



Counselor, Social Worker & Marriage and Family Therapist Board

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Social Worker Professional Standards Committee (SWPSC) Minutes **Thursday, July 21, 2016**

- Members Present:** Ms. Anna Bomas, Dr. Carl Brun, Ms. Lisa Haberbusch, Ms. Erin Michel
- Staff Present:** Mr. Simeon Frazier, Mr. Bill Hegarty, Mr. Andy Miller, Ms. Tammy Tingle
- Guests Present:** Ms. Wendy Chen; Ms. Colleen Dempsey, NASW-OH; Mr. Glenn Karr, Esq.; Ms. Tracy Patton

1) Meeting Called to Order

Ms. Michel called the meeting to order at 9:39 a.m.

2) Discussion/Approval of the July 21 & 22 Agenda

Dr. Brun asked to add two items to Correspondence, one discussing LISW roles and the other discussing NASW's LISW-S survey. Ms. Bomas motioned to approve the agenda as amended. Dr. Brun seconded the motion. Motion carried.

3) Appointment of Committee Chair

Ms. Haberbusch motioned to re-appoint Ms. Michel for a second term as Committee Chair. Dr. Brun seconded the motion. Ms. Michel discussed the role, and declined the nomination. Ms. Michel motioned to appoint Dr. Brun as Committee Chair. Ms. Haberbusch seconded the motion. Motion carried.

4) Approval of the May 19 & 20 Minutes

Dr. Brun asked if any changes were needed to the May 19 & 20 minutes. Ms. Michel requested two small corrections to the Executive Committee report for accuracy, then asked for correction a quote that had been attributed to her in that section. She also asked to change a statement that "students and supervisees are unclear" on whether they can practice SOCE efforts to "may be unclear." Mr. Miller responded that in this case the line reflects what was said, but that he would note that Ms. Michel was quoting someone else at the time. Ms.

Haberbusch motioned to accept the minutes as amended. Dr. Brun seconded the motion. Motion carried. Ms. Bomas asked to note that this is an SOCE is an issue where the Board has had no investigations yet, and that while she is not against moving forward on it, she feels that the Board should wait until a case has been investigated.

5) Approval of Applications for Licensure

The SWPSC reviewed the 338 LSW applicants and 65 LISW applicants approved by the staff, and the 12 SWA applicants registered by the staff, from May 19, 2016, through July 20, 2016. Dr. Brun made a motion to approve the applicants. Ms. Michel seconded the motion. Motion carried.

6) Executive Committee Report

Ms. Michel reported that the Board may be increasing application and license fees. Fees have not been increased since 1984, and are now too low to cover technology costs and the time it takes to fully handle an application all the way through. Mr. Carnahan had proposed the \$60 application fee moving up to \$120, and the \$60 renewal fee would be moved to \$80 or \$85. The increased fees would also cover additional staff, but the likelihood of getting approved to hire more people is not good. She also reported on Mr. Carnahan's compensation. Evidently, the Board has not been following standard practice. There's usually a standardized form that DAS uses to evaluate executive directors, and though some Board members were concerned there hasn't been enough open evaluation, the Board actually goes above and beyond what DAS expects.

The Committee also discussed a proposal for the September meeting to reduce the meeting from two days to one. The minimum meeting number in the Board's rules is actually four times a year, so there's some thinking of moving to fewer meetings overall. The committee agreed that one day would not be enough time to get through a full agenda and CEU workload, and staff agreed. Dr. Brun stated that he would also like to keep the Board planning meetings as they are now, in case it comes up. Ms. Bomas stated that in her opinion, the Board's work would only increase over time; she recently saw information from NASW that there's been a 12% increase in demand for social workers recently.

Ms. Michel also discussed the Board's recent influx of applications, and with temporary workers filling the receptionist role for a few months it has meant more staff time on the phone and more difficulty in completing work. According to Mr. Carnahan, while he's encouraged staff to pick up the pace and work as hard as they can, he's also worked to manage licensee expectations and keep them informed on what's happening.

