

PUBLIC WORKSHOP

Proposed Temporary Regulation
NAC 641A.085, subsection 7,(b),(4)

**PROPOSED TEMPORARY REGULATION OF THE BOARD OF
EXAMINERS FOR MARRIAGE AND FAMILY THERAPISTS
AND CLINICAL PROFESSIONAL COUNSELORS**

January 18, 2019

EXPLANATION – Matter in *italics* is new; matter in brackets ~~omitted material~~ is material to be omitted.

AUTHORITY: §1, NRS 641A.160, 641A.180, 641A.220 and 641A.231.

A TEMPORARY REGULATION relating to mental health; revising provisions relating to licensure as a marriage and family therapist, marriage and family therapist intern, clinical professional counselor or clinical professional counselor intern; and providing other matters properly relating thereto.

Section 1. 1. Except as otherwise provided in subsection 7, to qualify for licensure as a marriage and family therapist or marriage and family therapist intern, an applicant's graduate education in marriage and family therapy must include the following courses of study:

- (a) At least two courses in human development, including, without limitation, issues of sexuality.
- (b) At least two courses in marital and family systems.
- (c) At least three courses in marital and family therapy.
- (d) At least one course in ethical and legal issues in the practice of marriage and family therapy.
- (e) At least three courses in the supervised practice of marriage and family therapy.
- (f) At least one course in diagnosis and assessment, including, without limitation, the use of the *Diagnostic and Statistical Manual of Mental Disorders*.
- (g) At least one course in social and cultural foundations.

- (h) At least one course in research.
- (i) At least one course in abuse of alcohol or controlled substances.
- (j) At least one course in crisis or trauma.
- (k) At least one course in grief or loss.
- (l) At least one course in group counseling.
- (m) At least one course in individual counseling theories.

2. Except as otherwise provided in subsection 7, to qualify for licensure as a clinical professional counselor or clinical professional counselor intern, an applicant's graduate education in clinical professional counseling must include the following courses of study:

- (a) At least two courses in human development, including, without limitation, issues of sexuality.
- (b) At least one course in individual counseling theories.
- (c) At least one course in individual counseling techniques and practice.
- (d) At least one course in lifestyle and career development.
- (e) At least one course in group dynamics, counseling and consulting.
- (f) At least one course in ethics and professional studies.
- (g) At least three courses in the supervised practice of clinical professional counseling.
- (h) At least one course in diagnosis and assessment, including, without limitation, the use of the *Diagnostic and Statistical Manual of Mental Disorders*.
- (i) At least one course in social and cultural foundations.
- (j) At least one course in research and evaluation.
- (k) At least one course in abuse of alcohol or controlled substances.
- (l) At least one course in couples counseling.

(m) At least one course in family systems.

(n) At least one course in crisis or trauma.

(o) At least one course in grief or loss.

3. The courses in the supervised practice of marriage and family therapy or clinical professional counseling required pursuant to subsection 1 or 2, as applicable, must:

(a) Include clinical experience working with individuals, couples and families.

(b) Be equivalent to three courses taken during three semesters or four courses taken during four quarters which provide a minimum of 40 weeks of supervised practice.

4. For a graduate degree to fulfill the educational requirements for licensure as a marriage and family therapist, clinical professional counselor or intern pursuant to this section, the degree must require at least 60 semester hours or 72 quarter hours.

5. The Board will consider only courses completed at the graduate level for fulfillment of the educational requirements for licensure as a marriage and family therapist, clinical professional counselor or intern.

6. A course may not be used to satisfy the requirements for more than one course of study set forth in subsection 1 or 2.

7. The Board:

(a) Will consider a graduate degree from a program that was accredited by the Council for Accreditation of Counseling and Related Educational Programs or the Commission on Accreditation for Marriage and Family Therapy Education at the time the degree was conferred as fulfilling the educational requirements for licensure as an intern.

(b) May consider:

(1) Graduate degrees in fields related to mental health which are comparable to degrees in marriage and family therapy, counseling or mental health counseling and which meet the requirements for courses listed in subsection 1 or 2, regardless of the terminology used in the degree granted by the educational institution, as fulfilling the educational requirements for licensure as a marriage and family therapist, clinical professional counselor or intern.

