Administrative Rules of the
Board of Allied Mental Health Practitioners
Effective: February 16, 2015

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Part 1  General Information

1.1  Introduction
(a) The Board of Allied Mental Health Practitioners has been created by Vermont law, which gives the Board certain powers and duties. The Board has adopted these rules to aid applicants, licensees, and the general public to understand the requirements for obtaining a license or entry on the roster, and the practice requirements of the professions regulated by this Board.

(b) The Board is created to protect the public health, safety, and welfare by setting standards for issuing licenses, licensing qualified applicants, and regulating the practice of license holders.

(c) The rules contain individual sections for Clinical Mental Health Counselors, Marriage and Family Therapists, and Nonlicensed and Noncertified Psychotherapists.

(d) These rules have been approved by the Vermont Legislative Committee on Administrative Rules. They have the force of law.

(e) Legislative changes from time to time may create inconsistencies between statutes and administrative rules. If a statutory change does produce an inconsistency, the statute governs, not the rule.

(f) The Board maintains a website at http://vtprofessionals.org/. Practitioners should periodically consult the website for updated information and matters of interest to the profession.

1.2  Definitions
(a) “Office” means the Office of Professional Regulation.

(b) “Board” means the Board of Allied Mental Health Practitioners.

(c) “Accredited educational institution” means:
   (1) A school, college, university or other institution of higher learning in the United States which, at the time the applicant was enrolled and graduated, was accredited or in candidacy toward accreditation by a regional accrediting commission recognized by the United States Department of Education or the Council on Post-secondary Accreditation (COPA); or

   (2) A school, college, university or other institution of higher learning outside the United States which, at the time the applicant was enrolled and graduated, maintained a standard of training substantially equivalent to the standards of training of those institutions accredited by one of the regional accrediting commissions recognized by the United
States Department of Education or COPA.

(d) “Clinical practice” means providing direct and indirect clinical counseling services to clients.

(e) “Degree in counseling or a related field” means a degree meeting the requirements of Part 3 of these rules.

(f) “Direct service” means time spent with a client directly, or consulting with another professional about the client, for example, the client’s physician or psychiatrist. It may include any phone time or emergency time with the client, but over all it involves being with the client or the client’s other service providers.

(g) “Graduate credit” means credit computed in a semester hour system.

(g) “Indirect services” means creating case notes, staff meetings, supervision, workshops and conferences, general consultation, teaching, case management activities, and any other mental health counselor related work other than direct client contact.

1.3 Laws That Govern the Board
(a) The licensure and roster entry statutes are:
   - Clinical Mental Health Counselors, 26 V.S.A. §§ 3261-3274;
   - Marriage and Family Therapists, 26 V.S.A. §§ 4031-4042;
   - Roster of Psychotherapists Who Are Nonlicensed and Noncertified, 26 V.S.A. §§ 4082-4093.

(b) In addition, the Board is subject to several other state laws. Among them are the Administrative Procedure Act, 3 V.S.A. §§ 801-849, the Open Meeting Law, 1 V.S.A. §§ 310-314, the Law of Professional Regulation, 3 V.S.A. §§ 121-132, and the Access to Public Records Law, 1 V.S.A. §§ 315-320. These laws set forth the rights of an applicant, regulated professional, or member of the public. The complete text of these laws is available at most libraries and town clerks’ offices. “Vermont Statutes Online” are also available on the Internet at http://www.leg.state.vt.us. The Board’s statutes and rules may also be accessed through the Board’s Web site at http://vtprofessionals.org/.

1.4 General Information for Applicants Applications and information about licensure or roster entry requirements are available from the Board or online at http://vtprofessionals.org/. No decision on an application can be made until an applicant has paid the required fee, submitted all required documentation to the Board, and the Board has received verification of education, passing examination scores, and completed supervised practice.

1.5 Applications Expire If after five years an applicant does not provide the Board any report on progress towards licensure, the application expires. If the applicant wishes to pursue licensure, the applicant must begin the application process anew under the rules in effect at the
1.6  **Decisions on Licensure: Applicant’s Right to a Written Decision**
(a) Once the Board makes a decision on whether to approve an application, renewal, or reinstatement application, it will notify the applicant in writing. When the Board determines that the applicant does not meet the requirements for licensure, it issues a “preliminary denial.” The Board sends a letter to the applicant giving specific reasons for the decision. The letter informs the applicant of the right to appeal the Board’s denial and request a formal appeal hearing in front of the Board. An appeal must be filed within 30 days of the Board’s denial notice. If the applicant does not request a hearing within 30 days, the denial becomes final.

(b) The Board conducts formal appeal hearings for license denials and renewal denials. The applicant bears the burden to show that the preliminary denial was in error.

1.7  **Applicant’s Right to Appeal a Final Licensing Decision**  
After the formal hearing the Board issues a written final decision. If the decision is to deny licensure, the applicant is notified in writing of statutory appeal rights. Appeals must be filed within 30 days of the date of the decision in the manner prescribed in Chapter 5 of title 3 (3 V.S.A. § 129). Further information about the appeal process may be obtained from the Office or online at [http://vtprofessionals.org/](http://vtprofessionals.org/).

1.8  **Change of Name or Address**
(a) Each licensee or roster entrant shall notify the Office within 30 days, if he or she changes name, mailing address, or business address.

(b) Acceptable documentation of change of name includes a notarized copy of a marriage certificate, instrument of change of name from a probate court, or other court order. Acceptable documentation of change of name also includes a notarized copy of current identification, such as a driver’s license or Social Security card, in both the former and present names. The Board may require additional documentation at its discretion.

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**Part 2: Disclosure of Information (General)**

2.1  **Disclosure Requirements Apply to All**  
Each member of the professions governed by these rules has specific substantive disclosure requirements. They are specified in that profession’s individual section in these rules.

2.2  **Disclosure Statements: Form and Timing**  
Each licensed clinical mental health counselor, licensed marriage and family therapist, or rostered psychotherapist must provide a disclosure statement, printed or typed in easily readable format.

2.3  **Definition of Disclosure**  
Disclosure means, at a minimum:

(a) Posting the information and informing the client where the information is posted; or

(b) Having the information printed, displaying the printed information in an easily
accessible location, and informing the client where the information is displayed; or

(c) Having the information printed and directly handing a copy of the information to the client.

2.4 **Timing of Disclosure**  No later than the third office visit, the regulated professional must present to the client for signature a document stating that the information required to be disclosed as described above has been disclosed to the client. Note: rostered psychotherapists have additional requirements in Part 5. The regulated professional must also sign the document and must retain the signed original. If, by the third visit, disclosure cannot be made or the client declines to sign, the regulated professional must prepare and sign a written statement explaining the omission, which must be retained in place of the signed copy.

2.5 **Disclosure to Parent or Guardian**  When the client is not able to understand the disclosure, as in the case of an institutionalized person, a minor, or an adult who is under the supervision of a guardian, the disclosure must be made to a suitable parent or guardian.

2.6 **Inspection of Disclosure Statements**  At its discretion, the Board may inspect and audit a licensee’s or roster entrant’s disclosure records. The Board will inspect only general materials relating to information disclosure, and will not inspect individual client records or notes, unless a complaint has been filed. The Board will select individuals to be audited on a random basis or in response to a complaint.

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**Part 3: Clinical Mental Health Counselors**

3.1 **Apply Early**  Applicants for licensure as Clinical Mental Health Counselors are advised to apply as soon as they have met their graduation requirements so that they may qualify for the licensing examination at the earliest time. In addition to the application form and other required documents referred to on the application form, applicants must send course descriptions and/or syllabi to the Board for review.

3.2 **Apply Before Supervised Practice**  Applicants should not wait to complete supervised practice requirements before applying for licensure. In fact, early application can help the Board provide applicants a clear understanding of any remaining licensure requirements.

