means:

(a) Spouse or domestic partner;

(b) Parent, stepparent, or legal guardian;

(c) Sibling or stepsibling;

(d) Child, stepchild, foster child, or ward;

(e) Mother-in-law or father-in-law;

(f) Son-in-law or daughter-in-law;

(g) Grandparent or grandchild;

(h) Aunt or uncle; or
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(i) Niece or nephew.

(6) “Supervised clinical experience in professional counseling” means counseling services conducted under the supervision of an approved supervisor.

(7) “Supervisee” means a licensed graduate professional counselor obtaining the supervised experience required by Health Occupations Article, §17-304, Annotated Code of Maryland.

(8) “Supervision” means a formalized professional relationship between a supervisor and supervisee in which the supervisor directs, guides, monitors, instructs, and evaluates the supervisee’s clinical professional counseling practice while promoting development of the supervisee’s knowledge, skills, and abilities to provide clinical professional counseling services in an ethical and competent manner.

(9) Supervision Training.

(a) “Supervision training” means a course or program designed to provide information regarding the supervision process utilized by licensed clinical professional counselors and therapists in a variety of settings.

(b) “Supervision training” content areas may include, but are not limited to:

(i) The role and responsibilities of the supervisor;

(ii) The needs of the supervisee, supervisor, and the clinical services setting while maintaining a clear ethical perspective;

(iii) The role of the supervisor as gatekeeper to the profession;

(iv) Methods for building effective and appropriate relationships with clients;

(v) Methods for group supervision; and

(vi) Models and modalities for practice intervention.

(c) “Supervision training” may be obtained through:

(i) Graduate-level course work; or

(ii) Continuing education units (CEUs)

(10) “Supervisor” means:

(a) A licensed clinical professional counselor, licensed clinical marriage and family therapist, or licensed clinical alcohol and drug counselor who meets the requirements for licensure under Regulations .01, .07, or .08 of this chapter, as approved by the Board; or
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(b) An individual who is a licensed mental health care provider, as defined in §B(4) of this regulation, under Health Occupations Article, Annotated Code of Maryland, as approved by the Board.

(11) “Under the supervision of an approved supervisor” means engaging in an ongoing process of receiving direction from an approved supervisor that includes:

(a) Monitoring the performance of a licensed graduate professional counselor; and

(b) Documented and direct consultation, guidance, and instruction with respect to clinical skill and competency.

(12) “Written contract for supervision” means an agreement, on a form provided by the Board and initiated before beginning supervision, between the supervisee and approved supervisor that details the scope of supervision.

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.03 Composition of Supervised Clinical Experience.

A. A licensed graduate professional counselor shall complete at least half of the requisite supervised clinical experience in professional counseling hours under the supervision of a licensed clinical professional counselor approved by the Board.

B. A licensed graduate professional counselor may complete the remainder of the supervised clinical experience hours in counseling under the supervision of a licensed mental health care provider as defined in Regulation .02B(4)(b) of this chapter and as approved by the Board.

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.04 Required Hours of Supervised Experience.

A. To qualify for a license to practice clinical professional counseling, an applicant holding a master’s degree shall have completed not less than 3 years with a minimum of 3,000 hours of supervised experience in counseling approved by the Board, including:

B. An applicant holding a doctoral degree shall have completed not less than 2 years with a minimum of 2,000 hours of supervised experience, including 50 hours of face-to-face clinical supervision, in counseling approved by the Board, 1 year of which shall have been completed after the award of the doctoral degree.
.05 Standards for Supervision.

A. A supervisor shall:

(1) Supervise only in those areas within the supervisor’s competence as determined by education, training, and experience;

(2) Provide supervision appropriate to the particular level of licensure being applied for or maintained;

(3) Provide supervision in the general content areas established in Health Occupations Article, §17-304, Annotated Code of Maryland;

(4) Ensure that a supervisee has read and is knowledgeable about:

(a) Health Occupations Article, Title 17, Annotated Code of Maryland, including the supervisee’s scope of practice of clinical professional counseling under Health Occupations Article, §17-101(s), Annotated Code of Maryland; and

(b) Title 10, Subtitle 58 of the Code of Maryland Regulations, including COMAR 10.58.03 Code of Ethics; and

(5) Instruct and provide guidance to supervisees in:

(a) Appropriate billing practices, if applicable to the practice site;

(b) Financial record keeping and disclosure;

(c) Establishment and disclosure to clients of:

(i) Fees for services;

(ii) Payment arrangements;

(iii) Payment plans;

(iv) Financial services; and

(v) Terms and conditions of service;

(d) Providing services as authorized by Health Occupations Article, §17-308, Annotated Code of Maryland; and

(e) Providing psychotherapy.

B. The following individuals may not provide supervision for a supervisee:

(1) A relative;
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(2) A licensed graduate professional counselor, licensed graduate marriage and family therapist, or licensed graduate alcohol and drug counselor;

(3) A certified supervised counselor — alcohol and drug;

(4) A certified associate counselor — alcohol and drug; or

(5) A certified professional counselor.