(2) Graduate degrees from a program that the Board determines substantially meets the requirements set forth in subsection 1 or 2, as applicable.

(3) Years of clinical experience as a licensed marriage and family therapist , clinical professional counselor or intern in lieu of specific academic courses.

(4) Graduate degrees conferred on or before August 30, 2021 which met the requirements of this section as it existed on August 29, 2018.

AGENDA ITEM #3

Discussion, recommendation, and possible action regarding review and approval of minutes from October 19, 2018 meeting

(For possible action)

State of Nevada
Board of Examiners for Marriage & Family Therapists & Clinical Professional Counselors

AGENDA AND NOTICE OF PUBLIC MEETING

Friday, October 19, 2018 at 9:00 a.m.

Sierra Counseling Center
1855 Sullivan Lane, Suite 145
Sparks, Nevada

and

Kayenta Legacy Conference Room
9418 West Lake Mead Boulevard
Las Vegas, Nevada

Please Note: The Board may (a) address agenda items out of sequence to accommodate persons appearing before the Board or to aid the efficiency or effectiveness of the meeting; (b) combine agenda items for consideration by the public body; and (c) pull or remove items from the agenda at any time. The Board may convene in closed session to consider the character, alleged misconduct, professional competence or physical or mental health of a person. (NRS 241.020, NRS 241.030).

Public comment is welcomed by the Board. Public comment will be limited to five minutes per person and comments based on viewpoint will not be restricted. A public comment time will be available prior to any action items on the agenda and on any matter not specifically included on the agenda prior to adjournment of the meeting. At the discretion of the President, additional public comment may be heard when that item is reached. The President may allow additional time to be given a speaker as time allows and at his/her sole discretion. (NRS 241.020, NRS 241.030) Prior to the commencement and conclusion of a contested case or a quasi-judicial proceeding that may affect the due process rights of an individual, the Board may refuse to consider public comment. (NRS 233B.126)

Action by the Board on any item may be to approve, deny, amend or table.

1. Call to Order, roll call, Confirmation of Quorum. 9:06 a.m.

Present: Jake Wiskerchen, John Nixon, Erik Schoen, Steve Nicholas, Adrienne O'Neal, Marta Wilson, Barry Blackburn, Hal Taylor, DAG Henna Rasul

Absent: Roberta Vande Voort.

Public attendees: Cara Elliott, Crystal Jaquette, Amanda Briley, Lucas Stephenson

2. Public comment:

No vote may be taken upon a matter raised during a period devoted to public comment until the matter itself has been specifically included on an agenda as an item upon which action may be taken. (NRS 241.020)

Bill Sikkens (web design): provided an update for the BoE website. The new website is live and parallel with the old, linked, website. Applications can be initiated, and accounts can be saved for future correspondence. The remaining work surrounds updating and monitoring the content for effectiveness. The estimated amount of time needed for complete functionality is one more week. At this point, Bill is performing quality/functionality assessments. The intern-reporting forms will be operational this winter in preparation for the next reporting period. Attention has been paid to the ADA protocols and requirements. Bill invited all comments and suggestions moving forward.

3. Discussion, recommendation, and possible action regarding review and approval of minutes from September 28, 2018 meeting (For possible action): Henna recommended adding the attendees of each meeting to include members and guests. Motion to approve with amendments: 1st: Erik. 2nd: Hal. Vote: passed unanimously.
4. Marta Wilson petitions the board for a clear understanding on who provides supervision for MFT interns (For discussion): Marta sought clarification for the process of approval for primary supervision. Specifically, Marta wanted to know if licensure determined the specificity of the intern population. Jake reviewed the NAC 641.146, noting that regardless of the supervisor's licensure (MFT or CPC), either/both internships can be supervised. MFT supervisors are permitted to supervise MFT-I and CPC-I. CPC supervisors are permitted to supervise MFT-I and CPC-I.
5. Marta Wilson petitions the board for a discussion on NAC641A.085, specifically regarding the requirement for courses in crisis or trauma and grief or loss and what that means for credit implementation on academic reviews for programs that are not CACREP or COAMFTE accredited (For discussion): The credit requirement has been struck and course requirements are now the applicable qualifier. John N. recommended postponing the implementation of this requirement as it might hinder the licensure process for new applicants. Henna R. (SDAG) stated that all applicants must be considered within the laws established. Jake reviewed the protocols for open meeting law and the regulatory process; this was for the consideration of implementing a start date and/or a grandfather clause for the course requirement. This topic will be tabled for the next agenda for further discussion.