3.3 **Requirements for Licensure as a Clinical Mental Health Counselor**  There are two ways to become licensed in Vermont as a Clinical Mental Health Counselor.

(a) **Examination:** An applicant may apply on the basis of education, licensing examination, and supervised practice, or

(b) **Endorsement:** In certain circumstances, depending on licensing standards of other jurisdictions or duration of licensure, an applicant who is licensed or certified in another jurisdiction may be granted licensure in Vermont on the basis of that license or certification. This is called “licensure by endorsement.” See, Rule 3.23.
(c) **In addition, in either case: Statutes and Rules Examination:** All applicants must successfully complete, after one is adopted, the Board’s jurisprudence examination before a license will be issued.

### 3.4 Those not Qualified for Endorsement
Applicants who do not qualify for licensure by endorsement must meet the requirements for licensure by examination.

### 3.5 Licensure by Examination
To be eligible for licensure as a clinical mental health counselor, an applicant must satisfy:

(a) the educational requirements;

(b) the examination requirements; and

(c) the supervised practice requirements as set forth in Sub-Part C herein.

### 3.6 Educational Requirements
Educational prerequisites for licensure as a clinical mental health counselor are set forth below. The applicant must:

(a) have earned an “acceptable degree;”

(b) complete no less than 60 credits of graduate level course work including the additional specific courses specified below, if those courses were not taken as part of an acceptable degree.

(c) complete 700 hours of supervised internship, with no fewer than **600 hours occurring within the “acceptable” degree.**

### 3.7 Acceptable Degrees
As used in this Part an “acceptable degree” is one which may be used toward licensure. Two categories of degrees are acceptable:

(a) A degree in clinical mental health counseling conferred by a program accredited by the Council for Accreditation of Counseling and Related Educational Programs (CACREP) is an acceptable degree which may be used toward licensure; and

(b) A non-CACREP program degree which meets the requirements set forth below is an acceptable degree which may be used toward licensure.

(c) **Reminder:** Each applicant who has an acceptable degree is still required to successfully complete 60 credits of graduate level course work in mental health counseling to qualify for licensure.

**Sub-Part A  Non-CACREP degrees**

### 3.8 Essential Course: Diagnosis, Assessment and Treatment
(a) To be considered an “acceptable” master’s or higher degree in “counseling or a related
field,” the degree must contain no fewer than 3 graduate credits in “Diagnosis, Assessment and Treatment.”

(b) Diagnosis, Assessment and Treatment means: studies that provide an understanding of psychopathology. Studies in this area include the Diagnostic and Statistical Manual and its use in counseling, and assessing psychopathology. The course shall also include the development of treatment plans and the use of related services, and the role of assessment, intake interviews, and reports, if that material is not covered in another treatment course.

(c) If the degree does not contain 3 graduate credits in Diagnosis, Assessment and Treatment, the degree does not qualify as a degree in “counseling or a related field” and cannot be used as the basis for licensure as a clinical mental health counselor. The course work in Diagnosis, Assessment and Treatment must be completed within the degree conferred. This deficiency cannot be remedied by taking post degree course work. It cannot be supplemented.

(d) The degree must contain course work from no fewer than five of the seven areas (1) through (7) below:

1. **Human Growth and Development**: 3 Graduate credits. Studies that provide an understanding of the nature and needs of individuals at all developmental levels throughout the life span. Studies in this area would include theories of individual and family development and transitions across the life span, and theories of learning and personality development.

2. **Theories**: 3 Graduate credits. Studies that survey counseling theories (e.g., Psychodynamic, Humanist, Behavioral, Transpersonal) and their historic and functional relationship to specific counseling approaches (e.g., Cognitive Behavior Therapy, Psychoanalysis, Family Systems, Solution Focused Therapy, Rational Emotive Therapy).

3. **Counseling Skills**: 3 Graduate credits. Studies that provide an understanding of the counseling and consultation processes, development of student self-awareness, and the skills necessary for developing a positive therapeutic relationship.

4. **Groups**: 3 Graduate credits. Studies that provide an understanding of group development and group dynamics. Studies in this area would include group counseling theories, group counseling methods and skills, group leadership styles, and other group work approaches.

5. **Measurement**: 3 Graduate credits. Studies that provide an understanding of group and individual educational and psychometric theories and approaches to measurement. Course work would cover data and information-gathering methods, validity, reliability, psychometric statistics, factors influencing measurements, and use of measurement results in the counseling process.
(6) **Professional Orientation and Ethics:** 3 Graduate credits. Studies that provide an understanding of the professional counselor’s roles and functions. Course work would cover professional counseling organizations and associations, history and trends within the counseling profession, ethical and legal standards, and counselor preparation standards and credentialing.

(7) **Treatment Modalities:** 3 Graduate credits. Studies that provide an understanding of specific treatment approaches such as Cognitive Behavioral Therapy, Feminist Therapy, Narrative Therapy, and Psychoanalytic Psychotherapy. Studies will focus on one or more modalities. Emphasis will be placed upon the application of theories to practice, including case conceptualization and corresponding therapeutic interventions.

(e) If the degree does not contain the required credits in 5 of the 7 areas, the degree does not qualify as a “degree in counseling or a related field.” It cannot be used as the basis for licensure as a clinical mental health counselor. This deficiency cannot be remedied post degree. It cannot be supplemented.

(f) The degree must contain a supervised internship of at least 600 hours, as set forth below.

(g) A degree based from a program with fewer than 600 hours of supervised internship does not qualify as a degree in “counseling or a related field” and cannot be used as the basis for licensure as a clinical mental health counselor. **This deficiency cannot be remedied post degree. It cannot be supplemented.**

**Sub-Part B Courses, Supervised Internship, and Examinations Required for Licensure**

3.9 **Courses Required for Licensure** 60 credits of graduate level course work are required for licensure. These courses, if not taken as part of the master’s or higher degree may be supplemented post-degree.

(a) An applicant who has an acceptable degree qualifying as one in “counseling or a related field” but who has not completed all 7 courses in part (d) of Rule 3.8, must successfully complete the remaining two courses to qualify for licensure.

(b) An applicant who has an acceptable degree must have at least three graduate credits in each of the following areas of study to qualify for licensure:

1. **Multi-cultural Studies:** Studies that provide an understanding of issues and trends in a multi-cultural and diverse society. Course work would cover attitudes and behaviors based on such factors as age, role, religion, physical disability, sexual orientation, ethnicity and culture, family patterns, gender, socioeconomic status, and intellectual ability.

2. **Research and Evaluation:** Studies that provide an understanding of research in the field of clinical mental health counseling. Course work would cover the
types of research, basic statistics, research report development, research implementation, program evaluation, needs assessment, and ethical and legal considerations associated with research and evaluation.

(3) Career Development and Lifestyle Appraisal: Studies that provide an understanding of career development theories, occupational and educational information services, career counseling, and career decision making.

(c) Additional courses required for licensure: At least three graduate credits in at least two of the five following areas of study (for a minimum of six graduate credits) are necessary for licensure. These courses, if not taken as part of the master’s or higher degree may be supplemented post-degree.

(1) Marriage, Couples, and Family Counseling: Studies that provide an understanding of the structure and dynamics of the family, and methods of marital and family intervention and counseling.

(2) Human Sexuality for Counselors: Studies that provide an understanding of human sexual function and dysfunction, the relationship between sexuality, self-esteem, sex and gender roles and life styles over the life cycle, and counseling treatment approaches and techniques.

(3) Crisis Intervention: Studies that provide an understanding of the theory and practice of crisis intervention, short-term crisis counseling strategies, and the responsibilities of all those involved in the intervention.

(4) Addictive Disorders: Studies that provide an understanding of the stages, processes, and effects of addiction, social and psychological dynamics of chemical dependency, and the professional’s role in prevention, intervention, and aftercare.