7) Investigations

Mr. Hegarty clarified some recent questions on the Board's handling of closed cases. In dealing with closed cases, all Boards tend to do things the same way: have only one Board member review the case, and allow the others to simply vote to close the cases. Some smaller Boards give a little more information to their Board members, but the AAG is very comfortable

with how things are being handled by the CSWMFT Board, and it's unlikely that a Board member would be sued or liable. The Ethics Commission is also looking at the issue, just to be sure, and the Board's process is voluntarily under review to make sure there are no problems. Ms. Haberbusch also stated that in her experience, most information is gathered by staff, and when reviewing cases she is essentially doing quality control rather than making any major decisions on her own.

a) Closed cases

Dr. Brun made a motion to close the following cases, as he had determined that no actionable offenses had been found. Ms. Michel seconded the motion. Motion carried.

2016-41	Competency. Close with a strong caution.
2016-63	Non-sexual boundaries. Close with a caution.
2016-101	Confidentiality. Allegation not substantiated.
2016-102	Confidentiality. Allegation not substantiated.
2016-114	Competency. Close with caution.
2016-130	Competency. Allegation not substantiated.
2016-133	Misrepresenting of credentials. No violation found.

Ms. Haberbusch made a motion to close the following cases, as she had determined that no actionable offenses had been found. Dr. Brun seconded the motion. Motion carried.

2016-69	Competency. Close with strong caution.
2016-79	Practice without a license. Close with strong caution.
2016-87	Impairment. Allegation not substantiated.
2016-94	Confidentiality. Close with strong caution.
2016-107	Non-sexual boundary. Close with strong caution.
2016-141	Practice on lapsed license. Close with caution.

b) Notice of Opportunity for Hearing

a) **Ms. Beverly Frierson:** Ms. Michel motioned to issue a Notice of Opportunity for Hearing to Ms. Frierson, who on January 11, 2016, pled guilty to one count of Tampering with Evidence, a third degree felony. Receiving this felony conviction is a violation of ORC 4757.36(C)(5). Ms. Bomas seconded the motion. Motion carried.

c) Consent Agreement

a) **Ms. Elizabeth Jones:** In May 2016, Ms. Jones had been revoked for audit failure. After this revocation, she communicated to the Board that she actually had completed her CEU hours, so in this instance Mr. Hegarty asked the Board to vacate the revocation and reactivate Ms. Jones's license with a reprimand. Dr. Brun motioned to approve the consent agreement between the Board and Ms. Jones. Ms. Haberbusch seconded the motion. Ms. Michel recused herself; she pointed out that she does work with the individual, but wasn't aware of this at the time of the revocation since the licensee goes

by Beth at work. Motion carried.

d) Impairment Order

Mr. Hegarty stated that Investigative staff have reviewed a case where they are asking to order a licensee into mental health impairment evaluation. The case number is 2016-62. Ms. Haberbusch asked if the Board was responsible for choosing the site to perform the assessment. Mr. Hegarty stated that the Board regularly uses an agency in Macon and another in Cleveland. The evaluation is at the licensee's expense. If she chooses not to go, then she is admitting to the impairment, and the Board will move forward with discipline. Ms. Haberbusch motioned to approve the order. Dr. Brun seconded the motion. Motion carried.

8) Discussion Regarding Medical Scope of Practice

Ms. Dempsey stated that she wanted to talk about medical social work, and about the kind of work where medication comes up. In the last couple of months she's met with hospital social workers, chronic illness and chemical dependency social workers, and others find out what they know and how they deal with medication. Accessing information on medications and dealing with client's issues around that medication are core functions of those positions. When it comes to educating clients, social workers in the addictions field are sometimes required to educate clients on the risk of addictions to particular medications. Clients are asked to bring in medication wrappers so the social worker can count them. Dr. Brun asked her opinion on the SWPSC's recent review of a CareSource position, and how their understanding could affect social workers en masse. Ms. Bomas stated that as a medical social worker employed by Ohio Health, she works with clients on medication management, helps clients who can't afford medication, and is knowledgeable on psychotropic drugs. But her problem is, there are so many medications in the field, and she doesn't have the knowledge base to address all the side effects that can happen when drugs are used off label. Ms. Dempsey stated that liability is indeed an issue. There could be major problems if a client takes the wrong medication and a social worker is blamed. When it comes to which medications a client should take, social workers should be referring those questions back to the client's doctor. Social workers should not be interpreting a doctor's orders. Ms. Haberbusch asked why social workers are required to question clients on their medication. Ms. Dempsey answered that it's part of the initial assessment or check-in. Also, social workers have more facetime with their client than a nurse does, so that's why tasks are frequently given to them. Ms. Haberbusch questioned why a nurse would not perform the medication review. Writing down what a person's medications are in an assessment seems different from calling a client to talk about their medication. Ms. Dempsey stated that she's reached out to CareSource for more information, but hasn't heard back yet. Ms. Michel asked whether agencies were pushing for social workers to perform this work, or if this push is coming from insurance companies. In a managed care state, public policy may be pushing these decisions. Mr. Karr recollected that in the late 1990s, he worked on a psychology board rule change which allowed psychologists to perform medication management. There is a specific rule allowing for that type of work, and if the medical board had found out about it early on, they would have fought back. Medication management involves making some limited recommendations with regard to the medication.