Recess: 9:52 a.m. Call to order: 9:58 a.m. Same quorum present.

6. Discussion, recommendation, and possible action regarding legislative changes to NRS641A (For possible action): Bill Draft Resolution (BDR) drafted by Jake W. describes the specific scopes of practice for MFTs and CPCs. Additionally, the BDR outlines fee increases and terms of licensure.

Governor: Brian Sandoval Budget Period: 2019-2021 Biennium (FY20-21) Budget Session: 80TH REGULAR SESSION BDR Number: 19ABDC2030 Title: MFT-CPC Board Healthcare Revisions

NRS 641A.065 "Practice of clinical professional counseling" defined. Discussion: Hal recommends that the chair meet with the other Examiner Boards to discuss any feedback and opposition. John has interacted with the President of the psychology board and reported that the psychology association is opposed to this clause. Erik noted that other professional licenses have communicated their understanding; however, others have noted concerns about MFT/CPC scopes including psychometric testing abilities. John concurred and recommended that both scopes mirror. Motion to preserve the professional identities of .065 and .080 while removing the psychometric testing clause. 1st: Erik 2nd: John. Vote: passed unanimously.

NRS 641A.080 "Practice of marriage and family therapy" defined. Motion to restore 2, A.: 1st: Erik, 2nd: John. Vote: passed unanimously.

NRS 641A.100 Qualifications of members; removal for misconduct. Hal reviewed historic considerations with other boards where practitioners were self-governed. Motion to approve: 1st: Steve, 2nd: John. Vote: passed unanimously.

NRS 641A.235 License: Issuance; expiration; proration of fee. Motion to strike the licensee's birthdate and approve: 1st: Erik, 2nd: Hal. Vote: Marta-Nay. Passed.

NRS 641A.241 Expedited license by endorsement: Requirements; procedure for issuance. Motion to approve: 1st: Erik, 2nd: Steve. Erik rescinded his motion. Motion to leave as-is without additional language (would only apply to veterans): 1st – John; 2nd – Hal. Vote: passed unanimously.

Member Steve Nicholas left the meeting. Quorum maintained.

NRS 641A.290 Fees. Change "Re-examination of coursework" to "Re-evaluation of coursework." Also, change "Three-year intern license extension" to "Renewal of an intern's license." "Semi-annual

intern license renewal” removed/struck. Also, strike sections 3, 4, and 5. Motion to approve: 1st – Erik; 2nd – Hal. Vote: passed unanimously.

NRS 641A.2872 Marriage and family therapist interns: Period of validity; eligibility for renewal; expiration. Include in 1, “Except as provided for in paragraph 2b,” and change in 2 from “Expires upon:” to “Terminates upon.” 1st – Hal; 2nd – Erik. Vote: passed unanimously.

NRS 641A.2882 Clinical professional counselor interns: Period of validity; eligibility for renewal; expiration. Include in 1, “Except as provided for in paragraph 2b,” and change in 2 from “Expires upon:” to “Terminates upon.” 1st – Hal; 2nd – Erik. Vote: passed unanimously.