(5) Psychopharmacology: Studies that provide an understanding of the basic classifications, indications, and contraindications of commonly prescribed psychopharmacological medications for the purpose of identifying effective dosages and side effects of such medications.

3.10 Transcripts and Course Descriptions: Required Documentation
(a) Applicants must have the educational program from which they obtained a degree send official transcripts directly to the Board.

(b) Applicants shall provide course descriptions and/or syllabi for all course work appearing on the transcript(s); and

(c) Applicants shall provide any other documentation specifically requested by the Board.
3.11 Board Review of Transcripts  The Board will recognize a course as satisfying the requirements of these rules if it is seen as a “stand alone course,” that is one which clearly from its course description covers required subject matter. The Board will not grant credit for “embedded content” that is an element or elements of study of an area which is only part of a larger course concentrating on a different area of study. For example: A course on “marriage and family treatment modality” may include discussion or examination of the ethical issues involved in marriage and family treatment. The Board will not grant credit for ethics content “embedded” within this course. The Board will grant ethics credit only from a course which, standing alone, clearly focuses on ethics.

3.12 Supervised Internship  Each applicant must complete a 700 hours supervised internship. The internship may include no more than 100 hours of practicum/field experience. An applicant who as part of the degree in counseling or related field has completed an internship of 600 or more hours but fewer than 700 hours must make up the difference by:
(a) adding those hours to those required for post degree supervised practice; or
(b) acquiring the remaining hours in an internship which occurs in conjunction with a formal internship seminar class from an accredited graduate program.

3.13 Internship Description  A supervised internship, requires a student to work in a “clinical mental health counseling” practice setting, 26 V.S.A. § 3261(2). The internship provides an opportunity for the student to perform the activities that a regularly employed clinical mental health counselor would be expected to perform.

3.14 Examination  
(a) Recent Examination Required - Effective January 1, 2016  
For applicants who have not previously been licensed, only examination results obtained within five (5) years of the final decision on licensure may be accepted.
(b) Applicants must successfully complete both the National Clinical Mental Health Counseling Examination (NCMHCE) and the National Counselor Examination (NCE) or their Board approved successor examination or examinations on clinical mental health counseling theory and practice. Once an applicant’s education is approved, applicants are given examination registration information.
(c) More information: Applicants may obtain information about the examinations by contacting the examination providers directly. Contact information is available on the Board’s web site.

Sub-Part C: Post Degree Supervised Practice, Rules 3.15 - 3.22

3.15 Post Degree Supervised Practice  
(a) “Supervised practice” by an applicant, means post-master’s practice of clinical mental health counseling that is supervised by a clinical supervisor. An applicant must complete 3,000 hours of supervised practice over a period of no less than 2 years.
(b) **Recent supervision required:** Effective January 1, 2016: To ensure that an applicant’s supervised practice reflects a current competence for licensure, only supervised practice hours acquired within 5 years of a final decision on licensure may be accepted.

### 3.16 Post Degree Supervised Practice: Entry on Roster of Nonlicensed and Noncertified Psychotherapists is Required

No supervised practice may occur within the State of Vermont until the prospective licensee has been entered on the roster of nonlicensed and noncertified psychotherapists.

### 3.17 Distribution of Practice Hours

Of the 3,000 practice hours, 2,000 hours must be direct service, with the remaining 1,000 hours in either continued clinical practice or related services. The supervised practice must take place in a “clinical mental health” practice setting or settings.

26 V.S.A. § 3261(2).

### 3.18 Supervised Practice, Face-to-Face Supervision

(a) A clinical supervisor must be familiar with the nature of the applicant’s clinical activities, monitor the quality of the counseling and contribute to the enhancement of self-knowledge and clinical mental health counseling skills. The supervisor is responsible for monitoring and assessing the applicant’s work and compliance with statutes and rules.

(b) **Frequency:** Supervised practice must be accompanied by no fewer than 100 hours of face-to-face supervision. Under no circumstances may any person in supervised practice accumulate more than thirty hours practice without a minimum of one hour face-to-face supervision. The supervisor and the supervised person are both responsible for ensuring that face-to-face supervision complies with this rule.

(c) **Nature and Location**  
Face-to-face supervision is conducted in the formal setting of an office, clinic, or institution, and may be either in an individual setting, between the supervisor and the applicant, or in a group setting, including the supervisor and up to six trainees. Of the 100 hours, at least 50 must be in an individual setting. The applicant must submit satisfactory supervision reports on forms provided by the Office.

(d) The Board recommends that the supervised practice experience include at least two supervisors with diverse theoretical orientations. Supervision focuses on the raw data from the supervisee’s continuing clinical practice which may consist of direct observation, co-therapy, written clinical notes, and audio and video recordings. Supervision is a process clearly distinguishable from personal psychotherapy, and is conducted to serve professional or vocational goals.

### 3.19 Supervisor Qualifications

(a) Supervision shall be by: an individual who possesses an unencumbered license in one of the following professions in the jurisdiction where the supervised practice occurs:

(1) a physician or a licensed osteopathic physician who has been certified in psychiatry
by the American Board of Medical Specialties; or
(2) a psychiatric nurse practitioner; or
(3) a psychologist; or
(4) a clinical mental health counselor; or
(5) a clinical social worker; or
(6) a marriage and family therapist; or
(7) a member of a licensed profession which is in the opinion of the Board is a substantial equivalent.

(b) A person who commences supervision must have possessed an unencumbered license for no fewer than three years in a permitted supervisory profession listed above.

(c) A supervisor must have an unencumbered license at all times while providing supervision.

3.20 Excluded from Supervising

(a) Preface: Successful supervision requires that the future licensee and supervisor have a full and candid exchange regarding all aspects of the supervised practice. Treatment issues, including issues of sexual attraction and other matters between practitioner and client, and work conditions affecting practice should be fully explored. Because full candor is needed, conflicts of interest between supervisor and future licensee must be avoided.

(b) Certain persons are excluded from being supervisors. A “clinical supervisor” does not include a spouse, life partner, former spouse, or family member. A clinical supervisor does not include an employer, financial partner, or shareholder in the same counseling enterprise, or other person who gains financially from the practice of the applicant.

(c) A supervisor who: (1) meets the requirements to be a supervisor; and (2) is an employee of the same employer as the applicant, and (3) does not personally financially gain from the practice of the applicant, is not disqualified from providing clinical supervision.

(d) The following arrangements do not constitute clinical supervision:
   (1) Supervision by current or former family members or any other person where the nature of the personal relationship prevents or makes difficult the establishment of a professional relationship;
   (2) Administrative supervision (for example, clinical practice performed under administrative rather than clinical supervision of an institutional director or executive);
   (3) Classes, workshops, or seminars;
   (4) Consultation, staff development, or orientation to a field or program, or role-playing of family interrelationships as a substitute for current clinical practice.

3.21 Verification of Supervisor Licensure If the supervisor is certified or licensed in another jurisdiction, verification of his or her licensure must be provided directly to the Board from the licensing or certifying authority of the other jurisdiction before the Board will review the supervision reports.
3.22 Supervision Reports  A supervision report must be submitted by a clinical supervisor. Supervision Forms are available from the Office or online at [http://vtprofessionals.org/](http://vtprofessionals.org/). The supervision report shall contain sufficient detail to permit the Board to evaluate an applicant’s supervised practice. The supervision report must contain, at a minimum:

(a) Applicant’s name;

(b) Supervisor’s name, signature, address, certification or licensure number, state where granted, date granted, and area of specialization;

(c) Name and nature of the practice setting, and a description of the client population served;

(d) Specific beginning and ending dates of practice covered;

(e) The specific number of hours the applicant spent providing direct and indirect services;

(f) Number of one-to-one supervisory hours;

(g) Number of group supervision hours with a maximum of six people in a group supervised by at least one clinical supervisor;

(h) Applicant’s specific duties;

(i) Detailed assessment of the applicant’s performance;

(j) Clinical skills supervised;

(k) Ethical practices reviewed; and

(l) A statement of the supervisor’s belief that the applicant is competent and qualified to practice independently.

