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Scott Walker, Governor
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MPSW 1.09 RULE COMMITTEE MEETING of MARRIAGE AND FAMILY THERAPY, PROFESSIONAL COUNSELING AND SOCIAL WORKERS EXAMINING BOARD TELECONFERENCE

Room 121A, 1400 East Washington Avenue, Madison
Contact: Dan Williams (608) 266-2112
June 11, 2014

The following agenda describes the issues that the Committee 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 Committee. A quorum of the Board may be present.

AGENDA

10:00 A.M.

OPEN SESSION – CALL TO ORDER – ROLL CALL

A. Adoption of Agenda (1)

B. Legislative/Administrative Rule Matters – Discussion and Consideration (2-39)

1) MPSW 1.09 relating to alcohol and drug counseling

a) Timeline and Process for Revising the Rule

b) Revision Proposals

C. Public Comment

ADJOURNMENT

State of Wisconsin
Department of Safety & Professional Services

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request:	2) Date When Request Submitted:
Sharon Henes **Administrative Rules Coordinator**	23 May 2014 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:

MSPW 1.09 Rule Committee

4) Meeting Date:	5) Attachments:	6) How should the item be titled on the agenda page?
11 June 2014	☒ Yes ☐ No	A. Approval of Agenda B. Proposed Revisions to MPSW 1.09 relating to alcohol and drug counseling C. Public Comments

7) Place Item in:	8) Is an appearance before the Board being scheduled?	9) Name of Case Advisor(s), if required:
☒ Open Session ☐ Closed Session ☐ Both	☐ Yes (Fill out Board Appearance Request) ☐ No	

10) Describe the issue and action that should be addressed:

Attached for your reference are the following:

Current MPSW 1.09 rule
SAMHSA Scopes of Practice & Career Ladder for Substance Use Disorder Counseling
SPS rules for the AODA credentials governed by SPS

11) Authorization

Sharon Henes — *23 May 2014*

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.

Revised 8/13

Current MPSW 1.09

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 services 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.**

September 2011

Scopes of Practice & Career Ladder for Substance Use Disorder Counseling

This document reports on a meeting, Expert Panel on Scopes of Practice In the Field of Substance of Use Disorders, held March 12, 2010, supported by the Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services (HHS). The views, opinions, and content of this publication do not necessarily reflect the views, opinions, or policies of SAMHSA or HHS.

PEP11-SCOPES

Background and Introduction

Treatment of substance use disorders (SUD) is recognized as a multidisciplinary practice supported by theoretical and scientific literature. Research has demonstrated that evidence-based treatment of substance use disorders can lead to significant reductions in drinking and drug taking as well as major improvements in physical and mental health and social functioning. However, the provision of culturally relevant evidence-based practices and the demonstration of significant treatment outcomes depend on an effectively trained and supported workforce.[1]

The Patient Protection and Affordable Care Act as well as the Mental Health Parity and Addiction Equity Act requires health plans, self-insured employers, and union-funded group health plans that offer mental health and substance use disorder benefits to establish the same financial requirements and benefit limitations that apply to general medical and surgical care. Behavioral health providers are preparing for changes in business practices along with developing the workforce needed to respond to changes in payment for services and anticipated increase in the demand for services. The substance use disorder treatment field will be held to the same standards and requirements as the primary health field. Therefore, the substance use disorder treatment profession needs to be ready to document and codify its services and service delivery systems.

To prepare for the coming changes and increased demand for services, the Substance Abuse and Mental Health Services Administration (SAMHSA) convened key stakeholders in March 2010 to develop a Model Scope of Practice and Career Ladder for substance use disorders treatment workers. These stakeholders included representatives from the higher education, the National Association of State Alcohol/Drug Abuse Directors (NASADAD), the State Association of Addiction Services (SAAS), the International Certification and Reciprocity Consortium (IC&RC), NADAAC, the National Association of Addiction Professionals, and the Addiction Technology Transfer Center (ATTC) network. The draft Model Scope of Practice and Career Ladder were then sent out for field review and comments.

This document provides a framework and a guide for States to develop their own Substance Use Disorder Scopes of Practice and Career Ladders to meet the needs of their specific jurisdiction.

Please note that the recommendations in this document do not include standards for peer recovery workers. It was determined that stakeholders from the recovery community would be best suited to develop these requirements unique to the peer recovery workforce.

How the Scopes of Practice and Career Ladder can be used

This Model Scope of Practice and Career Ladder document can be used and adapted by States and their constituencies, including the Single State Authorities (SSAs), leaders in the field, providers, professional associations, credentialing bodies, State consumer groups, and institutions of higher education as they develop scopes of practice, career ladders, credentialing criteria or course curricula. These constituencies might use a model Scope of Practice to:

[1] Southern Coast Addiction Technology Transfer Center. *Applying the TAP 21 to Certification Standards & Other Addiction Treatment Workforce Improvement Initiatives.*

- Protect the public by setting standards;
- Put practice in line with higher education;
- Allow practitioners to be reimbursed for services (e.g., to collect 3rd party payment);
- Raise awareness of the profession; and
- Inform workforce development activities.

Many States already have a Scope(s) of Practice for SUD counselors, along with licensing and credentialing requirements, while others do not. For those States without a Scope of Practice, this document may provide a guide upon which to build or adapt a particular State's needs for policy and regulation. For those States with an existing Scope of Practice, it may be a useful framework to assess whether the current Scope is in keeping with the most up-to-date thinking in the field of substance use disorder counseling.

There are many benefits that can result from the establishment of career ladders. These benefits include:

- **Employee retention**—career ladders illustrate potential for advancement, which serves as an incentive for employees to stay with organizations or within a field. Employers save on costly turnover, recruitment, and training expenses. Using this career ladder as an example, an organization hiring a substance use disorder technician in an entry-level position could promote employee professional development by encouraging additional education and training that helps the individual move into other positions if he/she is interested in a career in the field.

- **Performance incentives—**the opportunity for advancement motivates employees to produce and perform well on the job and to acquire new knowledge and skills. Using this career ladder as an example, an organization hiring someone with a Bachelor's degree could encourage that employee's professional development in obtaining a Master's degree combined with supervised work experience to move into a clinical supervision position.

- **A career development program—**the graphic representation of career ladders (such as the charts included) provides an easily understood tool to assist career counselors and individuals in career planning and decision-making.

The Model Scope of Practice and Career Ladder provided here was developed for your use to honor the founders of the profession by affording people an opportunity to enter the field while still developing their skills, knowledge base, and abilities, and advance in their career to a higher level of responsibility.

Scopes of Practice for Substance Use Disorder Counseling

The Model Scopes of Practice presented here includes a full range of responsibility and practice, from entry level to clinical supervision. These Scopes of Practice were developed using the definition used by the Federation of State Medical Boards (FSMB), which defines a Scope of Practice as follows:

> "…definition of rules, regulations, and the boundaries within which a fully qualified practitioner with substantial and appropriate training, knowledge, and experience may practice in a field of medicine or surgery or other specifically defined field. Such practice is also governed by requirements for continuing education and professional accountability."

The Model Scopes of Practice for Substance Use Disorder Counseling presented here is based on CSAT's Technical Assistance Publication, *Addiction Counseling Competencies: The knowledge, skills, and attitudes of professional practice, known in the field as "TAP 21"*[2] *and Applying the TAP 21 to Certification Standards & Other Addiction Treatment Workforce Improvement Initiatives.*[3] The TAP 21 has been cross-walked with the domains and functions that are required by major certification and credentialing organizations and has been endorsed by these groups.

Model Scopes of Practice for Substance Use Disorder Counseling

Substance Use Disorder (SUD) professionals work in a broad variety of disciplines but share an understanding of the addiction process that goes beyond the narrow confines of any specialty. Professional counseling of people with substance use disorders consists of the application of general counseling theories and treatment methods adopted with the express purpose of treating alcohol and drug problems. Effective treatment can lead to a life of recovery and enhanced social, psychosocial, or bio-psychosocial functioning of individuals, couples, families, groups, organizations, and communities. Activities of a counselor within this field are based on the practice dimensions outlined in TAP 21 and include the following:

1. Clinical Evaluation
2. Treatment Planning
3. Referral
4. Service Coordination
5. Counseling
6. Client, Family, and Community Education
7. Documentation
8. Professional and Ethical Responsibilities

For definitions of these terms, please refer to the glossary at the end of this document.

[2] Center for Substance Abuse Treatment. *Technical Assistance Publication (TAP) Series 21, Addiction Counseling Competencies: The knowledge, skills, and attitudes of professional practice*. Rockville, MD: Substance Abuse and Mental Health Services Administration (DHHS Publication No. SMA 064171), 2006.

[3] Southern Coast Addiction Technology transfer Center. *Applying the TAP 21 to Certification Standards & Other Addiction Treatment Workforce Improvement Initiatives.*

CATEGORY 4: INDEPENDENT CLINICAL SUBSTANCE USE DISORDER COUNSELOR/SUPERVISOR

Practice of Independent Clinical Substance Use Disorder Counselor/Supervisor –An Independent Clinical Substance Use Disorder Treatment Counselor/Supervisor typically has a Masters or other post graduate degree and is licensed to practice independently. The scope of practice for Independent Clinical Substance Use Disorder Counselor/Supervisor can include:

1. Clinical evaluation, including screening, assessment, and diagnosis of Substance Use Disorders (SUDs) and Co-Occurring Disorders (CODs)
2. Treatment Planning for SUDs and CODs, including initial, ongoing, continuity of care, discharge, and planning for relapse prevention
3. Referral
4. Service Coordination and case management in the areas of SUDs and CODs
5. Counseling, therapy, trauma informed care, and psycho-education with individuals, families, and groups in the areas of SUDs and CODs
6. Client, Family, and Community Education
7. Documentation
8. Professional and Ethical Responsibilities
9. Clinical supervisory responsibilities for all categories of SUD Counselors

The Independent Clinical Substance Use Disorder Counselor/Supervisor can practice under the auspice of a licensed facility, within a primary care setting, or as an independent private practitioner. It is the responsibility of the Independent Clinical Substance Use Disorder Counselor/Supervisor to seek out clinical supervision and peer support.