7. Report from President (Advisement) – Jake defers report for this meeting.
8. Report from Treasurer (Advisement) – Roberta not in presence. Jake indicated that Board is still in the middle of a state-mandated audit. Roughly \$70k in all bank accounts – more than enough to get through the rest of the year until renewal fees begin to come in.
9. Report from Executive Director (Advisement) – Will be making procedural changes to prevent likelihood of any future fraud. Erik reported that he visited the board office last Friday and was impressed with how professional things looked – the space and staff were open and welcoming. Some good words / sentiments being shared by licensees about improvements.
10. Report from Senior Deputy Attorney General Henna Rasul – No further report.
11. Board member comments – Marta made comment about video screen making things difficult to stay synchronized between north and south...just need to slow things down which really helped. All here for the same purpose and make things work for the State of Nevada.
12. Discussion regarding future agenda items and future meeting dates:
 - a. Friday, November 16th @ 9:00am – Workshop will be added here for grandfathering related to additional required classes
 - b. ADD – January 18th @ 9 am – Hearing and meeting
 - c. ADD – February 15th @ 9 am
13. Public comment. -- None

No vote may be taken upon a matter raised during a period devoted to public comment until the matter itself has been specifically included on an agenda as an item upon which action may be taken. (NRS 241.020)

14. Adjournment (For possible action) – Adjourned at 11:45 am.

Anyone desiring additional information including meeting materials may contact Stephanie Steinhiser at 702-486-7388. Meeting materials are also available for download from the Board website at <http://marriage.nv.gov> or can be requested at the following location: 7324 W. Cheyenne Avenue, Suite #9, Las Vegas, NV 89129.

The Board is pleased to make reasonable accommodations for members of the public who are disabled and wish to attend the meeting. If special arrangements for the meeting are necessary, please notify the Board office at 702-486-7388; or fax 702-486-7258 no later than 48 hours prior to the meeting. Requests for special arrangements made after this time frame cannot be guaranteed.

This agenda has been sent to all members of the Board and other interested persons who have requested an agenda from the Board. Persons who wish to continue to receive an agenda and notice of meetings must request so in writing on an annual basis.

THIS MEETING HAS BEEN PROPERLY NOTICED AND POSTED IN THE FOLLOWING
LOCATIONS:

Grant Sawyer Building 555 E. Washington Avenue Las Vegas, Nevada	State of Nevada Board of Examiners for Marriage & Family Therapists and Clinical Professional Counselors 7324 W. Cheyenne Avenue Suite #9, Las Vegas, Nevada	Nevada State Library 100 North Stewart Street Carson City Nevada
Legislative Building 401 South Carson Street Carson City, Nevada	Board's Website www.marriage.nv.gov State of Nevada Administrative Website notice.nv.gov	Kayenta Legacy 9418 W. Lake Mead Boulevard Las Vegas, Nevada

AGENDA ITEM #4

Review/decision regarding the following licensees who have petitioned the Board to be Primary Supervisors for Marriage and Family Therapist (MFT) and Clinical Professional Counselor (CPC) Interns:

Dr. Lynne Smith, MFT, CPC
Sarah Longson, MFT
Adrienne Sutherland, CPC

(For possible action)



NEVADA STATE BOARD OF EXAMINERS FOR
MARRIAGE & FAMILY THERAPISTS AND
CLINICAL PROFESSIONAL COUNSELORS

PO Box 370130
Las Vegas, Nevada 89137
Office: (702) 486-7388
FAX: (702) 486-7258

PRIMARY SUPERVISOR APPLICATION

DR LYNNE M SMITH
Applicant's name (print)

MFT 01388
CPC 0178

License Number

Business/Agency (if applicable)

LYNMARIEPSYCHC@HOTMAIL.COM
Email

632 MOONLIGHT STROLL STREET
Address

360-606-9059
Phone Number

HENDERSON
City

NV
State

89002
Zip

360-606-9059
Cell Phone Number

Pursuant to NAC 641A.182, please check all that apply:

☒ Transcript showing at least one 45-hour graduate-level supervision course taught by an instructor deemed appropriate by the Board

OR:

☒ A certificate of a professional training program as evidence of supervision supervision taught by an instructor deemed appropriate by the Board, which is provided by the American Association for Marriage and Family Therapy or the National Board for Certified Counselors AND;

☒ Evidence of 25 hours of supervisory experience (via signature below) OR;

☒ A copy of a Mentorship Agreement signed by the Mentor and the Mentee supervisor(s) entering the training relationship.