3.23 Licensure by Endorsement

(a) Applicants from a jurisdiction with substantially equivalent standards: The Board may grant a license to an applicant licensed or certified as a clinical mental health counselor in another United States or Canadian jurisdiction whose licensing requirements are in the opinion of the Board, substantially equivalent to those in Vermont.

(b) Applicants from a jurisdiction with substantially equivalent standards except for national competency examinations: If the applicant is licensed or certified as a clinical mental health counselor in a United States or Canadian jurisdiction whose regulatory standards are, in the opinion of the Board, substantially equivalent except for requiring only one exam, the
NCMHCE or NCE, the applicant may be licensed upon successful completion of the examination the applicant was not required to take for licensing in the other jurisdiction; or

(c) **Applicants in active practice in a United States or Canadian jurisdiction regardless of licensing standards:** The Board may grant a license to an applicant:

  1. who is licensed or certified to practice as a clinical mental health counselor in another United States or Canadian jurisdiction notwithstanding the jurisdiction’s current licensing requirements;
  2. who has no disciplinary history; and
  3. who has been in “active practice” no fewer than five years. “Active practice” as used in this section means the applicant has practiced clinical mental health counseling more than an average of 20 hours per week for 48 weeks per year.

3.24 **Final Review of Applications**  Final review of any application will not occur until all requested documents have been received.

**Sub-Part D: Post Licensure Requirements**

3.25 **Mandatory Disclosure Statements for Licensed Clinical Mental Health Counselors**

Disclosure statements for licensed clinical mental health counselors must include the mental health counselor’s professional qualifications and experience, including:

  a) all relevant graduate programs attended and all graduate degrees and certificates earned, including the full legal name of the granting institution;

  b) a brief description of any special qualifications and areas of practice;

  c) a copy of the statutory definition of unprofessional conduct (3 V.S.A. § 129a and 26 V.S.A. § 3271 for licensed clinical mental health counselors);

  d) information on the process for filing a complaint with, or making a consumer inquiry to the Board; and

  e) the statement: “My practice is also governed by the Rules of the Board of Allied Mental Health Practitioners. It is unprofessional conduct to violate those rules. A copy of the rules may be obtained from the Board or online at [http://vtprofessionals.org/](http://vtprofessionals.org/).”

  f) The form and timing of disclosure is contained in Rules 2.2 through 2.4.

3.26 **Continuing Education: Maintaining a License**  With the first renewal application after two years of licensure, and with each subsequent renewal application, documentation of completion of 40 hours of continuing education is required. Only continuing education taken within two years of the renewal date is counted. Continuing education is calculated in the following manner:

  a) One academic semester credit equals 15 hours of continuing education.
(b) One quarter academic year credit equals 10 hours of continuing education.

(c) One workshop hour equals one hour of continuing education.

3.27 Continuing Education Ethics Requirement, Supervision
(a) A minimum of four of the 40 hours must be specifically designated as continuing education in professional ethics in the clinical fields of marriage and family therapy, clinical mental health counseling, psychiatry, psychology, or social work.

(b) The remaining 36 hours must be in the theory and practice of clinical mental health counseling.

(c) Those who serve as supervisors are encouraged to take some continuing education training related to supervision.

3.28 Continuing Education: Record Retention
(a) Each licensee must maintain records showing attendance and participation in the continuing education activities claimed. Examples of acceptable records include certificates of attendance received during the instruction, receipt of registration and the activity’s time schedule, signature of facilitator, or brief summary of the work content. These records are subject to inspection and verification by the Board upon request.

(b) Licensees must retain records of all continuing education courses and activities for a period of four years. The Board does conduct audits to ensure compliance with continuing education requirements. Submitting documentation of the content of the activities is required only upon specific request of the Board.

3.29 Continuing Education Audits
(a) The Board will conduct continuing education audits of randomly selected licensees as well as licensees whose licenses are conditioned. The Board may also audit licensees seeking reinstatement, and licensees who in any of the preceding 2 renewal cycles were initially found to have not met continuing education renewal requirements. Submitting documentation of the content of the activities is required only upon specific request of the Board.

(b) When a licensee appears on the audit list, the Board will request documentation from the licensee showing a detailed account of the various credits claimed. The Board will review the documentation and determine whether the continuing education requirements have been satisfied.

3.30 Limitations on Credit Credit for formal activities will be granted only for actual time spent as a learner. Breaks, business meetings and lunches are not to be counted toward continuing education credits.
3.31 Hardship Extension  A licensee who will be unable to complete the required continuing education by the renewal deadline may apply for an extension which the Board may grant only in cases of extreme hardship. The Board may grant an extension to complete the remainder of the required credits. See, 3 V.S.A. § 129(1).

3.32 Continuing Education Acceptable Types
(a) Formal Activities:
   (1) Graduate academic courses including online graduate courses in areas supporting development of skill and competence in counseling at an institution which meets accreditation standards will be acceptable to the Board.
   (2) Institutes, workshops, seminars and conferences approved by the Board must clearly relate to maintaining skills for the safe and competent practice of counseling and be conducted by persons qualified within their respective professions.

(b) Individualized Learning Activities: No more than 28 of the 40 hours may be accrued in this category. Home study programs including online or interactive training approved by the National Board of Certified Counselors (NBCC), the American Counseling Association, or the American Mental Health Counselors Association will be accepted. Completion of home study programs must be documented by a certificate of completion or other appropriate documentation. Individualized learning activities subject to the 28 hour limitation include:
   (1) Teaching or Consultation: In programs such as institutes, workshops, seminars, and conferences. Documentation must include relevant readings, activities, research procedures, products, and a brief critique of the material.
       Limitation: Not more than five continuing education hours may be granted during any two-year license renewal period for time spent in activities as an instructor or presenter in the field of clinical mental health counseling. Continuing education hours will be allowed only one time per subject taught, and will not be granted for teaching a program which is within the licensee’s regular employment. Credit for teaching is given for actual presentation time, not preparation time.

   (2) Supervision: received by the licensee and provided by a licensed mental health professional in an individual or group setting. Documentation is required from both the supervisee and the supervisor or colleagues as to general topic and approach as well as assessed professional development of the supervisee.

(c) Continuing education provided by or approved by the National Board for Certified Counselors, the American Counseling Association, the American Mental Health Counseling Association, the American Psychological Association, or the American Association of Marriage and Family Therapists is approved without prior review by the Board.

3.33 Continuing Education Program Approval
(a) The Board may approve programs sponsored by departments of accredited institutions, by national, regional, state or local professional organizations or associations, by public or private human service organizations, or by private consultants or individuals. To be approved, a
continuing education program’s objectives must relate directly to counseling theory or the application of counseling theory or practice.

(b) Sponsoring organizations may apply to the Board for program approval. The name of the program, a description of the program content, program schedule, the number of hours requested, and the names and qualifications of the instructor(s) and sponsors must be clearly indicated on the application form. Application for advance approval should be filed at least 60 days before the education program is scheduled to commence.

(c) The Board will assign a maximum number of hours to each approved activity.

(d) When the Board has approved a program, the sponsor may so state in its publicity and may state the number of hours for which the program has been approved.

3.34 Denial of Continuing Education Approval

(a) The Board may refuse to approve any activity which does not meet the requirements of these rules, or for the following reasons:

(1) Fraud or misrepresentation on the part of the sponsoring organization or licensee regarding continuing education information submitted for approval to the Board;

(2) Program objectives or content do not relate to the theory or clinical application of mental health counseling;

(b) A sponsor may claim Board approval of an activity only after the Board has approved it and assigned it a number of continuing education hours.