Ms. Haberbusch stated that if someone came to the Board asking approval for a program about helping a client with medication (helping them read the labels, etc.), the Board would not approve it. Ms. Dempsey stated that a social worker may need to evaluate mood as a side effect of medication, so licensees do need to at least know what side effects a medication can cause so that it can be factored into a diagnosis. Dr. Brun stated that he would definitely welcome more information on what social workers are doing in a medical setting. He didn't see a current need to change the scope of practice, but there is a need to understand whether this work is within the current scope of practice.

9) Working Meeting

The SWPSC began its working meeting to review pending applications for licensure, files to be audited, CEU Programs & Providers, supervision records, hardship requests, and licensure renewal and reinstatement issues.

10) SWPSC Administrative Denial Hearing

The matter of the eligibility of Mr. Emanuel C. Williams to become a Licensed Social Worker (LSW) in the state of Ohio came before the Ohio Counselor, Social Worker & Marriage and Family Therapist Board's Social Worker Professional Standards Committee on July 21, 2016. Members present were Ms. Bomas, Ms. Haberbusch, and Ms. Michel.

A Notice of Proposed Opportunity for Hearing was issued to Mr. Williams by the Counselor, Social Worker, & Marriage and Family Therapist Board on March 21, 2016, and the administrative hearing was held on July 21, 2016 at 1:30 p.m. at 77 South High Street, Columbus OH, 43215, pursuant to Chapter 119 and Section 4757 of the Ohio Revised Code. The State was represented by Senior Assistant Attorney General Melissa L. Wilburn. Mr. Williams was present and not represented by counsel.

After hearing testimony and reviewing state evidence, the SWPSC entered into executive session to discuss the denial of Mr. Williams's application for licensure. The SWPSC determined that Mr. Williams does possess the good moral character to currently be licensed as a social worker. They hereby ordered that Mr. Williams be licensed as a social worker with the following condition: that Mr. Williams must receive individual alcohol or drug counseling from a Board-approved practitioner for a period of one year, a minimum of two one-hour sessions per month.

11) Meeting Adjourned

The meeting was adjourned at 3:30 p.m.

Social Worker Professional Standards Committee (SWPSC) Minutes
Friday, July 22, 2016

Members Present: Ms. Anna Bomas, Dr. Carl Brun, Ms. Lisa Haberbusch, Ms. Erin Michel

Staff Present: Mr. Brian Carnahan, Mr. Simeon Frazier, Mr. Bill Hegarty, Mr. Andy Miller

Guests Present: Ms. Colleen Dempsey, NASW-OH; Ms. Wendy Chen; Ms. Danielle Smith, NASW-OH

1) Meeting Called to Order

Dr. Brun called the meeting to order at 9:35 a.m.

2) NASW Report

Ms. Smith reported that NASW Ohio is still working on SOCE, encouraging consumers to submit complaints. She described the problem as being more pervasive than expected. There are also documentation lapses and unrecorded sessions involved in the complaints she's heard of, which are a further issue. NASW Ohio is also working on police reform and supporting Black Lives Matter. Ms. Dempsey reported that they are holding meetings and working with the community on reducing violence by the police, encouraging social workers throughout the justice system to reach out and do what they can. She reported having gone on ridealongs, seeing police officers who experience burnout and tension and long shifts just like social workers do. Ms. Bomas asked what is being done to reduce violence against the police as well. Ms. Haberbusch replied that in these isolated incidents of police officers being shot, these are isolated people who are not aligned with anyone. Ms. Smith added that for mass shooters there are mental health issues there as well, and it's important to use relationships with the police and justice system to address these issues. A lot of things come down to lack of funding in police departments. Ms. Dempsey stated that NASW is trying to inject a social work perspective into these situations at every opportunity, and wading in wherever they can. She also reported on their work with the behavioral health redesign. NASW is advocating for SWTs to have the same billing access as LSWs, since their scope of practice is the same. Ms. Smith reported that they have contracted with Cindy Webb to help on private practice issues, and are also increasing trainings and developing a certificate program on case management and medical work, in order to give people a little more than a random bunch of trainings. They're also doing trainings on how to identify and prevent mass shooters, and how brain chemistry affects violence.