CATEGORY 3: CLINICAL SUBSTANCE USE DISORDER COUNSELOR

Practice of Clinical Substance Use Disorder Counselor – The Clinical Substance Use Disorder Treatment Counselor typically has a Masters or other post graduate degree. Depending on the jurisdiction, persons in this position either have not attained their license, or the license is restricted to practice only under supervision of a Category 4 Independent Clinical Substance Use Disorder Counselor/Supervisor. Category 3 Clinical Substance Use Disorder Counselor scope of practice can include:

1. Clinical evaluation, including screening, assessment, and diagnosis of Substance Use Disorders (SUDs) and Co-Occurring Disorders (CODs)
2. Treatment Planning for SUDs and CODs, including initial, ongoing, continuity of care, discharge, and planning for relapse prevention
3. Referral
4. Service Coordination and case management in the areas of SUDs and CODs
5. Counseling, therapy, trauma informed care, and psycho-education with individuals, families and groups in the areas of SUDs and CODs
6. Client, Family, and Community Education
7. Documentation
8. Professional and Ethical Responsibilities
9. Clinical supervisory responsibilities for categories Levels 1 and 2 as well as Substance Use Disorder Technicians.

The Substance Use Disorder Counselor 3 can only practice under the auspice of a licensed facility, within a primary care setting, and under clinical supervision of a Clinical Substance Use Disorder Counselor 4.

CATEGORY 2: SUBSTANCE USE DISORDER COUNSELOR

Practice of Substance Use Disorder Counselor – The Scope of Practice for the category of those with a Bachelor's degree includes the following activities with clinical supervision of a Clinical Substance Use Disorder Counselor or other state approved supervisor:

1. Clinical evaluation, including diagnostic impression or Screening, Brief Intervention, and Referral to Treatment Referral (SBIRT)
2. Treatment Planning for SUDs and CODs, including initial, ongoing, continuity of care, discharge, and planning for relapse prevention
3. Referral
4. Service Coordination and case management for SUDs and CODs
5. Counseling, therapy, trauma informed care, and psycho-education with individuals, families, and groups
6. Client, Family, and Community Education
7. Documentation
8. Professional and Ethical Responsibilities
9. Clinical supervisory responsibilities for all categories of SUD Counselors

The Substance Use Disorder Counselor 2 can only practice under the auspice of a licensed facility, within a primary care setting, and under the clinical supervision of Clinical Substance Use Disorder Counselor/Supervisor or Clinical Substance Abuse Counselor.

CATEGORY 1: ASSOCIATE SUBSTANCE USE DISORDER COUNSELOR

Practice of Associate Substance Use Disorder Counselor – The Scope of Practice for the category of those with an Associate's degree include the following activities with clinical supervision from a Clinical Substance Abuse Counselor or state approved supervisor and/or administrative supervision of a Substance Abuse Counselor:

1. Diagnostic impression, and Screening, Brief Intervention, Referral to Treatment (SBIRT).
2. Monitor treatment plan/compliance
3. Referral
4. Service Coordination and case management for SUD
5. Psycho-educational counseling of individuals and groups
6. Client, Family, and Community Education
7. Documentation
8. Professional and Ethical Responsibilities

The Associate Substance Use Disorder Treatment Counselor can only practice under the auspice of a licensed facility or a primary care setting, and under the clinical and/or administrative supervision of an Independent Clinical Substance Use Disorder Counselor/Supervisor and a Clinical Substance Use Disorder Counselor or the administrative oversight of the Substance Use Disorder Counselor.

SUBSTANCE USE DISORDER TECHNICIAN

Practice of Substance Use Disorder Technician – The Scope of Practice for the category of those with a high school diploma or a GED include the following activities with clinical supervision from a Clinical Substance Abuse Counselor/Supervisor, Clinical Substance Abuse Counselor or state approved supervisor and/or administrative supervision of a Substance Abuse Counselor:

1. Diagnostic impression, and Screening, Brief Intervention, Referral to Treatment (SBIRT).
2. Monitor treatment plan/compliance
3. Referral
4. Service Coordination and case management for SUD
5. Psycho-educational counseling of individuals and groups
6. Client, Family, and Community Education
7. Documentation
8. Professional and Ethical Responsibilities

The Substance Use Disorder Technician can only practice under the auspice of a licensed facility or a primary care setting, and under the clinical and/or administrative supervision of Clinical Substance Use Disorder Counselor/Supervisor, Clinical Substance Abuse Counselor, or the administrative oversight of the Substance Use Disorder Counselor.

Career Ladder for the Field of Substance Use Disorders

Career ladders are occupational structures designed to encourage and reward competent employee performance within a field or a particular organization. Employees move up the rungs of the ladder by demonstrating successful performance and/or obtaining education and training that prepares them for the next level. Career ladders help employees plan for upward mobility in their careers, even if they start in an entry-level job.

The Career Ladder for the Field of Substance Use Disorders presented here provides a framework for understanding the education, training, and supervised work experience necessary to enter and move up in the field to positions of increased responsibility. Some staff without degrees may start in an entry-level category and decide to purse additional education and training to increase their level of responsibility, while others may decide to remain in such a position because it continues to be fulfilling and meaningful to them.

Career Ladder for the Field of Substance Use Disorders (SUD)

Category 4 Independent Clinical Substance Use Disorder Counselor/ Supervisor

Education

Master's degree in SUD counseling or other allied mental health professional (e.g. MA in social work, mental health counseling, marriage and family counseling, etc.), including at least 300 hours of SUD related topics -- if not received with degree, it can be obtained as advanced coursework outside the school setting.

Licensing & Credentialing

Most states require some kind of license and/or credential at this level. Licensing is separate from credentialing in some states, while some states link licensing to credentials. Appropriate license and/or credential and written exam from a nationally-recognized credentialing body based on state regulations is required.

Training & Advanced Course Work

Assumes that foundational and advanced courses have been taken on substance use disorders and counseling, trauma informed care, as well as supervised practicum and/or internships; if not, at least 300 hours of specific SUD training must be obtained. OFTEN NEEDED FOR THIS LEVEL: Additional course work on clinical supervision.

Supervised Work Experience

Prior to taking the exam for this particular credential, individual must complete 4,000 hours of POST Master's level supervised work experience in SUDs consistent with the laws and regulations of each state, with a minimum of 2,000 hours of direct client hours.

Activities

- Clinical evaluation, including screening, assessment, and diagnosis of Substance Use Disorders(SUDs) and Co-Occurring Disorders (CODs)
- Treatment planning for SUDs and CODs, including initial, ongoing, continuity of care, discharge, and planning for relapse prevention.
- Referral
- Client, Family, and Community Education
- Documentation
- Service Coordination, and case management in the areas of SUDs and CODs
- Therapy and psycho-education with individuals, families, and groups in the areas of SUDs, CODs, and Trauma informed care
- Professional and Ethical Responsibilities

Setting

All confidential settings, including primary care settings and private independent practice

Supervisory Responsibilities

Clinical supervisory responsibilities for all categories of SUD Counselors

All services are trauma informed, and all providers are prepared to practice in primary care settings.

Career Ladder for the Field of Substance Use Disorders (SUD)

Category 3 Clinical Substance Use Disorder Counselor

Education

Master's degree in SUD counseling or other allied mental health professional (e.g., MA in social work, mental health counseling, marriage and family counseling, etc.), including at least 300 hours of SUD related topics -- if not received with degree, it can be obtained as advanced coursework outside the school setting.

Licensing & Credentialing

Many states require some kind of license and/or credential at this level. Licensing is separate from credentialing in some states, while some states link licensing to credentials. Appropriate license and/or credential and written exam from a nationally-recognized credentialing body based on state regulations is sometimes required, and often includes the requirement that the Level 3 clinician is supervised by a Category 4, Independent Clinical Substance Use Disorder Clinician/Supervisor. In other jurisdictions, this is a pre-license phase that also requires supervision by a Category 4 Clinician/Supervisor

Training & Advanced Course Work

Assumes foundational and advanced courses have been taken on substance use disorders and counseling, trauma informed care, as well as supervised practicum and/or internships; if not, at least 300 hours of specific SUD training must be obtained.

Supervised Work Experience

Prior to taking the exam for this particular credential, individual must complete 3,000 hours of POST Master's level supervised work experience in SUDs consistent with the laws and regulations of each state, with a minimum of 2,000 hours of direct client hours.

Activities

- Clinical evaluation, including screening, assessment, and diagnosis of Substance Use Disorders (SUDs) and Co-Occurring Disorders (CODs)
- Treatment planning for SUDs and CODs, including initial, ongoing, continuity of care, discharge, and planning for relapse prevention.
- Referral
- Client, Family, and Community Education
- Documentation
- Service Coordination, and case management in the areas of SUDs and CODs
- Therapy and psycho-education with individuals, families, and groups in the areas of SUDs, CODs, and trauma informed care
- Professional and Ethical Responsibilities

The Clinical Substance Use Disorder Treatment Counselor can only practice under the auspice of a licensed facility, and under the clinical supervision of Category 4 Independent Clinical Substance Use Disorder Counselor/Supervisor.

Setting

All confidential settings, including primary care settings and private independent practice

Supervisory Responsibilities

Clinical supervisory responsibilities for Categories 1 and 2 of SUD Counselors

All services are trauma informed, and all providers are prepared to practice in primary care settings.

Career Ladder for the Field of Substance Use Disorders (SUD)

Category 2 Substance Use Disorder Counselor

Education
Bachelor's degree in SUD counseling or other allied mental health professional (e.g., social work, mental health counseling, etc.), including at least 200 hours of SUD related topics -- if not received with degree, it can be obtained as advanced coursework outside the school setting.

Licensing & Credentialing
Most states require some kind of credential or certification at this level. Appropriate credential and written exam from a nationally-recognized credentialing body based on state regulations is required.

Training & Advanced Course Work
Assumes foundational and higher level undergraduate courses have been taken on substance use disorders, trauma informed care, and counseling, as well as supervised practicum and/or internships; if not, at least 200 hours of specific SUD training must be obtained.

Supervised Work Experience
Prior to taking the exam for this particular credential, individual must complete a minimum of 2,000 hours of Bachelor's level supervised work experience in SUDs consistent with the laws and regulations of each state, with a minimum of 600 hours of direct client work.

Activities
- Screening, Brief Intervention and Referral (SBIRT), clinical evaluation, including diagnostic impression, screening, and assessment of SUD
- Treatment planning for SUDs, including initial, ongoing, continuity of care, discharge, and planning for relapse prevention
- Referrals
- Client, Family, and Community Education
- Documentation
- Service Coordination, and case management for SUD and COD
- Psycho-educational counseling of individuals, families, and groups as well as therapy with individuals and groups and trauma informed care
- Professional and Ethical Responsibilities

The Substance Use Disorder Treatment Counselor can only practice under the auspice of a licensed facility and under the clinical supervision of Category 3 or 4 Clinical Substance Use Disorder Counselor.