3.35 License Renewal

(a) Licenses are issued for a two-year period on a schedule set by the Office of Professional Regulation and must be renewed by the expiration date printed on the license certificate.

(b) The Office sends licensees a renewal notice in advance of the expiration date. A licensee is responsible for renewal whether a notice is received or not.

(c) A license not renewed by its expiration date expires.

3.36 Reinstatement of an Expired License An applicant for reinstatement of a license which has expired may be eligible for reinstatement upon:

(a) submission of the renewal application form;

(b) payment of the applicable fees;

(c) completion of all continuing education requirements for the last full licensing period preceding reinstatement; and

(d) if the licensed has lapsed more than five years, and the applicant has not practiced
under a license from another U.S. or Canadian jurisdiction, reinstatement may not occur before the applicant has:

(1) has registered on the roster of nonlicensed and noncertified psychotherapists;
(2) successfully completed six months with no fewer than 750 hours of supervised practice with supervision as required by these rules for pre-licensure supervised practice; and
(3) successfully completed the Vermont statutes and rules examination.

(e) Upon completion and Board approval of the completed supervised practice, the applicant’s license will be fully reinstated.

3.37 Inactive status Licensees may change their license status to inactive as permitted by law.

Part 4 Marriage and Family Therapists

4.1 Apply Early Applicants for licensure as marriage and family therapists are advised to apply as soon as they have met their graduation requirements so that they may be qualified for the licensing examination at the earliest time. In addition to the application form and other required documents referred to on the application form, applicants should send course descriptions and syllabi to the Board for review.

4.2 Apply before Supervised Practice Applicants should not wait to complete supervised practice before applying for licensure. In fact, early application can help the Board provide applicants a clear understanding of any remaining licensure requirements.

4.3 Explanation of Licensing Requirements for Marriage and Family Therapists

(a) To ensure that all who are licensed as marriage and family therapists have a sufficiently broad and thorough preparation for licensure, these rules require not only a degree focusing on marriage and family therapy, but for those who have not completed COAMFTE (Commission on Accreditation for Marriage and Family Therapy Education) programs, successful completion of a specific list of courses.

(b) The rules:

(1) permit licensure of graduates of COAMFTE accredited programs; and
(2) permit licensure of graduates from other programs whose curricula meet the requirements set forth below;
(3) require that applicants complete specific course requirements.

4.4 Requirements for Licensure as a Marriage and Family Therapist There are two ways to become licensed in Vermont as a marriage and family therapist.

(a) Examination: An applicant may apply on the basis of education, successful completion of supervised practice, and passage of licensing examination. See below.
(b) **Endorsement:** In certain circumstances depending on the licensing standards of other jurisdictions or duration of licensure, an applicant who is licensed or certified in another jurisdiction may seek licensure on the basis of that license or certification. See, Rule 4.25.

(c) **In addition, in either case: Statutes and Rules Examination:** All applicants must successfully complete, after one is adopted, the Board’s jurisprudence examination before a license will be issued.

4.5 **Those Not Qualified for Endorsement**  Applicants who do not qualify for licensure by endorsement must meet the requirements for licensure by examination.

4.6 **Licensure by Examination**  To be eligible for licensure by examination as a marriage and family therapist, an applicant must satisfy:

   (a) the educational requirements;

   (b) the examination requirements; and

   (c) the supervised practice requirement set forth below.

4.7 **COAMFTE Programs**  A degree from a COAMFTE approved program is an acceptable degree which may be used toward licensure.

4.8 **Non-COAMFTE Program Accreditation**  Programs or institutions which are not COAMFTE accredited must be accredited by a national or regional accreditation body which is approved by the Board. For purposes of these rules, “accredited” includes candidacy toward accreditation.

4.9 **Non-COAMFTE Programs: Credits Required**

   (a) Degrees from Non-COAMFTE programs must contain 36 graduate credits.

   (b) Within the 36 graduate credits, a minimum of 18 must be primarily dedicated to and clearly identified as being from a marriage, couple, or family therapy/systems/relational perspective.

   (c) Degrees must be based on a curriculum which includes a supervised internship as set forth below.

4.10 **Supervised Internship**

   (a) A supervised internship requires a student to work in a marriage and family therapy focused setting. The internship provides an opportunity for the student to perform the activities that a regularly employed marriage and family therapist would be expected to perform.

   (b) A minimum of 500 hours of internship within the degree conferred is required for the degree to be accepted toward licensure. Applicants from non-COAMFTE programs must provide documentation of direct and indirect hours completed during the internship.

   (c) To be eligible for licensure each applicant must provide 500 hours of direct service.
(d) An applicant who did not provide 500 hours of direct service during the internship must add to the 3,000 hours of post-degree supervised practice the difference between the direct service hours provided and 500 direct service hours required for licensure.

4.11 Notice Regarding Insufficient Internship  
A degree based on a program of fewer than 500 hours of supervised internship is not an acceptable degree for licensure. This deficiency cannot be remedied post degree. It cannot be supplemented.

4.12 Credit Hours Required for Licensure
(a) Applicants must complete a minimum of 48 credits of graduate level courses in marriage and family therapy and related areas of study as set forth in these rules.

(b) Some applicants may find they have to take more than 48 graduate credits to satisfy the specific course requirements. Successful completion of all courses or study area requirements listed below is required for licensure. Degrees must contain a minimum of 36 graduate credits.

4.13 Board Review of Transcripts  
The Board will recognize a course as satisfying the requirements below if it is seen as a “stand alone course,” that is one which on its face fills the requirement. The Board will not grant credit for “embedded content,” that is an element or elements of study of an area which is only part of a larger course concentrating on a different area of study. For example: A course on “marriage and family treatment modality” may include discussion or examination of the ethical issues involved in marriage and family treatment. The Board will not grant credit for ethics content “embedded” within this course. The Board will grant ethics credit only from a course which, standing alone, and on its face, focuses on ethics.

4.14 Curriculum Required for Licensure  
Each applicant for licensure must have completed the following course work:

(a) 3 credit hours of course work in diagnosis and treatment (DSM); **If a non COAMFTE degree does not contain 3 graduate credits in diagnosis, assessment and treatment, the degree does not qualify as a “graduate degree focusing on marriage and family therapy” 26 V.S.A. § 4037 and cannot be used as the basis for licensure as a marriage and family therapist. The course work in diagnosis, assessment and treatment must be completed within the degree conferred. This deficiency cannot be remedied by taking post degree course work. It cannot be supplemented.**

(b) Six graduate credits in course work from a marriage and family therapy/systems perspective; these areas shall provide a comprehensive survey and substantive understanding of the major models of marriage and family therapy. A course must include course work in the following areas: historical development, theoretical and empirical foundations, and contemporary conceptual directions of the field of marriage and family therapy.

(c) 3 graduate credits in marriage and family therapy skills; a graduate level course that provides an understanding of the counseling process and the skills necessary for
developing a positive therapeutic relationship.

(d) 3 graduate credits in a marriage and family therapy treatment modality; a comprehensive survey and substantive understanding of the major models of marriage, couple, and family therapy;

(e) 3 graduate credits in human growth and development; graduate level course in any aspect of human development across the life span from a marital and family therapy perspective, including but not limited to theories of individual development, theories of learning, theories of personality, theories of normal and abnormal behavior, gender, human sexuality and psychopathology;

(f) 3 graduate credits in diversity/social and cultural foundations; a graduate level course that explores diversity/social and cultural foundations with particular attention paid to the function of relational and family systems;

(g) 3 graduate credits in research; graduate level course in research design, methods and statistics with particular attention paid to research in the field of marriage and family therapy.