3) New Business

Mr. Miller provided follow-up on an item from the May meeting. In that meeting, Ms. Michel had encouraged the SWPSC to have more discussion about what macro social work is, and how it relates to scope of practice and supervision. He provided a good definition of macro

practice from Boston University as a starting point for conversation. Ms. Michel stated that it would be good for all Board members to be aware of what macro practitioners do, especially when it comes to approving CEU content. The perspective on the content can be what makes it appropriate: if you have a financial manager presenting on agency funding, that's different from a social worker presenting on it. She stated that it was probably not necessary to add a definition of macro practice in the rules, but it would be useful to share with the CEU team for guidance. Dr. Brun stated that he would like to hear whether the other professions have their own version of macro practice and how it's used. What's gotten lost when using the "macro" term is, we focus a lot on management instead of advocacy, social justice, and community organizing. Those last three are the real roots of macro practice. MSW programs are teaching people how to run agencies instead of training them how to do community development. The committee agreed that it might be beneficial to bring someone in to talk about macro practice, and to bring in Patty, Paula, and Rhonda as well so they can get a good idea of how to approve education on these topics. Dr. Brun stated that he would also talk to the Executive Committee about having it in a planning session, to inform the other professional committees on this topic.

4) Executive Director's Report

Mr. Carnahan reported that ASWB has asked the Board to begin using the Master's exam for MSW students applying for LSW licensure. ASWB strongly insists that they tailor the exams to particular levels, and are also concerned that if they're ever sued they would not be able to defend the exams if they were not used appropriately. ASWB will allow some exemptions, and they do seem amenable to allowing people to test in their final semester. There are also some rumblings that they may get rid of the Advanced Generalist exam, and in that instance the Board would have to address how LISWs are licensed and how macro practice is done. ASWB is giving five years to start using the Master's exam, but Mr. Carnahan encouraged much quicker action. He felt it would help to clarify things since most applicants are looking to take an exam for their education level anyway. Dr. Brun asked if this would require three exams for everyone. Mr. Miller responded that applicants applying for an LSW will take the Bachelor's or Master's exam depending on their education level, and then eventually LSWs with an MSW will take the Clinical or Advanced Generalist to earn their LISW. Someone who gets licensed as an LSW with a BSW should never need to take the Master's exam since there's no separate LMSW license. Mr. Carnahan reiterated that the change could be made reasonably soon, but it might be best to wait a little while to put some space between exam policy changes, and to make sure that the exception to offer the exam in the student's last semester is in place first. He speculated that an effective date of January 2018 might be best.

Mr. Carnahan reported that he would also be asking for a motion to increase licensure fees. Looking at the national averages, application fees are an average of \$100, and the national renewal average is \$115. Some other states have almost no fees, while others assess steep fees for reinstatement and things like that. Ms. Michel asked how much time is spent on a single application. Mr. Miller stated that between dealing with the initial application, exam approval, checking in items, handling questions from applicants, following up on missing items, and approving the application, processing time was maybe a total of 30 minutes per application. The renewal process is a bit faster, but a lot of time is still spent on CEUs. Mr. Carnahan stated that this fee change is high enough that it allows fees to be kept the same for a long time

without additional increases every few years. This would probably take place in July to coincide with the beginning of the next budgetary year. A fee increase will also give the Board some increased capabilities to do more things, and the new licensure system will be more expensive given its new and better features. Ms. Bomas asked whether licensees would benefit from the increased fees. Mr. Carnahan replied that he would hope to use some funds to put on webinars and other training, but there are a lot of costs the Board has that are non-optional and non-negotiable, such as our rent, IT costs, payroll, and insurance. Other than cutting back on travel, which would hurt the Board's ability to perform quality investigations, there's not much else to cut back on in case of a financial crisis. Ms. Michel pointed out that in the social work profession, cost of living increases are very low throughout the country, and the Board needs to be aware of that.