Setting
All confidential settings, including primary care settings with supervision provided -- not including private practice settings.

Supervisory Responsibilities
Provide administrative supervision of Category 1 Substance Use Counselor and Entry Level Substance Use Disorder Technician.

All services are trauma informed, and all providers are prepared to practice in primary care settings.

Career Ladder for the Field of Substance Use Disorders (SUD)

Category 1 Associate Substance Use Disorder Counselor

Education
Associate's degree in a behavioral science field with a clinical application, including at least 100 hours of SUD related topics -- if not received with degree, can be obtained as advanced coursework outside the school setting.

Licensing & Credentialing
Most states require some kind of credential at this level. Appropriate license and/or credential and written exam from a nationally-recognized credentialing body based on state regulations is required.

Training & Advanced Course Work
Assumes foundational courses have been taken on substance use disorders, trauma informed care, and counseling as well as supervised practicum and/or internships completed. Advanced course work and training are usually not required at this level unless SUD specific training was not obtained through course work. If not, then 100 hours of specific SUD course work is required.

Supervised Work Experience
Prior to taking the exam for this particular credential, individual must complete a minimum of 2,000 hours of Associate level supervised work experience in SUDs consistent with the laws and regulations of each state, with a minimum of 600 hours of direct client work.

Activities
- Diagnostic impression, Screening, Brief Intervention and Referral (SBIRT) of SUD
- Monitor treatment plan/compliance
- Referrals
- Client, Family, and Community Education
- Documentation
- Service Coordination, and case management for SUD
- Psycho-educational counseling of individuals and groups
- Professional and Ethical Responsibilities

The Associate Substance Use Disorder Treatment Counselor can only practice under the auspice of a licensed facility and under the clinical and/or administrative supervision of the clinical supervision of Category 3 or 4 Clinical Substance Use Disorder Counselor.

Setting
All confidential settings, including primary care settings with supervision provided, and not including private practice settings

Supervisory Responsibilities
Cannot provide clinical or administrative supervision of staff but can supervise community and social activities.

Career Ladder for the Field of Substance Use Disorders (SUD)

Entry Level Substance Use Disorder Technician

Education
GED/High School Diploma

Licensing & Credentialing
Many states require some kind of credential for entry level staff. Appropriate credential and written exam from a nationally-recognized credentialing body based on state regulations.

Training & Advanced Course Work
150 clock hours from a jurisdiction approved education provider (related to KSA's or TAP 21) and minimum of 6 clock hours of ethics training. This must be completed before beginning supervised experience.

Supervised Work Experience
Prior to taking the exam for this particular credential, individual must complete a minimum of 1,500 hours of entry level supervised work experience in SUDs that is consistent with the laws and regulations of each state.

Activities
Often able to implement independently:

- Screening of SUD and COD
- Monitor Treatment Plan Compliance

Under Supervision:

- Psycho-educational counseling independently, and with groups for clients and families
- Treatment Planning
- Documentation

The Substance Use Disorder Technician can only practice under the auspice of a licensed facility and under the clinical and/or administrative supervision of Category 3 or 4 Independent, Clinical Category 3 Master's, or the administrative oversight of the Substance Use Disorder Counselor.

Setting
All confidential settings, except private practice, with supervision provided.

Supervisory Responsibilities
Cannot provide clinical or administrative supervision of staff but can supervise community and social activities.

Glossary

Assessment: An ongoing process through which the counselor collaborates with the client and others to gather and interpret information necessary for planning treatment and evaluating client progress.

Client, Family, and Community Education: The process of providing clients, families, significant others, and community groups with information on risks related to psychoactive substance use, as well as available prevention, treatment, and recovery resources.

Clinical Evaluation: The systematic approach to screening and assessment of individuals thought to have a substance use disorder, being considered for admission to addiction-related services, or presenting in a crisis situation.

Competency: Specific counselor functions comprising requisite knowledge, skills, and attitudes.

Co-occurring disorder/coexisting disorder: The presence of concurrent psychiatric or medical disorders in combination with a substance use disorder.

Counseling: A collaborative process that facilitates the client's progress toward mutually determined treatment goals and objectives. Counseling includes methods that are sensitive to individual client characteristics and to the influence of significant others, as well as the client's cultural and social context. Competence in counseling is built on an understanding of, appreciation of, and ability to appropriately use the contributions of various addiction counseling models as they apply to modalities of care for individuals, groups, families, couples, and significant others.

Cultural competency: The capacity of a service provider or organization to understand and work effectively in accord with the beliefs and practices of persons from a given ethnic/racial/religious/social group or sexual orientation. It includes the holding of knowledge, skills, and attitudes that allow the treatment provider and program to understand the full context of a client's current and past socio-environmental situation.

Diagnosis: The classification of the nature and severity of the substance use, medical, mental health, or other problems present. DSM-IV-TR and ICD-10 commonly are used to classify substance use and mental disorders.

Documentation: The recording of the screening and intake process, assessment, treatment plan, clinical reports, clinical progress notes, discharge summaries, and other client-related data.

Professional and Ethical Responsibilities: The obligations of an addiction counselor to adhere to accepted ethical and behavioral standards of conduct and continuing professional development.

Referral: The process of facilitating the client's use of available support systems and community resources to meet needs identified in clinical evaluation or treatment planning.

Screening: The process by which the counselor, the client, and available significant others review the current situation, symptoms, and other available information to determine the most appropriate initial course of action, given the client's needs and characteristics, and available resources within the community.

Service Coordination: The administrative, clinical, and evaluative activities that bring the client, treatment services, community agencies, and other resources together to focus on issues and needs identified in the treatment plan. Service coordination, which includes case management and client advocacy, establishes a framework of action to enable the client to achieve specified goals. It involves collaboration with the client and significant others, coordination of treatment and referral services, liaison activities with community resources and managed care systems, client advocacy, and ongoing evaluation of treatment progress and client needs.

Substance Use Disorder Counseling: The professional and ethical application of basic tasks and responsibilities that include clinical evaluation; treatment planning; referral; service coordination; client, family, and community education; client, family, and group counseling; and documentation.

Treatment planning: A collaborative process in which professionals and client develop a written document that identifies important treatment goals; describes measurable, time-sensitive action steps toward achieving those goals with expected outcomes; and reflects a verbal agreement between a counselor and client. At a minimum, an individualized treatment plan addresses identified substance use disorder(s), as well as issues related to treatment progress, including relationships with family and significant others, potential mental conditions, employment, education, spirituality, health concerns, and social/legal needs.

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Chapter SPS 160

DEFINITIONS

SPS 160.01 Authority.
SPS 160.02 Definitions.
SPS 160.03 Use of title.

Note: Chapter RL 160 was created as an emergency rule effective 9−10−07. **Chapter RL 160 was renumbered chapter SPS 160 under s. 13.92 (4) (b) 1., Stats., Register November 2011 No. 671.**

SPS 160.01 Authority. Chapters SPS 160 to 168 are adopted pursuant to s. 227.11 (2), Stats., and subch. VII of ch. 440, Stats., as created by 2005 Wisconsin Act 25, s. 337am, and amended by 2005 Wisconsin Act 407.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07; **correction made under s. 13.92 (4) (b) 7., Stats., Register November 2011 No. 671.**

SPS 160.02 Definitions. In chs. SPS 160 to 168:

(1) "Accredited" means accredited by an accrediting agency recognized by the U.S. Department of Education.

(2) "Assessment" means the process and procedures by which a counselor or service identifies and evaluates an individual's strengths, weaknesses, problems and needs in order to develop a treatment plan for the individual.

(3) "Behavioral science field" means any of the following:

(a) Health science.

(b) Psychology.

(c) Sociology.

(d) Criminal justice.

(e) Social work.

(f) A field approved by the department.

(4) "CEH" means continuing education hour.

(5) "Clinical substance abuse counselor" means an individual who holds a clinical substance abuse counselor certificate granted by the department.

(6) "Clinical supervision" means a specific and definitive process of oversight of a counselor's professional development in the didactic, experiential and application of the transdisciplinary foundations, and practice dimensions including core functions. Supervision takes place in intermittent in person contact between a clinical supervisor and treatment staff provided on or off the site of a service to ensure that each patient has an individualized treatment plan and is receiving quality care. A primary purpose of "clinical supervision" is to ensure skill development evidenced in quality patient care.

(7) "Clinical supervisor" means an individual who holds a clinical supervisor−in−training certificate, an intermediate clinical supervisor certificate or an independent clinical supervisor certificate granted by the department.

(8) "Clinical supervisor−in−training" means an individual who holds a clinical supervisor−in−training certificate granted by the department.

(9) "Comprehensive program" means a program that is coordinated by a single entity that provides directly, or provides access to, educational programs with integrated and identified program outcomes that fulfill the requirements in s. SPS 166.03 in a preplanned and guided educational progression that enables a student to meet the requirements while building on information already learned.

(10) "Core functions" means those tasks which a substance abuse counselor performs encompassing the following areas:

(a) Screening.

(b) Intake.

(c) Orientation.

(d) Assessment.

(e) Treatment planning.

(f) Counseling.

(g) Case management.

(h) Crisis intervention.

(i) Client education.

(j) Referral.

(k) Reports and record keeping.

(L) Consultation with other professionals regarding patient treatment and services.

(11) "Credential" means a certificate or license granted by the department.

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

(13) "DSM" means the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association.

(14) "GED" means a general education development certification.

(15) "Hour" for purposes of the educational requirement means a period of education consisting of no less than 50 minutes.

(16) "HSED" means a high school equivalency diploma.

(17) "Independent clinical supervisor" means an individual who holds an independent clinical supervisor certificate granted by the department.

(18) "Intermediate clinical supervisor" means an individual who holds an intermediate clinical supervisor certificate granted by the department.

(19) "Patient" means an individual who has completed the screening, placement and intake process and is receiving substance use disorder treatment services.

(20) "Practice dimensions" means the 8 counselor practice dimensions used to effectively treat substance use disorders. They are:

(a) Clinical evaluation.

(b) Treatment planning.

(c) Referral.

(d) Service coordination.

(e) Counseling.

(f) Patient, family and community education.

(g) Documentation.

(h) Professional and ethical responsibilities.

(21) "Prevention" means a pro−active process of promoting supportive institutions, neighborhoods and communities that foster an environment conducive to the health and well being of individuals and families. Prevention may be targeted to specific populations or the larger community by any of the following:

(a) Promoting knowledge, attitudes, skills, values and relationships conducive to the health and well being of individuals and families.