(h) 3 graduate credits in professional ethics; means a graduate level course in professional ethics, legal responsibilities and liabilities, standards of practice, licensure regulation, and professional socialization relevant to the practice of marriage and family therapy, utilizing the MFT code of Ethics;

(i) At least three graduate credits in at least two of the nine following areas of study (for a minimum of six graduate credits) are necessary for licensure and may be taken post-degree:

1. Human sexuality; Studies that provide an understanding of human sexual function and dysfunction, the relationship between sexuality, self-esteem, sex and gender roles and life styles over the life cycle, and counseling treatment approaches and techniques.
2. Psychopharmacology; Studies that provide an understanding of the basic classifications, indications, and contraindications of commonly prescribed psychopharmacological medications for the purpose of identifying effective dosages and side effects of such medications.
3. Domestic violence; studies that provide a systemic approach to assessment and treatment of family violence, child, spousal, and parental abuse;
4. Sexual abuse; studies that provide an overview of skills and interventions in treating sexual abuse, sexual assault
5. Gender and sexuality; studies that provide a systemic approach to sexual identity and family therapy theory and clinical applications including sexual dysfunction, sex and disability, and nontraditional sexual relationships;
6. Groups: studies that provide cognitive and affective awareness of group process through didactic and experiential instruction, as well as Group techniques
for the treatment of family issues;
(7) Crisis intervention; studies that provide an understanding of the theory and practice of crisis intervention, short-term crisis counseling strategies, and the responsibilities of all those involved in the intervention;
(8) Addictions/chemical dependency; Studies that provide an understanding of the stages, processes, and effects of addiction, social and psychological dynamics of chemical dependency, and the professional’s role in prevention, intervention, and aftercare,
(9) Appraisal and assessment; studies that support the Design and execution of research in human service settings. Proposal development, creation of quantitative and qualitative instruments, coding of data, computer-based data analysis, and production of research reports. Individual, couple, and family assessment utilizing a family systems perspective. Overview of family assessment techniques. Issues and procedures in family therapy process and outcome research.
(j) Supervised internship: A 500 hour supervised internship obtained as part of the degree is required for licensure.

4.15 Examination Requirement
(a) Applicants must successfully complete the written examination on marriage and family therapy approved by the Board.

(b) Recent Examination Required - Effective January 1, 2016 For applicants who have not previously been licensed, only examination results obtained within five (5) years of the final decision on licensure may be accepted.

(c) Once an applicant’s education is approved, the applicant will be given examination registration information.

4.16 Post Degree Supervised Practice Requirement
(a) Before a license may be issued, the applicant must complete 3,000 hours of supervised practice with individual, couple, family or group therapy from a systems perspective over a minimum two year period.

(b) Recent supervision required: Effective January 1, 2016 To ensure that an applicant’s supervised practice reflects a current competence for licensure, only supervised practice hours acquired within 5 years of a final decision on licensure may be accepted.

4.17 Post Degree Supervised Practice: Entry on the Roster of Nonlicensed and Noncertified Psychotherapists Required No supervised practice may occur within the State of Vermont until the prospective licensee has been entered on the Roster of Psychotherapists who are Nonlicensed and Noncertified.

4.18 Distribution of Practice Hours 2,000 hours must be direct service, 50 per cent of
which must be with couples and/or families. The remaining 1,000 hours must be continued clinical practice or indirect services related to or supporting clinical services.

4.19 Face-to-Face Supervision
(a) A clinical supervisor must be familiar with the nature of the applicant’s clinical activities, monitor the quality of the counseling and contribute to the enhancement of self-knowledge and marriage and family therapy clinical skills. The supervisor is responsible for monitoring and assessing the applicant’s work and compliance with statutes and rules.

(b) Frequency: Supervised practice must be accompanied by no fewer than 100 hours of face-to-face supervision. Under no circumstances may any person in supervised practice accumulate more than thirty hours practice without a minimum of one hour face-to-face supervision. The supervisor and the supervised person are both responsible for ensuring that face-to-face supervision complies with this rule.

(c) Nature and Location: Face-to-face supervision is conducted in the formal setting of an office, clinic, or institution, and may be either in an individual setting, between the supervisor and the applicant, or in a group setting, including the supervisor and up to six trainees.

(d) Of the 100 hours, at least 50 must be in an individual setting. The applicant must submit satisfactory supervision reports on forms provided by the Office.

4.20 Supervisor Qualifications
(a) A supervisor must have no fewer than three years unencumbered licensure before supervision begins.

(b) A supervisor must possess at all times an unencumbered license in one of the following professions in the jurisdiction where the supervised practice occurs:
   (1) marriage and family therapist;
   (2) clinical social worker;
   (3) clinical mental health counselor;
   (4) psychologist;
   (5) licensed physician certified in psychiatry by the American Board of Medical Specialties.

4.21 Verification of Supervisor If the supervisor is certified or licensed in another jurisdiction, verification of his or her licensure or certification must be provided directly to the Board by the licensing or certifying authority of the other jurisdiction before the Board will review the supervision reports.

4.22 Supervision Requirements
(a) A supervisor is familiar with the nature of the applicant’s therapy activities, monitors the quality of the therapy, and contributes to the enhancement of self-knowledge and practice of therapy.
(b) The Board recommends that the supervised practice experience include at least two supervisors with diverse marriage and family therapy theoretical orientations. Supervision focuses on the raw data from the supervisee’s continuing clinical practice, which may consist of direct observation, co-therapy, written clinical notes, and audio and video recordings. Supervision is a process clearly distinguishable from personal psychotherapy, and is conducted to serve professional or vocational goals.

4.23 Excluded from Supervising

(a) Preface: Successful supervision requires that the future licensee and supervisor have a full and candid exchange regarding all aspects of the supervised practice. Treatment issues, issues of sexual attraction, and other matters between practitioner and client, and work conditions affecting practice should be fully explored. Because full candor is needed, conflicts of interest between supervisor and future licensee must be avoided.

(b) Certain persons are excluded from being supervisors. A clinical supervisor does not include a spouse, life partner, former spouse, or family member. A clinical supervisor does not include or any employer, financial partner, or shareholder in the same counseling enterprise, or other person who gains financially from the practice of the applicant.

(c) A supervisor who: (1) meets the requirements to be a supervisor; and (2) is an employee of the same employer as the applicant, and (3) does not personally financially gain from the practice of the applicant, is not disqualified from providing clinical supervision.

(d) The following arrangements do not constitute clinical supervision:
   (1) Supervision by current or former family members or any other person where the nature of the personal relationship prevents or makes difficult the establishment of a professional relationship;
   (2) Administrative supervision (for example, clinical practice performed under administrative rather than clinical supervision of an institutional director or executive);
   (3) Classes, workshops, or seminars;
   (4) Consultation, staff development, or orientation to a field or program, or role-playing of family interrelationships as a substitute for current clinical practice.

4.24 Supervision Reports

A supervision report submitted by a supervisor shall contain sufficient detail to evaluate an applicant’s supervised practice. The report shall include, at a minimum:

(a) Applicant’s name;

(b) Supervisor’s name, signature, address, certification or license number, state where granted, date granted, and area of specialization;

(c) Name and nature of the practice setting and a description of the client population served;

(d) Specific beginning and ending dates of practice covered in the report;
(e) The specific number of hours the applicant spent providing direct and indirect services,

(f) Number of one-to-one supervisory hours;

(g) Number of group supervision hours, with a maximum of six people in a group supervised by at least one supervisor;

(h) Applicant’s specific duties;

(i) Detailed assessment of the applicant’s performance;

(j) Clinical skills supervised;

(k) Ethical practices reviewed; and

(l) A statement of the supervisor’s belief that the applicant is competent and qualified to practice independently.