.06 Supervisors — Qualifications and Responsibilities.

A. Before providing supervision to a supervisee, a supervisor shall:

(1) Be:

(a) Licensed by the Board as a:

(i) Clinical professional counselor;

(ii) Clinical marriage and family therapist; or

(iii) Clinical alcohol and drug counselor; or

(b) A licensed mental health care provider as defined in Regulation .02B(4) of this chapter;

(2) File with the Board the supervisor approval form and provide the supervisee with a copy of this form;

(3) Have a license that is unencumbered and without restrictions or conditions due to disciplinary action for the 2 years preceding the application for approved supervisor status;

(4) Be approved as a supervisor by the Board;

(5) Have completed:

(a) 2 years of active clinical practice experience in professional counseling, marriage and family therapy, or alcohol and drug counseling after obtaining a license as a:

(i) Clinical professional counselor;

(ii) Clinical marriage and family therapist; or

(iii) Clinical alcohol and drug counselor; or
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(b) 2 years of active clinical practice experience as a professional counselor, marriage and family therapist or alcohol and drug counselor licensed or certified in another state, territory, or jurisdiction that has requirements that are equivalent to or exceed the requirements of Health Occupations Article, §17-302, 17-303, or 17-304, Annotated Code of Maryland; and

(6) Have completed one of the following education and training experiences not later than December 31, 2015:

(a) 2 years of documented experience providing counselor supervision;

(b) At least 3 semester credit hours of graduate-level academic coursework that includes counseling supervision;

(c) A Board-approved continuing education program in counseling supervision, that includes a minimum of 18 direct clock hours with the trainer or trainers;

(d) The National Board of Certified Counselors (NBCC) Approved Clinical Supervisor (ACS) credential; or

(e) Supervision training as defined in Regulation .02B(9)(a) and (b).

B. Exceptions.

(1) An individual who is approved by the Board as a supervisor before December 31, 2015, may continue to provide counselor supervision after that date provided that not later than that date the supervisor has:

(a) Completed 2 years of documented experience providing counselor supervision; and

(b) Filed the supervisor approval form with the Board and been granted Board-approved supervisor status.

(2) After December 31, 2015, applicants for Board-approved supervisor status will be required to complete either §A(6)(b), (c), or (d) of this regulation.

C. A supervisor may be:

(1) An agency-designated supervisor; or

(2) An independent supervisor in private practice.
10.58.12.07

.07 Responsibilities of a Supervisor.

A supervisor shall:

A. Establish a written contract for supervision initiated before beginning supervision;

B. Ensure that the supervisee is practicing within the scope of the supervisee’s license;

C. Determine the skill level at which the supervisee may practice;

D. Focus on raw data from the supervisee’s practice;

E. Maintain documentation of supervisory sessions for at least 7 years, including dates, duration, and focus of the supervisory sessions;

F. Ensure that a supervisee has read and is knowledgeable about Health Occupations Article, Title 17, Annotated Code of Maryland, and COMAR 10.58;

G. Within a reasonable period of time before termination of supervision, provide the supervisee and employer with a notice of termination to avoid or minimize any harmful effect on the supervisee’s clients or patients;

H. Be responsible for the clinical professional practices of supervisees;

I. Provide for emergency supervision and direction to a supervisee by a Board-approved supervisor;

J. Provide a written evaluation of the supervisee’s progress to the supervisee every 3 months;

K. Provide a copy of the documentation required by Regulation .06A(2) of this chapter:

(1) On request, by the supervisee; and

(2) On request, by the Board or its authorized agent; and

L. Comply with a Board audit of a supervisor’s compliance with regard to the supervision requirements and supervisory responsibilities.

10.58.12.08

.08 Responsibilities of a Supervisee.

A. A supervisee shall:

(1) Verify that the supervisee’s supervisor has been approved by the Board;

(2) Establish a written contract for supervision before beginning supervision;

(3) Attend and participate in supervision as agreed in the written contract for supervision;
.08 Responsibilities of a Supervisee.

(4) Prepare for supervision using case materials related to the supervisee’s clinical counseling practice; and

(5) Maintain documentation of supervisory sessions for at least 7 years, including dates, duration, and focus of the supervision, to be available for verification to the Board, on request by the Board or its authorized agent.

B. A supervisee may not engage in the practice of clinical professional counseling independent of supervision.

C. A supervisee shall provide the client with a copy of a professional disclosure statement as described in Health Occupations Article, §17-507, Annotated Code of Maryland, that:

(1) Clearly states the counseling services are provided under clinical supervision; and

(2) Provides the name of the supervisor with address and contact information.

D. A supervisee shall obtain a signed release of information and informed consent for treatment form from the client which indicates that the client:

(1) Is aware that counseling services are being provided under clinical supervision;

(2) Consents to the recording of counseling sessions with the knowledge that the recording may be shared with and be limited to the supervisor; and

(3) Consents to the sharing of client information between the licensed graduate professional counselor and the named clinical supervisor.

Administrative History

Effective date: August 22, 2011 (38:17 Md. R. 1013)