(b) Promoting personal competence, significance and empowerment.

(c) Promoting responsibility, judgment, communication and conflict resolution.

(d) Promoting cultural competency and sensitivity to differences.

(e) Promoting community−wide asset building initiatives.

(f) Promoting healthy support systems in families, schools, workplaces and communities.

(g) Promoting healthy lifestyles and resistance to physical and psychological illness or psychological injury.

(h) Involving citizens in creating cultural changes related to health and wellness.

(i) Counteracting harmful circumstances such as substance use, health and safety hazards, isolation, violence, economic hardship and inadequate housing, childcare, transportation, education or social services.

(22) "Prevention domains" means the areas of knowledge essential to the validity of the prevention process and include the following:

(a) Domain 1, planning and evaluation.

(b) Domain 2, education and skill development.

(c) Domain 3, community organization.

(d) Domain 4, public and organizational policy.

(e) Domain 5, professional growth and responsibility.

(23) "Prevention specialist" means an individual who holds a prevention specialist certificate granted by the department.

(24) "Prevention specialist−in training" means an individual who holds a prevention specialist−in−training certificate granted by the department.

(25) "Substance" means a psychoactive agent or chemical which principally affects the central nervous system and alters mood or behavior.

(26) "Substance abuse counselor" means an individual who holds a substance abuse counselor certificate granted by the department.

(27) "Substance abuse counselor−in−training" means an individual who holds a substance abuse counselor−in−training certificate granted by the department.

(28) "Substance use disorder" means the existence of a diagnosis of "substance dependence" or "substance abuse" listed in the most current edition of DSM.

(29) "Transdisciplinary foundations" means that set of competencies that underlie the work of all addictions professionals. These foundations include:

(a) Understanding addiction.

(b) Treatment knowledge.

(c) Application to practice.

(d) Professional readiness.

(e) Disabilities.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07; **correction in (intro.), (9), (12) made under s. 13.92 (4) (b) 6., 7., Stats., Register November 2011 No. 671.**

SPS 160.03 Use of title. A person may use the title "addiction counselor," "substance abuse counselor," "alcohol and drug counselor," "substance use disorder counselor" or "chemical dependency counselor" only if he or she is certified as a substance abuse counselor, or as a clinical substance abuse counselor under s. 440.88, Stats., or as allowed under the provisions of s. 457.02 (5m), Stats.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07.

Chapter SPS 161

REQUIREMENTS FOR CERTIFICATION

SPS 161.01 Applicability.
SPS 161.02 Translation required.
SPS 161.03 General requirements for certification.
SPS 161.04 Counselor applications.
SPS 161.05 Supervisor applications.
SPS 161.06 Prevention applications.
SPS 161.07 Educational equivalencies — substance abuse counselor and intermediate clinical supervisor.
SPS 161.08 Educational equivalencies — clinical substance abuse counselor and independent clinical supervisor.
SPS 161.09 Work experience restrictions.
SPS 161.10 Display of credential.
SPS 161.11 Certification by reciprocity.

Note: Chapter RL 161 was created as an emergency rule effective 9−10−07. **Chapter RL 161 was renumbered chapter SPS 161 under s. 13.92 (4) (b) 1., Stats., Register November 2011 No. 671.**

SPS 161.01 Applicability. (1) A person credentialed by the department who treats alcohol or substance dependency or abuse in a clinic certified under ch. DHS 75, shall be a substance abuse counselor−in−training, a substance abuse counselor or a clinical substance abuse counselor, or possess the specialty certification under s. MPSW 1.09.

(2) All persons employed in positions providing substance use disorder treatment shall be certified under this chapter or under s. MPSW 1.09.

(3) Chapters SPS 160 to 168 do not apply to any of the following:

(a) A physician, as defined in s. 448.01 (5), Stats., who practices as a substance abuse clinical supervisor, or provides substance use disorder counseling, treatment, or prevention services within the scope of his or her license.

(b) A licensed clinical social worker, as defined in s. 457.01 (1r), Stats., a licensed professional counselor as defined in s. 457.01 (7), Stats., or a licensed marriage and family therapist as defined in s. 457.01 (3), Stats., who provides substance use disorder counseling, treatment, or prevention services within the scope of his or her credential.

(c) A licensed psychologist, as defined in s. 455.01 (4), Stats., who practices as a substance abuse clinical supervisor, or provides substance use disorder counseling, treatment, or prevention services within the scope of his or her license.

(4) Until January 1, 2011, a licensed clinical social worker as defined in s. 457.01 (1r), Stats., who worked as a clinical supervisor as defined in s. DHS 75.02 (11) (a), in a ch. DHS 75 clinic prior to December 1, 2007, may act as a clinical supervisor and provide clinical supervision under chs. SPS 160 to 168.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07; corrections in (1) and (4) made under s. 13.92 (4) (b) 7., Stats., Register April 2009 No. 640; **correction in (3) (intro.), (4) made under s. 13.92 (4) (b) 7., Stats., Register November 2011 No. 671.**

SPS 161.02 Translation required. An application for certification is incomplete until all materials requested are received by the department, in English or accompanied by a certified English translation.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07.

SPS 161.03 General requirements for certification. The department shall not grant any certificate under this chapter unless the applicant does all of the following:

(1) Submits an application for the certificate to the department on a form provided by the department.

Note: Applications are available on request from the department at 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708, or from the department's website at: http://dsps.wi.gov.

(2) Pays the fee specified in s. 440.05 (1), Stats.

(3) Meets the qualifications established by the department for the credential sought.

(4) For applicants who have a pending criminal charge or have been convicted of a crime under the laws of this state or any other state or of the United States or any other country, submits all information necessary for the department to determine whether the circumstances of the pending criminal charge or conviction are substantially related to the duties of the credentialed activity.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07.

SPS 161.04 Counselor applications. (1) SUBSTANCE ABUSE COUNSELOR−IN−TRAINING. An applicant for certification as a substance abuse counselor−in−training shall submit evidence satisfactory to the department that all of the following have been met:

(a) That the applicant has a high school diploma, an HSED or GED.

(b) Successful passage of an ethics, boundaries and jurisprudence examination developed or approved by the department.

(c) Successful completion of 100 hours of specialized education in the transdisciplinary foundations in compliance with s. SPS 166.02. An organized educational field experience program from an accredited school fulfills this requirement.

(d) Current employment, a written offer of employment or an agreement authorizing volunteer hours at an agency providing substance use disorder treatment. The applicant's clinical supervisor shall review the education submitted pursuant to par. (c), and attest that the education submitted by the applicant fulfills the requirements of s. SPS 166.02.

(2) SUBSTANCE ABUSE COUNSELOR. (a) Except as provided in par. (b), an applicant for certification as a substance abuse counselor shall submit evidence satisfactory to the department of all of the following:

1. Successful passage of the International Certification Reciprocity Consortium Alcohol and Other Drug Abuse written counselor examination.

2. That the applicant has a high school diploma, an HSED or GED.

3. Completion of 4,000 hours of work experience performing the practice dimensions, supervised by an individual defined in s. SPS 162.02 (1), within 5 years immediately preceding the date of application. Experience in excess of 40 hours per week or 2,000 hours per year does not count in meeting the experience requirement. The 4,000 hours shall include all of the following:

a. Two thousand hours in performing the practice dimensions with patients who have a primary substance use disorder diagnosis.

b. One thousand hours in substance use disorder counseling with at least 500 hours in a one−on−one individual modality setting.

c. A minimum of 200 hours of counseling during the 12 month period immediately preceding the date of application, of

which 100 hours shall have been completed using an individual modality setting.

4. Completion of the requirements of s. SPS 166.03. An applicant who previously held a certificate from the Wisconsin Certification Board, Inc., and can provide documentation of accumulation of 100 or more hours of approved specialized education as of March 1, 2007, may submit proof of completion of the balance of the 360 hours specified in s. SPS 166.03 from sources other than a comprehensive program.

(b) An applicant for certification as a substance abuse counselor who is previously credentialed by the marriage and family therapy, professional counseling and social work examining board shall submit evidence satisfactory to the department of fulfilling the requirements of s. MPSW 1.09.

(3) CLINICAL SUBSTANCE ABUSE COUNSELOR. An applicant for certification as a clinical substance abuse counselor shall submit evidence satisfactory to the department of all of the following:

(a) Successful passage of the International Certification Reciprocity Consortium Alcohol and Other Drug Abuse written counselor certification examination taken on or after June 1, 2008. If the written examination was taken before June 1, 2008, an applicant shall have either successfully passed the International Certification Reciprocity Consortium case presentation method interview on or before December 31, 2008, or have successfully retaken the written counselor certification examination on or after June 1, 2008.

Note: Prior to June 1, 2008, to receive a clinical substance abuse counselor credential, an applicant had to pass a written counselor examination and a case presentation method oral interview (oral examination) authorized by the International Certification & Reciprocity Consortium (IC&RC). Effective June 1, 2008, the IC&RC withdrew its authorization for the oral examination and instead requires an applicant to complete an updated written counselor examination which includes a section to replace the oral examination. Pursuant to an agreement between the department and the IC&RC, applicants who took the written examination prior to June 1, 2008, were able to complete the oral examination until December 31, 2008.

(b) Completion of 7,000 hours of patient counseling experience performing the practice dimensions as a substance abuse counselor, supervised by an individual defined in s. SPS 162.02 (1), within 5 years immediately preceding the date of application. The 7,000 hours shall include 2,000 hours in direct, in person substance use disorder patient counseling. Experience in excess of 40 hours per week or 2,000 hours per year does not count in meeting the experience requirement.

(c) As specified in s. SPS 166.03, attendance and completion of 360 hours of approved specialized education in substance use disorder counseling within a comprehensive program covering the transdisciplinary foundations and practice or attendance and completion of 360 hours of approved specialized education in substance use disorder counseling within a degree program approved by the department in a field with an addiction emphasis or concentration in clinical counseling.

(d) An applicant who previously held a certificate from the Wisconsin Certification Board, Inc., and can provide documentation of accumulation of 100 or more hours of approved specialized education as of March 1, 2007, may submit proof of completion of the balance of the 360 hours from sources other than a comprehensive program.

(f) Successful passage of an ethics, boundaries and jurisprudence examination developed or approved by the department.