4.25 Licensure by Endorsement (without examination) The Board may license without requiring all professional competency examination(s) as follows:

(a) Applicants from a jurisdiction with substantially equivalent standards:
   (1) If the applicant is licensed or certified as a marriage and family therapist in another United States or Canadian jurisdiction which currently has, in the opinion of the Board, regulatory standards and qualifications substantially equivalent to those in Vermont, the Board may issue a license.
   (2) Applicants from jurisdictions whose requirements are otherwise substantially equivalent but which do not require the national marriage and family therapist examination may be issued a license to practice upon successful completion of that examination.

(b) Applicants in active practice in another U.S. or Canadian jurisdiction, regardless of licensing standards: If the applicant has been licensed or certified to practice with no encumbrance in a U.S. or Canadian jurisdiction, notwithstanding the jurisdiction’s current licensing requirements, and has been in “active practice” no fewer than five years, the Board may issue a license. “Active practice” as used in this section means practicing marriage and family therapy more than an average of 20 hours per week for 48 weeks per year.

4.26 Application Process for Licensure of Marriage and Family Therapists
(a) Application by Examination: Before the Board will approve an applicant to sit for the examination, the applicant must submit the following for review:
   (1) Official transcripts sent directly to the Board of Allied Mental Health Practitioners by the educational institution;
   (2) Other documentation specifically requested by the Board to determine the applicant’s
eligibility. For applicants from non-COAMFTE programs, this shall include course
descriptions and syllabi.

(b) An applicant may sit for the examination at any time following the approval of his or her
education credentials provided the applicant has registered for the examination and paid the fee
by the deadline dates. Once an applicant’s education is approved, the applicant will be given
examination registration information.

(c) Final review of any application will not occur until the Board has received all supervision
reports and any other requested documents.

4.27 **Mandatory Disclosure Statements for Licensed Marriage and Family Therapists**

(a) Each marriage and family therapist is required to make a disclosure as provided in Rules
2.2 through 2.6.

(b) **Substance:** Disclosure statements for licensed marriage and family therapists must include
the following information:

1. The licensee’s qualifications and experience, including:
   
   (A) all relevant graduate programs attended and all graduate degrees and
certificates earned, including the full legal name of the granting institution, and
   (B) a brief description of any special qualifications and areas of practice;

2. A copy of the statutory definition of unprofessional conduct (3 V.S.A. § 129a and 26
V.S.A. § 4042 for licensed marriage and family therapists);

3. The statement: “My practice is also governed by the Rules of the Board of Allied
Mental Health Practitioners. It is unprofessional conduct to violate those rules. A copy
of the rules may be obtained from the Board or online at [http://vtprofessionals.org/](http://vtprofessionals.org/)”;

4. Information on the process for filing a complaint with, or making a consumer inquiry
toe Board.

4.28 **Continuing Education**

(a) Continuing educational requirements are designed to assure that marriage and family
therapists maintain and improve the quality of professional services provided to the public, to
keep the marriage and family therapists knowledgeable about current research, techniques, and
practice, and to provide other resources which will improve skill and competence in marriage
and family therapy.

(b) With the first renewal application after two years of licensure, and with each subsequent
renewal application, documentation of completion of 20 hours of continuing education is
required. Only continuing education taken within two years of the renewal date is counted.

(c) **Continuing Education, Ethics Requirement** A minimum of four of the 20 hours must be
specifically designated as continuing education in professional ethics in the clinical fields of
marriage and family therapy, clinical mental health counseling, psychiatry, psychology, or social
work.
(d) Those who serve as supervisors are encouraged to take some continuing education training related to supervision.

(e) “Continuing education” means the direct participation of a marriage and family therapist as a learner in a structured educational format. Hours of continuing education are calculated as set forth below:
   (1) One semester credit equals 15 hours of continuing education.
   (2) One quarter credit equals 10 hours of continuing education.
   (3) One workshop hour equals one continuing education credit.

(f) Continuing education credits will be granted only for actual time spent as a learner. Breaks and lunches cannot be included.

4.29 Maintaining Continuing Education Records
(a) Each licensee must maintain records showing attendance and participation in the continuing education activities claimed. Examples of acceptable records include certificates of attendance received during the instruction, receipt of registration and the activity’s time schedule, signature of facilitator, or brief summary of the work content. These records are subject to inspection and verification by the Board upon request.

(b) Licensees must retain records of all continuing education courses and activities for a period of four years. The Board conducts audits to ensure compliance with continuing education requirements. Submitting documentation of the content of the activities is required only upon specific request of the Board.

4.30 Continuing Education Audits
(a) The Board will conduct continuing education audits of randomly selected licensees as well as licensees whose licenses are conditioned. The Board will also audit reinstating licensees and licensees who in any of the preceding two renewal cycles were initially found to have not met continuing education renewal requirements. Submitting documentation of the content of the activities is required only upon specific request of the Board.

(b) When a licensee appears on the audit list, the Board will request documentation from the licensee showing a detailed account of the various credits claimed. The Board will review the documentation and determine whether the continuing education requirements have been satisfied.

(c) A form upon which all continuing education may be recorded for audit purposes is available on line at the Board’s web site. Documentation of continuing education must include the name and date of the programs with certificates of attendance and the number of continuing education hours approved.

(d) Under 3 V.S.A. § 129(k) the Board may give licensees 90 days to develop and complete a corrective plan to cure any deficiencies in his or her continuing education requirements.
(e) Courses taken pursuant to a corrective plan may be counted for only the licensing period being audited.

(f) Failure to comply with a corrective plan may result in disciplinary action. 3 V.S.A. § 129a(a)(4).

4.31 Hardship Extension  A licensee who will be unable to complete the required continuing education by the renewal deadline may apply for an extension which the Board may grant only in cases of extreme hardship. The Board may grant an extension to complete the remainder of the required credits. See, 3 V.S.A. § 129(k).

4.32 Credit for Continuing Education, Acceptable Types
(a) Acceptable Formal Activities include:
   (1) graduate academic courses in areas supporting development of skill and competence in marriage and family therapy at an institution which meets accreditation standards acceptable to the Board;
   (2) institutes, workshops, seminars and conferences approved by the Board that clearly relate to maintaining skills necessary for the safe and competent clinical practice of marriage and family therapy and are conducted by persons qualified within their respective professions;

(b) Individualized Learning Activities: No more than 10 of the 20 hours may be accrued in this category. Home study programs including online or interactive training approved by board which may include programs sponsored by the American Association of Marriage and Family Therapists, the National Board of Certified Counselors (NBCC), the American Counseling Association, or the American Mental Health Counselors Association. Completion of home study programs must be documented by a certificate of completion or other appropriate documentation. Activities permitted may include:

(c) Instructing: No more than five hours of continuing education consisting of activities as an instructor or presenter in the field of marriage and family therapy may be counted. Continuing education credit will be allowed only one time per subject taught, and will not be granted for teaching a program which is within the licensee’s regular employment.

4.33 Provider Approval
(a) The Board may approve programs sponsored by departments of accredited institutions, by national, regional, state or local professional organizations or associations, by public or private human service organizations, or by private consultants or individuals. To be approved, a continuing education program’s objectives must relate directly to counseling theory or the application of counseling theory or practice.

(b) Sponsoring organizations may apply to the Board for program approval. The name of the program, a description of the program content, program schedule, the number of hours requested, and the names and qualifications of the instructor(s) and sponsors must be clearly indicated on the application form. Application for advance approval should be filed at least 60 days before
the education program is scheduled to commence.

(c) Continuing education provided by or approved by the National Board for Certified Counselors, the American Counseling Association, the American Mental Health Counseling Association, the American Psychological Association, or the American Association of Marriage and Family Therapists is approved without prior review by the Board.

4.34 Approval of Continuing Education Activities
(a) Approval of the activity may be obtained from the Board. The name of the activity, a description of the program content including a published brochure or handout showing the schedule of the hours spent in instruction, the number of credits requested, and the names and qualifications of the instructors and sponsors must be clearly indicated on the application form. An application may be filed by the sponsoring agency or group, or by any participant. Application for advance approval should be filed 60 days before the educational activity is scheduled to commence.