Mr. Carnahan also reported that for now, the September meeting would remain at two days instead of one, but in talking with staff, he wanted to be sure that the Board's time is not being spent doing things that staff could be doing.

Dr. Brun brought up the issue of Ohio State's supervision survey. He was contacted by Dr. Boettcher, and clarified that supervision CEUs are about training supervision in particular; a lot of the survey questions seemed to be about supervision in general. Ms. Smith clarified that the first half of the survey is about training supervision, and the other half is about work and clinical supervision. The idea was to look at how supervision is being done in general, not to develop trainings, but to get an idea whether there are LISW-S licensees out there who are getting that designation only to do workplace supervision. There are a lot of misconceptions about what the LISW-S is actually for, and NASW and Ohio State want to make sure its real purpose is understood, and that there are enough LISW-S licensees in the field to cover needs.

5) New Business

Mr. Frazier raised the issue of LSWs working for the VA and gaining training supervision. Some individuals are licensed in another state and working here, while others are licensed here and working in another state. The VA allows them to do this, however Ohio supervision rules require that both the supervisor and supervisee must be licensed in Ohio, which could be seen as a contradiction. Mr. Hegarty stated that in the AAG's opinion, it's probably okay for the Board to accept this supervision because the supervisor and supervisee both have a license in some state or other, so the public is protected. She encouraged adding a rule change allowing out-of-state supervised experience for individuals who are employed by the VA or other exempt federal employers. Ms. Bomas asked which state would have jurisdiction in the event of a complaint. Mr. Hegarty replied that he can only investigate a federal employee if the federal government allows it. The VA will generally perform investigations on their own, and bring us in if they find something. If they initiate a complaint, they are generally very good about following up with the Board. It's no more unusual than agencies who will handle issues internally. He then suggested that as far as handling the issue goes, one way to do things would be to create a policy change prior to a rule change, saying that we would accept this supervision for now, and then file a rule change in the future once the process is more clearly defined and any strange exceptions have been discovered. The SWPSC agreed with this approach. Ms. Haberbusch motioned to accept supervised experience toward the LISW wherein an individual

is a) licensed as an LSW or equivalent in another state, b) employed by the Department of Defense or Veteran's Administration, and c) appropriately supervised by an independently-licensed individual who is acceptable according to the laws of the jurisdiction where supervised practice occurred. Ms. Michel seconded the motion. Motion carried. Mr. Frazier also raised the situation of another licensee who worked in the navy, and completed navy contractual hours in an exempt setting for a federal employer, but was not licensed at that time. The supervisee is wanting to count this naval experience toward LISW licensure. Mr. Hegarty replied that in his mind, this issue is different in that it's unclear whether the LSW actually completed supervision at all, or whether he is trying to use something else to qualify as a substitute for supervised experience. The LSW needs to be able to show 3000 hours of post-licensure supervised experience.

6) **Correspondence**

- a) The SWPSC reviewed a hardship request from a licensee wishing to gain supervised experience from a PCC-S with whom she works, rather than pay an outside LISW-S for supervision. Ms. Michel motioned to deny the request since the licensee is not prevented from getting supervision; she may simply need to accumulate it more slowly due to cost. Ms. Haberbusch seconded the motion. Motion carried.
- b) The SWPSC reviewed a hardship request from another licensee requesting supervision from a PCC-S due to difficulty locating an LISW-S supervisor. Ms. Haberbusch motioned to deny the hardship request, since the LSW is not barred from receiving supervision electronically from someone outside her area. She stated that she would also do a little research and see if there was someone she knew in that area who might be able to help out. Dr. Brun seconded the motion. Motion carried.
- c) Dr. Brun asked if there was any more discussion regarding fee increases. Ms. Michel stated that she wanted to know what specific expenditures the Board is looking to cover. Mr. Carnahan had mentioned that he wanted to hire more staff, and Dr. Brun pointed out that the licensure system could be a major expense. Ms. Haberbusch stated that she might be resistant if the Board had more recently raised fees, but considering fees haven't been raised in thirty years, it's more understandable. Dr. Brun suggested writing a caveat into the proposal that would limit the ability to raise fees a second time in the near future.

7) **Meeting Adjourned**

The meeting was adjourned at 12:07 p.m.

 9-23-16

Dr. Carl Brun, Chairperson