(g) Graduation from an accredited school with an associate's, bachelor's, master's or doctoral degree in a behavioral science field.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07; EmR0819: emerg. renum. (3) (a) to be (3) (a) 1. and am., cr. (3) (a) 2., r. (3) (e), eff. 6−18−08; CR 08−094: am. (3) (a), r. (3) (e) Register April 2009 No. 640, eff. 5−1−09; **correction in (1) (c), (d), (2) (a) 3. (intro.), 4., (3) (b), (c) made under s. 13.92 (4) (b) 7., Stats., Register November 2011 No. 671.**

SPS 161.05 Supervisor applications. (1) CLINICAL SUPERVISOR−IN−TRAINING. An applicant for certification as a clinical supervisor−in−training shall submit evidence satisfactory to the department of all of the following:

(a) Current employment, a written offer of employment or an agreement authorizing volunteer hours at an agency providing substance use disorder treatment service as a clinical supervisor of counselors certified under this section or under s. MPSW 1.09.

(b) Successful passage of an ethics, boundaries and jurisprudence examination developed or approved by the department.

(c) Current certification as one of the following:

1. A clinical substance abuse counselor.

2. A professional counselor, marriage and family therapist or social worker holding a credential under ch. 457, Stats., at the master's level or higher with the specialty authorization of s. MPSW 1.09.

(d) Completion of 2,000 hours of patient counseling experience performing the practice dimensions as a clinical substance abuse counselor, supervised by an individual defined in s. SPS 162.02 (1), within 5 years immediately preceding the date of application. The 2,000 hours shall include 200 hours in direct, in person substance use disorder patient counseling. Experience in excess of 40 hours per week or 2,000 hours per year does not count in meeting the experience requirement.

(2) INTERMEDIATE CLINICAL SUPERVISOR. An applicant for certification as an intermediate clinical supervisor shall submit evidence satisfactory to the department of all of the following:

(a) Current certification as one of the following:

1. A clinical substance abuse counselor.

2. A professional counselor, marriage and family therapist or social worker holding a credential under ch. 457, Stats., at the master's level or higher with the specialty authorization of s. MPSW 1.09.

(b) Verification of one year clinical supervisory experience as the supervisor of counselors certified under this section or under s. MPSW 1.09. Clinical supervisory experience obtained after December 15, 2009, shall be supervised by an intermediate clinical supervisor, an independent clinical supervisor, a physician, or a psychologist who practices as a substance abuse clinical supervisor within the scope of his or her license. This year shall include the provision of 200 contact hours of in person clinical supervision.

(c) Verification of 30 hours of classroom training in clinical supervision. This shall include a minimum of 6 hours of training in each of the following domains:

1. Assessment or evaluation.

2. Counselor development.

3. Management or administration.

4. Professional responsibility.

(d) Completion of 2,000 hours of patient counseling experience performing the practice dimensions as a clinical substance abuse counselor, supervised by an individual defined in s. SPS 162.02 (1), within 5 years immediately preceding the date of application.

1. Experience in excess of 40 hours per week or 2,000 hours per year does not count in meeting the experience requirement.

2. The hours referred to in this paragraph shall include 200 hours in direct, in person substance use disorder patient counseling.

(e) Successful passage of the International Certification Reciprocity Consortium written clinical supervisor certification examination.

(f) Successful passage of an ethics, boundaries and jurisprudence examination developed or approved by the department.

(3) INDEPENDENT CLINICAL SUPERVISOR. An applicant for certification as an independent clinical supervisor shall submit evidence satisfactory to the department of all of the following:

(a) Successful passage of an ethics, boundaries and jurisprudence examination developed or approved by the department.

(b) The applicant holds a current certificate listed in subd. 1. or 2. with verification of 10,000 hours of counseling experience within a period of no less than 5 years. This experience shall include at least completion of 2,000 hours of patient counseling experience performing the practice dimensions as a clinical substance abuse counselor, supervised by an individual defined in s. SPS 162.02 (1), within 5 years immediately preceding the date of application. The 2,000 hours shall include 200 hours in direct, in person substance use disorder patient counseling. Experience in excess of 40 hours per week or 2,000 hours per year does not count in meeting the experience requirement.

1. A clinical substance abuse counselor.

2. A professional counselor, marriage and family therapist or social worker holding a credential under ch. 457, Stats., at the master's level or higher with the specialty authorization of s. MPSW 1.09.

(c) Verification of 2 years clinical supervisory experience as the supervisor of counselors certified under this chapter. Clinical supervisory experience obtained after December 15, 2009, shall be supervised by an intermediate clinical supervisor, an independent clinical supervisor, a physician, or a psychologist who practices as a substance abuse clinical supervisor within the scope of his or her license. These 2 years shall include the provision of 200 contact hours of in person clinical supervision.

(d) Verification of 30 hours of classroom training in clinical supervision. This shall include a minimum of 6 hours of training in each of the following domains:

1. Assessment or evaluation.

2. Counselor development.

3. Management or administration.

4. Professional responsibility.

(e) Successful passage of the International Certification Reciprocity Consortium written clinical supervisor certification examination.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07; **correction in (1) (d), (2) (d) (intro.), (3) (b) (intro.) made under s. 13.92 (4) (b) 7., Stats., Register November 2011 No. 671.**

SPS 161.06 Prevention applications. (1) PREVENTION SPECIALIST−IN−TRAINING. An applicant for certification as a prevention specialist shall submit evidence satisfactory to the department of all of the following:

(a) That the applicant has a high school diploma, an HSED or GED.

(b) Completion of 40 hours of approved education and training covering the prevention domains. At least 5 hours shall be in ethics.

(2) PREVENTION SPECIALIST. An applicant for certification as a prevention specialist shall submit evidence satisfactory to the department of all of the following:

(a) That the applicant has a high school diploma, an HSED or GED.

(b) Successful passage of an ethics, boundaries and jurisprudence examination developed or approved by the department.

(c) Completion of 240 hours of approved education and training covering the prevention domains. Fifty hours of this training shall be specific to alcohol, tobacco or other substance abuse. At least 6 hours shall be in ethics.

(d) Verification of 2,000 hours of work experience as a prevention specialist−in−training with a minimum of 100 hours of the experience in each prevention domain.

(e) Successful passage of the International Certification Reciprocity Consortium written prevention specialist certification examination.

(f) Verification of a 120 hour practicum in the prevention domain areas with no less than 10 hours in any prevention domain area.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07.

SPS 161.07 Educational equivalencies — substance abuse counselor and intermediate clinical supervisor. For the purposes of ss. SPS 161.04 (2) and 161.05 (2), successful completion of education resulting in a degree in a behavioral science field with an addiction emphasis or a concentration in clinical counseling from an accredited school may be used to satisfy, in part, the experience requirement. The possession of the following levels of the degrees may be exchanged for experience at the following rate:

(1) An associate degree equals 500 hours of supervised experience.

(2) A bachelor degree equals 1,000 hours of supervised experience.

(3) A master or doctoral degree equals 2,000 hours of supervised experience.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07; **correction in (intro.) made under s. 13.92 (4) (b) 7., Stats., Register November 2011 No. 671.**

SPS 161.08 Educational equivalencies — clinical substance abuse counselor and independent clinical supervisor. For the purposes of ss. SPS 161.04 (3) and 161.05 (3), successful completion of education resulting in a degree in a behavioral science field with an addiction emphasis or concentration in clinical counseling from an accredited school may be used to satisfy, in part, the experience requirement. The possession of the following levels of the degrees shall be exchanged for experience at the following rate:

(1) An associate degree equals 1,000 hours of supervised experience.

(2) A bachelor degree equals 2,000 hours of supervised experience.

(3) A master or doctoral degree equals 4,000 hours of supervised experience.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07; **correction in (intro.) made under s. 13.92 (4) (b) 7., Stats., Register November 2011 No. 671.**

SPS 161.09 Work experience restrictions. (1) All experience other than educational equivalencies shall be in the areas of the practice dimensions with a patient who has a primary substance use disorder diagnosis under appropriate clinical supervision.

(2) Experience beyond 40 hours per week and 2,000 hours per calendar year may not be counted.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07.

SPS 161.10 Display of credential. The credential or certificate of biennial certification shall be displayed in a prominent place at the location where services are provided by each person while certified by the department.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07.

SPS 161.11 Certification by reciprocity. (1) Applicants who hold a credential substantially similar to a clinical substance abuse counselor who are credentialed in another state or territory that is a member of the International Certification Reciprocity Consortium shall:

(a) Meet the requirements of ss. SPS 161.03 and 161.04 (3) (a) and (f).

(b) Provide verification of the applicant's eligibility for reciprocity by the International Certification Reciprocity Consortium.

(c) Provide verification of the applicant's credentials in all states or countries in which the applicant has ever held a credential.

(2) Applicants who hold a credential substantially similar to an independent clinical supervisor issued by another state or territory that is a member of the International Certification Reciprocity Consortium shall:

(a) Meet the requirements of ss. SPS 161.03 and 161.05 (3) (a) and (e).

(b) Provide verification of the applicant's eligibility for reciprocity by the International Certification Reciprocity Consortium.

(c) Provide verification of the applicant's credentials in all states and countries in which the applicant has held a credential.

(d) Show evidence of holding a valid current certification as an independent substance abuse counselor in Wisconsin or concurrently submits an application for reciprocal credentialing which satisfies the terms of s. SPS 161.11 (1).

(3) Applicants who hold a credential substantially similar to a prevention specialist issued by another state or territory that is a member of the International Certification Reciprocity Consortium shall:

(a) Meet the requirements of ss. SPS 161.03 and 161.06 (2) (b) and (e).

(b) Provide verification of the applicant's eligibility for reciprocity by the International Certification Reciprocity Consortium.

(c) Provide verification of the applicant's credentials in all states and countries in which the applicant has held a credential.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07; correction in (1) (a) made under s. 13.92 (4) (b) 7., Stats., Register April 2009 No. 640; **correction in (1) (a), (2) (a), (d), (3) (a) made under s. 13.92 (4) (b) 7., Stats., Register November 2011 No. 671.**

Chapter SPS 162

SUPERVISED PRACTICE

SPS 162.01 Required supervision.
SPS 162.02 Who may supervise.
SPS 162.03 Prohibited practice.

Note: Chapter RL 162 was created as an emergency rule effective 9−10−07. **Chapter RL 162 was renumbered chapter SPS 162 under s. 13.92 (4) (b) 1., Stats., Register November 2011 No. 671.**

SPS 162.01 Required supervision. (1) Clinical supervisors shall exercise supervisory responsibility over substance abuse counselors−in−training, substance abuse counselors, clinical substance abuse counselors, clinical supervisors−in−training and intermediate clinical supervisors in regard to all activities including, but not limited to, counselor development, counselor skill assessment and performance evaluation, staff management and administration, and professional responsibility. A clinical supervisor shall provide a minimum of:

(a) Two hours of clinical supervision for every 40 hours of work performed by a substance abuse counselor−in−training.