(b) The Board will assign a maximum number of credit hours to each approved activity.

4.35 Denial of Continuing Education Approval
(a) The Board may refuse to approve any activity which does not meet the requirements of these rules, or for the following reasons:
   (1) Fraud or misrepresentation on the part of the sponsoring organization or licensee regarding continuing education information submitted for approval to the Board;
   (2) Program objectives or content do not relate to the theory or clinical application of theory pertaining to the practice of marriage and family therapy.

(b) A sponsor may claim Board approval of an activity only after the Board has approved it and assigned the number of continuing education hours.

4.36 License Renewal Process
(a) Licenses are issued for a two-year period on a schedule set by the Office of Professional Regulation and must be renewed by the expiration date printed on the license certificate.

(b) A license not renewed by its expiration date expires.

(c) The Office sends licensees a renewal notice in advance of the expiration date. A licensee is responsible for renewal whether a notice is received or not.

4.37 Reinstatement of Expired License
(a) A license may be reinstated upon payment of the reinstatement penalty and renewal fee, and meeting all renewal requirements.

(b) If the license has lapsed more than five years, and the applicant has not practiced under a license from another U.S. or Canadian jurisdiction, reinstatement may not occur before the applicant has:
(1) after registering on the roster of nonlicensed and noncertified psychotherapists;
(2) successfully completed six months with no fewer than 750 hours of supervised practice with supervision as required by these rules for pre-licensure supervised practice; and
(3) successfully completed the Vermont statutes and rules examination.

(c) Upon completion and Board approval of the completed supervised practice, the applicant’s license will be fully reinstated.

Part 5 Nonlicensed and Noncertified Psychotherapists

5.1 Introduction Vermont law requires that unlicensed persons who practice psychotherapy disclose their training and qualifications. Psychotherapists who are not licensed or certified are held to established standards of professional conduct contained within statutes and these rules. They are subject to discipline by the Board if they fail to adhere to those standards.

5.2 Entry on the Roster of Nonlicensed and Non-Certified Psychotherapists All nonlicensed and non-certified psychotherapists who practice in Vermont must apply for entry on the roster. A psychologist, clinical social worker, clinical mental health counselor, marriage and family therapist, psychoanalyst, or any other allied mental health practitioner whose license is suspended or revoked in Vermont or any other jurisdiction is not eligible for entry on the roster. See, 3 V.S.A. § 4086.

5.3 Application Information Applications and information about licensure or roster entry requirements are available from the Board or online at http://vtprofessionals.org/. An applicant must submit a fully completed application form with all supporting documentation and the fee to the Board.

5.4 Mandatory Disclosure Statements for Rostered Psychotherapists
(a) Substance: Disclosure statements for rostered psychotherapists must include the following information, submitted in the format outlined below:
(1) Statement of formal education:
   (A) Name of institution;
   (B) Dates attended;
   (C) Degree(s) awarded (if any);
(2) Training (must include the following information for each area of training):
   (A) Title of training program;
   (B) Name and address of trainer and or training institute;
   (C) Dates - beginning and ending;
   (D) Content of program;
   (E) Credentials awarded (if any);
(3) Experience in the practice of psychotherapy (must include the following information for each practice setting):
(A) Description of practice;
(B) Location;
(C) Duration - beginning and ending dates;
(D) Part-time or full-time practice;
(E) Whether supervision or peer consultation occurs and, if so, how often;

(4) Scope of practice, including:
(A) Therapeutic orientation;
(B) Area of specialization;
(C) Treatment methods;

(5) A copy of the statutory definitions of unprofessional conduct (3 V.S.A. § 129a and 26 V.S.A. § 4093);
(6) The statement: “My practice is also governed by the Rules of the Board of Allied Mental Health Practitioners. It is unprofessional conduct to violate those rules. A copy of the rules may be obtained from the Board or online at [http://vtprofessionals.org/].”;
and
(7) Information on the process for filing a complaint with, or making a consumer inquiry to the Board.

(b) **Filing:** A dated copy of the disclosure statement used must be sent to the Office of Professional Regulation when it is first printed and when revised. Rostered psychotherapists must retain printed and dated copies of all their disclosure forms should any revisions occur.

5.5 **Roster Renewal**

(a) Registrations are issued for a two-year period on a schedule set by the Office of Professional Regulation and must be renewed by the expiration date printed on the registration certificate.

(b) The Office sends a renewal notice in advance of the expiration date. A registrant is responsible for renewal whether a notice is received or not.

(c) A registration not renewed by its expiration date expires.

(d) Roster entries issued within 90 days of the renewal date will not be required to renew or pay the renewal fee. The roster entry will be issued through the next full registration period. Applicants issued an initial license or roster entry more than 90 days prior to the renewal expiration date will be required to renew and pay the renewal fee.

5.6 **Reinstating a Roster Entry** If a roster entry has expired because it was not renewed on time, the roster entrant may apply for reinstatement and pay applicable penalty and the renewal fee for the current renewal period.

5.7 **Continuing Education for Rostered Psychotherapists** Vermont law does not mandate continuing education for psychotherapists. Psychotherapists are encouraged to expand their professional education and skills by participating in continuing education, both formal and informal. Practitioners are reminded that providing services which one is not qualified to provide, or which are beyond the scope of his or her education, training, capabilities, experience, or scope of practice is unprofessional conduct.
Part 6  Discipline

6.1  Complaint Procedure  The Office of Professional Regulation (Office) has a procedure for receiving, investigating, and acting on complaints of unprofessional conduct. Copies of the procedure are available from the Office and online.

6.2  Unprofessional Conduct, Clinical Mental Health Counselors  Unprofessional conduct includes acts or omissions which violate section 129a of Title 3, violations of these rules, and violations of 26 V.S.A. § 3271.

6.3  Unprofessional Conduct, Marriage and Family Therapists  Unprofessional conduct includes acts or omissions which violate section 129a of Title 3, violations of these rules, and violations of 26 V.S.A. § 4042.

6.4  Unprofessional Conduct, Rostered Psychotherapists  Unprofessional conduct includes acts or omissions which violate section 129a of Title 3, violations of these rules, and violations of 26 V.S.A. § 4093.

6.5  Range of Disciplinary Sanctions  Possible disciplinary sanctions the Board may impose for violation of the statutes or rules of the various professions may include but are not limited to:

(a) denial of licensure or roster entry;

(b) warnings or reprimands;

(c) suspension for a period of time to be determined by the Board;

(d) revocation;

(e) limitations on practice;

(f) setting conditions for practice or resumption of practice;

(g) denial of reinstatement or renewal;

(h) imposition of a civil penalty of up to $1,000 for each instance of unauthorized practice or unprofessional conduct.

6.6  Codes of Ethics (General)  The Board may refer to the National Board for Certified Counselors (NBCC) “Code of Ethics” as amended, the American Counseling Association (ACA) “Code of Ethics and Standards of Practice,” and the American Association for Marriage and Family Therapy (AAMFT) “Code of Ethics,” as guides to the standards of practice for the professions subject to these rules. Although not in themselves additional grounds of
unprofessional conduct, these ethical codes establish the standard of practice and fitness within the profession and are incorporated by reference into these rules. Copies of the NBCC “Code of Ethics” may be obtained from the NBCC’s web site at http://www.nbcc.org. Copies of the ACA “Code of Ethics and Standards of Practice” may be obtained from the ACA’s Web site at http://www.counseling.org. Copies of the AAMFT “Code of Ethics” may be obtained from the AAMFT’s Web site at http://www.aamft.org. Copies of these codes may also be obtained from the Office upon written request.

6.7 Disciplinary Actions, Public Records All Board disciplinary actions are public records available online or from the Office.

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