(b) Two hours of clinical supervision for every 40 hours of counseling provided by a substance abuse counselor.

(c) One hour of clinical supervision for every 40 hours of counseling provided by a clinical substance abuse counselor.

(d) One in person meeting each calendar month with a substance abuse counselor−in−training, substance abuse counselor or clinical substance abuse counselor. This meeting may fulfill a part of the requirements of pars. (a) to (c).

(2) Clinical supervisors shall exercise supervisory responsibility over clinical supervisors−in−training in regard to all activities. A clinical supervisor shall provide a minimum of one hour of clinical supervision for every 40 hours of work performed by a clinical supervisor−in−training.

(3) The required clinical supervision shall include in person individual or group sessions consisting of no more than 6 supervisees per group. The clinical supervision hourly requirement may be averaged out over a period no longer than one month.

(4) Methods for supervision may include, but are not limited to, auditing of patient files, case review and discussion of active cases, direct observation of treatment, video or audio review and observation of the counselor's professional interaction with patients and staff.

(5) The goals of clinical supervision are to provide the opportunity to develop competency in the transdisciplinary foundations, practice dimensions and core functions, provide a context for professional growth and development and ensure a continuance of quality patient care.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07.

SPS 162.02 Who may supervise. (1) Except as provided in subs. (2) and (5), clinical supervision may be provided by a clinical supervisor−in−training, an intermediate or independent clinical supervisor, a physician knowledgeable in addiction treatment, or a psychologist knowledgeable in psychopharmacology and addiction treatment.

(2) Beginning June 1, 2008, a credential holder acquiring supervised experience as a substance abuse counselor−in−training may not practice under the supervision of an individual holding a certificate as a clinical supervisor−in−training.

(3) The supervisor shall not permit a supervisee to engage in any practice that the supervisee is not competent to perform. The supervisor shall not permit a supervisee to engage in any practice that the supervisor cannot competently supervise.

(4) A supervisor is legally and ethically responsible for the supervised activities of the substance use disorder professional supervisee. Supervisors shall be available or make appropriate provision for emergency consultation and intervention. Supervisors shall be able to interrupt or stop the supervisee from practicing in given cases, or recommend to the supervisee's employer that the employer interrupt or stop the supervisee from practicing in given cases, and to terminate the supervised relationship, if necessary.

(5) Until January 1, 2011, a licensed clinical social worker as defined in s. 457.01 (1r), Stats., who worked as a clinical supervisor as defined in s. DHS 75.02 (11) (a), in a ch. DHS 75 clinic prior to December 1, 2007, may act as a clinical supervisor and provide clinical supervision under chs. SPS 160 to 168.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07; **correction in (5) made under s. 13.92 (4) (b) 7., Stats., Register November 2011 No. 671.**

SPS 162.03 Prohibited practice. (1) A clinical supervisor may not permit students, employees, or supervisees to perform or hold themselves out as competent to perform professional services beyond their training, level of experience, competence or credential.

(2) Clinical supervisors may not disclose supervisee confidences, except:

(a) As mandated by law.

(b) To prevent a clear and immediate danger to a person or persons.

(c) In educational or training settings where there are multiple supervisors, and then only to other professional colleagues who share responsibility for training of the supervisee.

(3) Beginning June 1, 2008, a clinical supervisor−in−training shall not supervise a credential holder acquiring supervised experience as a substance abuse counselor−in−training.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07.

Chapter SPS 163

PRACTICE RESTRICTIONS

SPS 163.01 Who may treat substance abuse disorders.
SPS 163.02 Substance abuse counselor−in−training; limited scope of practice.

Note: Chapter RL 163 was created as an emergency rule effective 9−10−07. **Chapter RL 163 was renumbered chapter SPS 163 under s. 13.92 (4) (b) 1., Stats., Register November 2011 No. 671.**

SPS 163.01 Who may treat substance abuse disorders. (1) EMPLOYMENT RESTRICTIONS. A person credentialed by the department as a substance abuse counselor−in−training, a substance abuse counselor or clinical substance abuse counselor may treat substance use disorders only if he or she is qualified to do so by education, training and experience and is certified under s. 440.88, Stats. In order to treat persons with a substance use disorder, to treat the substance use disorder issues of a person with a dual diagnosis, to advertise as a substance abuse counselor or as a substance use disorder specialist, to be employed in a position identified as a substance use disorder specialist, or to be employed in a position within a program that is identified as a substance use disorder treatment program, a person shall be certified as a substance abuse counselor−in−training, a substance abuse counselor or a clinical substance abuse counselor.

(2) EXCEPTIONS. The preparation of a patient for substance use disorder treatment by referral, the treatment of a patient for substance use disorder until a referral for substance use disorder treatment is completed, and the continuation of treatment with the non−substance use disorder issues of a person are not restricted by this chapter, when performed by a mental health provider practicing within the scope of their credential.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07.

SPS 163.02 Substance abuse counselor−in−training; limited scope of practice. (1) The granting of a substance abuse counselor−in−training certificate does not denote or assure competency to provide substance use disorder counseling. A substance abuse counselor−in−training may provide services in any of the core functions, except counseling, if authorized by the clinical supervisor. A clinical supervisor may only authorize a substance abuse counselor−in−training to provide counseling in accordance with sub. (2).

(2) (a) Except as provided in par. (b), the practice of substance use disorder counseling by a substance abuse counselor−in−training may be authorized by the individual's clinical supervisor after the substance abuse counselor−in−training has completed 300 hours of supervised training or supervised work experience in the core functions.

(b) A substance abuse counselor−in−training who transferred from a previous credential issued by the Wisconsin Certification Board, Inc., may practice substance use disorder counseling after providing proof to his or her clinical supervisor that within the previous 5 years he or she completed a total of 100 hours of specialized education in the content areas listed in s. SPS 166.02.

(3) Notwithstanding subs. (1) and (2), a substance abuse counselor−in−training who transferred from a previous credential issued by the Wisconsin Certification Board, Inc., may continue to practice under the terms of their Wisconsin Certification Board, Inc., credential until March 1, 2007. Beginning March 1, 2007, a clinical supervisor may only authorize a substance abuse counselor−in−training to provide counseling after receiving proof from the substance abuse counselor−in−training that within the previous 5 years he or she completed 100 hours of specialized education in any combination of the performance domains listed in s. SPS 166.02.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07; **correction in (2) (b), (3) made under s. 13.92 (4) (b) 7., Stats., Register November 2011 No. 671.**

Chapter SPS 164

UNPROFESSIONAL CONDUCT SUBSTANCE ABUSE PROFESSIONALS

SPS 164.01 Unprofessional conduct.

Note: Chapter RL 164 was renumbered chapter SPS 164 under s. 13.92 (4) (b) 1., Stats., Register November 2011 No. 671.

SPS 164.01 Unprofessional conduct. (1) For the purposes of this chapter:

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

(b) "Substance abuse professional" means the holder of any license, permit, certificate, or registration issued by the department pursuant to s. 440.88, Stats., or issued by the Wisconsin certification board.

(2) Unprofessional conduct comprises any practice or behavior that violates the minimum standards of the profession necessary for the protection of the health, safety, or welfare of a patient or the public. Misconduct or unprofessional conduct includes the following:

(a) Submitting fraudulent, deceptive, or misleading information in conjunction with an application for a credential.

(b) Violating, or aiding and abetting a violation of, any law or rule substantially related to practice as a substance abuse professional. A certified copy of a judgment of conviction is prima facie evidence of a violation.

(c) Having a license, certificate, permit, registration, or other practice credential granted by another state or by any agency of the federal government to practice as a substance abuse professional, which the granting jurisdiction limits, restricts, suspends, or revokes, or having been subject to other adverse action by a licensing authority, any state agency or an agency of the federal government, including the denial or limitation of an original credential, or the surrender of a credential, whether or not accompanied by findings of negligence or unprofessional conduct. A certified copy of a state or federal final agency decision is prima facie evidence of a violation of this provision.

(d) Failing to notify the department that a license, certificate or registration for the practice of any profession issued to the substance abuse professional has been revoked, suspended, limited or denied, or subject to any other disciplinary action by the authorities of any jurisdiction.

Note: Pursuant to s. SPS 4.09, all credential holders licensed by the department need to report a criminal conviction within 48 hours after entry of a judgment against them. The department form for reporting convictions is available on the department's web site at http://drl.wi.gov.

(e) Violating or attempting to violate any term, provision, or condition of any order of the department.

(f) Performing or offering to perform services for which the substance abuse professional is not qualified by education, training or experience.

(g) Practicing or attempting to practice while the substance abuse professional is impaired as a result of any illness that impairs the substance abuse professional's ability to appropriately carry out his or her professional functions in a manner consistent with the safety of patients or the public.

(h) Using alcohol or any drug to an extent that such use impairs the ability of the substance abuse professional to safely or reliably practice, or practicing or attempting to practice while the substance abuse professional is impaired due to the utilization of alcohol or other drugs.

(i) Engaging in false, fraudulent, misleading or deceptive behavior associated with the practice as a substance abuse professional, including advertising, billing practices, or reporting or falsifying or inappropriately altering patient records.

(j) Discriminating in practice on the basis of age, race, color, sex, religion, creed, national origin, ancestry, disability or sexual orientation.

(k) Revealing to other personnel not engaged in the care of a patient or to members of the public information which concerns a patient's condition unless release of the information is authorized by the patient or required or authorized by law. This provision shall not be construed to prevent a credential holder from cooperating with the department in the investigation of complaints.

(L) Abusing a patient by any single or repeated act of force, violence, harassment, deprivation, neglect, or mental pressure which reasonably could cause physical pain or injury, mental anguish, or fear.

(m) Engaging in inappropriate sexual contact, exposure, gratification, or other sexual behavior with or in the presence of a patient. For the purposes of this subsection, an adult shall continue to be a patient for 2 years after the termination of professional services. If the person receiving services is a minor, the person shall continue to be a patient for the purposes of this subsection for 2 years after termination of services, or for one year after the patient reaches age 18, whichever is longer.

(n) Failing to avoid dual relationships or relationships that may impair the substance abuse professional's objectivity or create a conflict of interest.

(o) Obtaining or attempting to obtain anything of value from a patient without the patient's consent.

(p) Obtaining or attempting to obtain any compensation by fraud, misrepresentation, deceit or undue influence in the course of practice.

(q) Offering, giving or receiving commissions, rebates or any other forms of remuneration for a patient referral.

(r) Failing to provide the patient or patient's authorized representative a reasonable description of anticipated tests, consultation, reports, fees, billing, therapeutic regimen or schedule, or failing to inform a patient of financial interests which might accrue to the substance abuse professional for referral to or for any use of service, product or publication.

(s) Failing to conduct an assessment, evaluation, or diagnosis as a basis for treatment provided.

(t) Failing to maintain adequate records relating to services provided a patient in the course of a professional relationship.

(u) Failing to make reasonable efforts to notify a patient or a patient's authorized representative when professional services will be interrupted or terminated by the substance abuse professional.

(v) Engaging in a single act of gross negligence or in a pattern of negligence as a substance abuse professional.

(w) Failing to respond honestly and in a timely manner to a request for information from the department. Taking longer than 30 days to respond to a department request creates a rebuttable presumption that the response is not timely.

(x) Failing to report to the department or to institutional supervisory personnel any violation of the rules of this chapter by a substance abuse professional.

History: CR 06−060: cr. Register December 2006 No. 612, eff. 1−1−07; **correction in (1) (a) made under s. 13.92 (4) (b) 6., Stats., Register November 2011 No. 671.**

Chapter SPS 165

RENEWAL REQUIREMENTS SUBSTANCE ABUSE PROFESSIONALS

SPS 165.01 Credential renewal procedures.

Note: Chapter RL 165 was renumbered chapter SPS 165 under s. 13.92 (4) (b) 1., Stats., Register November 2011 No. 671.

SPS 165.01 Credential renewal procedures. (1) Each person granted a credential under s. 440.88, Stats., is certified for the current period only. Subject to the limitations in s. 440.88 (4), Stats., to renew certification, a credential holder shall by February 28 of each odd−numbered year following initial certification, file with the department an application for renewal on a form prescribed by the department, submit the fee under s. 440.08 (2), Stats., and shall meet the continuing education requirements in sub. (3). An application for renewal of any clinical supervisor certificate shall also include an application for renewal of the credential holder's clinical substance abuse counselor certificate, or evidence of current certification as a ch. 457, Stats., credential holder at the master's level or higher with the specialty authorization of s. MPSW 1.09.

(2) A credential holder who fails to renew certification shall cease practice and 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 within 5 years of the renewal date shall be reinstated by complying with the requirements for obtaining initial certification, including educational and examination requirements which apply at the time application is made.

(3) To maintain his or her authority to treat alcohol or substance dependency or abuse as a specialty, a credential holder shall complete at least the following continuing education hours in alcohol or substance dependency or abuse education during each biennial credentialing period:

(a) Substance abuse counselor−in−training — 40 hours.

(b) Substance abuse counselor — 40 hours.

(c) Clinical substance abuse counselor — 40 hours.

(d) Clinical supervisor−in−training — 6 hours, in addition to clinical substance abuse counselor requirements.

(e) Intermediate clinical supervisor — 6 hours, in addition to clinical substance abuse counselor requirements.

(f) Independent clinical supervisor — 6 hours, in addition to clinical substance abuse counselor requirements.

(g) Prevention specialist−in−training — 25 hours.

(h) Prevention specialist — 40 hours.

(4) An applicant for reinstatement of certification following disciplinary action shall meet requirements in sub. (1) and may be required to successfully complete an examination as the department prescribes. Upon investigation and satisfactory proof that the cause of the disciplinary action no longer exists, the department may reinstate any certification.

(5) 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.

(6) The credential and certificate of biennial certification shall be displayed in a prominent place by each person while certified by the department.

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

(8) Applicants for renewal shall certify their attendance at required continuing education and shall submit certificates of attendance upon request.

(9) A certificate holder may apply to the department for a postponement or waiver of the requirements of this chapter on grounds of prolonged illness, disability, or other grounds constituting extreme hardship. The department shall consider each application individually on its merits.

History: CR 06−060: cr. Register December 2006 No. 612, eff. 1−1−07.

Chapter SPS 166

EDUCATION APPROVAL

SPS 166.01 Definitions.
SPS 166.02 Substance abuse counselor−in−training core curriculum.
SPS 166.03 Substance abuse counselor education requirements.
SPS 166.04 Clinical supervision education requirements.
SPS 166.05 Prevention specialist−in−training core curriculum.
SPS 166.06 Prevention specialist core curriculum.
SPS 166.07 Approval of pre−certification education programs for substance abuse counselors.
SPS 166.08 Approval of substance abuse prevention education.
SPS 166.09 Approval of continuing education programs.
SPS 166.10 Continuing education credit and format.
SPS 166.11 Recordkeeping.

Note: Chapter RL 166 was created as an emergency rule effective 9−10−07. **Chapter RL 166 was renumbered chapter SPS 166 under s. 13.92 (4) (b) 1., Stats., Register November 2011 No. 671.**

SPS 166.01 Definitions. In ss. SPS 166.02 and 166.03:

(1) "Assessment training" means education on the comprehensive process of collecting pertinent data about patient or patient systems and their environment and appraising the data as a basis for making decisions regarding substance use disorder diagnosis and treatment or referral. The education shall consist of culturally inclusive studies in understanding addiction, psychopharmacology, recognition and differentiation of co−occurring medical and psychological disorders, clinical evaluation and treatment planning.

(2) "Case management" means education on culturally appropriate administrative, clinical, and evaluative activities included in the process of coordinating and prioritizing patient treatment goals and working with the patient and significant others, as well as other services, agencies and resources to achieve those treatment goals. The education shall include studies in implementing treatment plans including continuing assessment, the referral process, service coordination, including for co−occurring medical and psychological disorders, record management and documentation and utilizing the written client record to guide and monitor services to reach measurable goals and objectives.

(3) "Counseling" means education which includes the study of fundamental theories, principles and techniques of substance use disorder counseling to facilitate the progress of diverse patients toward mutually determined treatment goals and objectives using culturally sensitive modalities. Counseling education shall include studies of understanding addiction, recognized treatment theory and practice, the recovery process, effective strategies for meeting the counseling needs of diverse patients, crisis management skills, and treatment of co−occurring medical and psychological disorders.

(4) "Education" means education about the process of providing patients, groups, families, couples, significant others, and communities with information on risks related to substance use, the processes of dependence including signs, symptoms and behavior patterns, and available resources for prevention, treatment, and recovery in culturally relevant ways. The education shall include studies in understanding addiction, including addiction to nicotine, the classification and basic pharmacology of drugs, basic physiology and the effects of drug use on the human body and patient, learning styles and teaching methods, delivery of educational programs, health and behavior problems related to substance use including transmission and prevention of HIV/AIDS, tuberculosis, sexually transmitted infections, and other infectious diseases, and basic life skills such as stress management, communication, and assertiveness.

(5) "Professional responsibility" means education which addresses standards of conduct or professional behavior expectations for counselors, supervisors and prevention workers. Professional behavior areas to be studied shall include, at a minimum, legal issues specific to substance use disorder professional practice, patient welfare as a primary concern, responsibility for professional competence and professional development, participation in ongoing supervision and consultation, counselor values and self−care, relationships with other professionals and institutions and the establishment of limits and boundaries in the patient relationship. This education shall also address the impact of specific cultural, ethnic and racial influences and expectations.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07; **correction in (intro.) made under s. 13.92 (4) (b) 7., Stats., Register November 2011 No. 671.**

SPS 166.02 Substance abuse counselor−in−training core curriculum. (1) The following content areas and related hours for entry training for substance abuse counselor−in−training students are required.

Content Area	Hours
Assessment Training	15
Counseling	15
Case Management	10
Education	15
Professional Responsibility	20
Electives within the performance domains listed above	25
Total	100

(2) The training hours shall be in seminars, courses or other presentations that meet the criteria in s. SPS 166.08 or 166.09.

(3) All of the content areas shall contain information and application to practice that is responsive to the characteristics of individual, group, family, and couple clients and significant others seeking substance use disorder treatment, including, but not limited to, age, gender, ability, disability, developmental level, sexual orientation, health status, ethnicity, culture, and social issues.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07; **correction in (2) made under s. 13.92 (4) (b) 7., Stats., Register November 2011 No. 671.**

SPS 166.03 Substance abuse counselor education requirements. (1) The following content areas and related hours are required as a portion of the educational requirements in s. SPS 161.04:

Content Area	Hours
Assessment Training	60
Counseling	60
Case Management	60
Education	60
Professional Responsibility	60
Electives within the performance domains listed above	60
Total	360

(2) The training shall be in a comprehensive program approved by the department under s. SPS 166.09.

(3) All of the content areas shall be infused with information and application to practice that is responsive to the characteristics of individual, group, family, and couple clients and significant others seeking substance use disorder treatment, including, but not limited to, age, gender, ability, disability, developmental level, sexual orientation, health status, ethnicity, culture, and social issues.

(4) No more than 180 of the 360 hours and no more than 30 of the 60 hours for any content area, may be completed through internet based coursework.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07; **correction in (1) (intro.), (2) made under s. 13.92 (4) (b) 7., Stats., Register November 2011 No. 671.**

SPS 166.04 Clinical supervision education requirements. (1) The following content areas and related hours are required as a portion of the education requirements in s. SPS 161.04:

Content Area	Hours
Assessment or Evaluation	6
Counselor Development	6
Management or Administration	6
Professional Responsibility	6
Electives within the performance domains listed above	6
Total	30

(2) No more than 15 hours of the education submitted may be non−face to face educational programs.

(3) All of the content areas shall be infused with information and application to practice that is responsive to the characteristics of individual, group, family, and couple clients and significant others seeking substance use disorder treatment, including, but not limited to, age, gender, ability, disability, developmental level, sexual orientation, health status, ethnicity, culture, and social issues.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07; **correction in (1) (intro.) made under s. 13.92 (4) (b) 7., Stats., Register November 2011 No. 671.**

SPS 166.05 Prevention specialist−in−training core curriculum. (1) The following content areas and related hours for prevention specialist−in−training are required:

Content Area	Hours
Ethics	5
Prevention Education covering any of the prevention domains	35
Total	40

(2) All of the content areas shall contain information and application to practice that is responsive to the characteristics of individual, group, family, and couple clients and significant others seeking substance use disorder treatment, including, but not limited to, age, gender, ability, disability, developmental level, sexual orientation, health status, ethnicity, culture, and social issues.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07.

SPS 166.06 Prevention specialist core curriculum. (1) The following content areas and related hours are required for a prevention specialist:

Content Area	Hours
Ethics	6
Prevention of alcohol, tobacco or other substance abuse	50
Prevention education covering any of the prevention domains	184
Total	240

(2) All of the content areas shall contain information and application to practice that is responsive to the characteristics of individual, group, family, and couple clients and significant others seeking substance use disorder treatment, including, but not limited to, age, gender, ability, disability, developmental level, sexual orientation, health status, ethnicity, culture, and social issues.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07.

SPS 166.07 Approval of pre−certification education programs for substance abuse counselors. (1) A provider of education programs shall submit an application for approval of a 360 hour comprehensive program that meets the requirements of s. SPS 166.03 on a form provided by the department. The application shall include:

(a) A detailed outline of each course with specific allocations of classroom hours on each required topic, an explanation of the integrated and identified program outcomes and how the program outcomes will be measured and an explanation of how the comprehensive program meets all of the required content in s. SPS 166.03.

(b) Method of instruction used, such as classroom or distance education.

(c) Instructor qualifications.

(2) Providers of internet−based education shall insure instructor availability to students at reasonable times by reasonable means, reasonable oversight of student identity and reasonable opportunity for student self evaluation of mastery.

(3) Instructors shall be knowledgeable in the subject and shall meet one of the following:

(a) Be an instructor of substance use disorder related courses in an accredited institution.

(b) Be a current certificate holder as a substance abuse counselor, clinical substance abuse counselor, clinical supervisor−in−training, intermediate clinical supervisor or independent clinical supervisor.

(c) Be a credential holder in a related field such as a physician, social worker, marriage and family therapist, professional counselor or psychologist, with knowledge and experience related to substance use disorder counseling.

(d) Be a person who in the judgment of the department is qualified by experience or education or both to supervise a course of study.

(4) An instructor whose credential has been limited, suspended or revoked may not instruct in approved programs while the disciplinary action is in effect.

(5) The department shall approve education programs that meet the requirements of s. SPS 166.03 that are not part of a degree

in an accredited institution for a period of 2 years. The education provider shall resubmit the program for approval every 2 years.

(6) The department shall approve education programs that meet the requirements of s. SPS 166.03 that are part of a degree in an accredited institution for a period of 5 years. The education provider shall resubmit the program for approval every 5 years.

(7) Education providers shall have an effective method of tracking student attendance and of assessing mastery of content.

(8) Education providers shall provide certificates of completion to students and retain a student's records for 7 years after a student has completed the program.

(9) Once the department approves a program, the provider is required to inform the department in advance of any major changes in courses or instructor qualifications and receive reapproval.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07; **correction in (1) (intro.), (a), (5), (6) made under s. 13.92 (4) (b) 7., Stats., Register November 2011 No. 671.**

SPS 166.08 Approval of substance abuse prevention education. The department will accept substance abuse prevention education that consists of prevention domain subject matter taught by qualified presenters. Education submitted to the department in fulfillment of s. SPS 161.06 (1) (b), prevention specialist−in−training education and s. SPS 161.06 (2) (c), prevention specialist education that meets one or more of the following criteria:

(1) The education is provided by an accredited college or university.

(2) The education is provided, sponsored or approved by one of the following:

(a) The Wisconsin association of alcohol and drug abuse (WAAODA).

(b) The national association of alcohol and drug abuse counselors (NAADAC).

(c) The Wisconsin clearinghouse for prevention resources.

(d) The federal center for substance abuse prevention.

(e) The national center for the application of prevention technologies or their regional centers.

(f) The United States department of health and human services, its agencies, institutes, administrations and centers.

(g) The White House office of national drug control policy (ONDCP).

(h) The Wisconsin department of health services.

(i) The Wisconsin department of public instruction.

(3) The educational program is endorsed, accredited or approved by another IC&RC member jurisdiction.

(4) The educational program is approved in advance by the department.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07; **correction in (intro.), (2) (h) made under s. 13.92 (4) (b) 6., 7., Stats., Register November 2011 No. 671.**

SPS 166.09 Approval of continuing education programs. **(1)** The department does not pre−approve continuing education programs. The department may accept for continuing education credit programs consisting of relevant subject matter taught by qualified presenters. To qualify as a continuing education program used to satisfy the requirements of s. SPS 166.03, the program shall meet all of the following minimum requirements:

(a) The program subject matter includes core curriculum education in one or more of the following areas:

1. Substance use disorder counseling, prevention domains, clinical practice, knowledge and skills.

2. A field or subject area allied with and relevant to the clinical practice of substance use disorder counseling including work toward an academic degree.

3. Substance use disorder counseling practice ethics.

4. Professional boundaries.

5. Administration.

6. Advanced counseling theory and techniques.

7. Family issues.

8. Mental health issues.

9. Substance use disorders studies.

10. Clinical supervision principles and procedures.

(b) The program sponsor agrees to provide a responsible person to monitor and verify the attendance of each registered student at the program, and the program sponsor agrees to keep the records of attendance for 3 years from the date of the program and to furnish each participant with evidence of having attended the program.

(c) The program sponsor does not assign or delegate its responsibilities to monitor or record attendance, provide evidence of attendance, compare course content with subject matter content required under par. (a), or provide information on instructors or other aspects of the program unless the assignment or delegation is specifically identified in the course material and approved by the department.

(d) The program sponsor has reviewed and validated the program's content to insure its compliance with par. (a).

(e) The program offers significant professional educational benefit for participants.

(f) The instructor is qualified to present the course.

(g) The program contains a reasonable security procedure to assure that the student enrolled is the actual participant.

(2) The department shall approve all of the following programs and courses that meet the requirements of sub. (1) if relevant to the professional practice of substance abuse disorder counseling, clinical supervision, or prevention work:

(a) Undergraduate or graduate level courses or continuing education courses relevant to the professional practice of substance use disorder counseling, clinical supervision, prevention work offered by an accredited college or university, a local or national professional substance use disorder association, or other professional mental health or medical health related organizations.

(b) Programs or continuing education courses that are sponsored by one of the entities mentioned in par. (a).

(3) The provider of the continuing education course agrees to monitor attendance and furnish a certificate of attendance to each participant. The certificate shall identify the educational components listed in s. SPS 166.10 or 166.11 that were covered by the course or seminar and the total hours for each component.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07; **correction in (1) (intro.), (3) made under s. 13.92 (4) (b) 7., Stats., Register November 2011 No. 671.**

SPS 166.10 Continuing education credit and format. A continuing education program may take any of the following forms, with credit for relevant subject matter granted as follows:

(1) Formal presentations of relevant professional material at seminars, workshops, programs or institutes, which may include formal presentation and directed discussion of videotaped material: 1 CEH per hour of continuing education for attendees, 2 CEHs per hour of continuing education for presenters, but no additional CEHs may be granted for subsequent presentations of the same material.

(2) University, college or vocational technical adult education courses, which may include formal presentation and directed discussion of videotaped instruction: 10 CEHs per semester credit or 6.6 CEHs per quarter credit for students, 20 CEHs per semester hour or 13.2 CEHs per quarter hour for instructors, but no additional CEHs may be granted for subsequent presentations of the same material.

(3) Educational sessions at state and national conferences: 1 CEH per hour of continuing education for students; 2 CEHs per hour of continuing education for presenters, but no additional CEHs may be granted for subsequent presentations of the same material.

(4) Internet learning courses offered by an accredited college or university: 10 CEHs per semester credit or 6.6 CEHs per quarter credit.

(5) Self−study courses approved by accredited college or university schools, local or national professional or mental health related organizations, 1 CEH per credit completed, but self−study courses may not be used to satisfy the ethics requirement.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07.

SPS 166.11 Recordkeeping. Every credential holder shall retain original documents showing attendance at programs and completion of self−developed programs for at least 4 years from the time that credit is claimed for the continuing education program. At the request of the department, a credential holder shall deliver their documents to the department.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07.

Chapter SPS 167

PROFESSIONAL LIABILITY INSURANCE

SPS 167.01 Insurance requirement.

Note: Chapter RL 167 was created as an emergency rule effective 9−10−07. **Chapter RL 167 was renumbered chapter SPS 167 under s. 13.92 (4) (b) 1., Stats., Register November 2011 No. 671.**

SPS 167.01 Insurance requirement. (1) Except as provided in sub. (2), a person certified under s. 440.88, Stats., shall not practice substance use disorder 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 substance use disorder 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 07−031: cr. Register November 2007 No. 623, eff. 12−1−07.

Chapter SPS 168

CONTINUING EDUCATION

SPS 168.01 Continuing education.

Note: Chapter RL 168 was created as an emergency rule effective 9−10−07. **Chapter RL 168 was renumbered chapter SPS 168 under s. 13.92 (4) (b) 1., Stats., Register November 2011 No. 671.**

SPS 168.01 Continuing education. (1) REQUIREMENTS FOR CONTINUING EDUCATION. (a) Unless granted a postponement or waiver under s. SPS 165.01 (9), every credential holder shall complete at least the number of hours of board−approved continuing education as listed in s. SPS 165.01 (3) in each biennial registration period.

(b) Continuing education hours may apply only to the registration period in which the hours are acquired. If a credential has been allowed to lapse, the department may grant permission to apply continuing education hours acquired after lapse of a credential to a previous biennial period of licensure during which required continuing education was not acquired. In no case may continuing education hours be applied to more than one biennial period.

(c) To meet the continuing education requirement, a credential holder shall submit to the department a certificate of attendance upon the department's request.

(d) Unless granted a postponement or waiver under s. SPS 165.01 (9), a credential holder who fails to meet the continuing education requirements by the renewal deadline shall cease practice otherwise authorized under the credential.

(e) During the time between initial credentialing and commencement of a full 2−year credential period new credential holders shall not be required to meet continuing education requirements.

(f) Applicants from other states applying under s. SPS 161.11 shall submit proof of completion of at least 40 hours of approved continuing education within 2 years prior to application.

(2) CLINICAL SUPERVISION EDUCATION. Applicants seeking renewal of a certificate for clinical supervisor−in−training, intermediate clinical supervisor and independent clinical supervisor shall attend at least 6 hours of continuing education per biennium in the area of clinical supervision in addition to the appropriate number of hours of continuing education for the certificate of clinical substance abuse counselor.

History: CR 07−031: cr. Register November 2007 No. 623, eff. 12−1−07; **correction in (1) (a), (d), (f) made under s. 13.92 (4) (b) 7., Stats., Register November 2011 No. 671.**