In lieu of the above, please check all that apply:

☐ A copy of "Approved Supervisor" or "Supervisor Candidate" certificate from AAMFT OR;

☐ A copy of "Approved Clinical Supervisor" certificate from the NBCC.

My signature below affirms that I understand and will comply with all provision of NAC 641A.178

Supervisor Candidate Name (Print)

Signature

Date

LYNNE M SMITH, PhD

[Signature]

9/24/18

I attest that I have mentored, or will mentor, the above-named individual in 25 hours of supervision.

Mentor Name (Print)

Signature

Date

MERLEIND HARKU

[Signature]

10/1/18

**I waive the 21 working days notice required by NRS 241.033 and agree that the Board of Examiners for Marriage and Family Therapy and Clinical Professional Counseling may consider my request at its next scheduled Board Meeting.

[Signature]
[Applicant]

[Signature]
[Mentor]



Continuing Education Certificate


This is to certify that on 07/28/2016

Lynne M. Smith

completed the online course:

AAMFT Advanced Supervision Refresher Course

This course provided 5 contact hours of continuing education.


AAMFT Meeting and Events Manager

5 HOUR REFRESHER COURSE



Certifies:


Lynne Smith

Has successfully completed and is awarded

One Hour (1) of Continuing Education Units in Supervision Ethics

At the **2016 NAMFT Professional Development Day** on

October 8, 2016


Gary D. Alexander, MS, MFT, LCADC
President—NAMFT

CEUs Approved by the
Nevada Board of Examiners for
Marriage & Family Therapists
and Clinical Professional Counselors



NEVADA STATE BOARD OF EXAMINERS FOR
MARRIAGE & FAMILY THERAPISTS AND
CLINICAL PROFESSIONAL COUNSELORS

OCT 01 2018

PO Box 370130
Las Vegas, Nevada 89137
Office: (702) 486-7388
FAX: (702) 486-7258

PRIMARY SUPERVISOR APPLICATION

Sarah Longson
Applicant's name (print)

01337
License Number

Business/Agency (if applicable)

Sarah.Longson@gmail.com
Email

7371 W. Charleston Blvd #130
Address

N/A
Phone Number

Las Vegas NV 89117
City State Zip

702 449-9001
Cell Phone Number

Pursuant to NAC 641A.182, please check all that apply:

☐ Transcript showing at least one 45-hour graduate-level supervision course taught by an instructor deemed appropriate by the Board

OR;

☒ A certificate of a professional training program as evidence of supervision supervision taught by an instructor deemed appropriate by the Board, which is provided by the American Association for Marriage and Family Therapy or the National Board for Certified Counselors **AND;**

☒ Evidence of 25 hours of supervisory experience (via signature below) **OR;**

☐ A copy of a Mentorship Agreement signed by the Mentor and the Mentee supervisor(s) entering the training relationship.

In lieu of the above, please check all that apply:

☐ A copy of "Approved Supervisor" or "Supervisor Candidate" certificate from AAMFT **OR;**

☐ A copy of "Approved Clinical Supervisor" certificate from the NBCC.

My signature below affirms that I understand and will comply with all provision of NAC 641A.178

Supervisor Candidate Name (Print)

Signature

Date

Sarah Longson 7/27/2018

I attest that I have mentored, or will mentor, the above-named individual in 25 hours of supervision.

Mentor Name (Print)

Signature

Date

Rhonda Kildea 7/27/2018

****** I waive the 21 working days notice required by NRS 241.033 and agree that the Board of Examiners for Marriage and Family Therapy and Clinical Professional Counseling may consider my request at its next scheduled Board Meeting.

[Applicant]

[Mentor]



Continuing Education Certificate

This is to certify that on June 29, 2018

Sarah Longson

completed the online course:

AAMFT 15-hour Fundamentals of Supervision Online Interactive

This course provided 15 contact hours of continuing education.
Of these hours, 3 contact hours are applicable to ethics.



AAMFT Meeting and Events Manager



NEVADA STATE BOARD OF EXAMINERS FOR
MARRIAGE & FAMILY THERAPISTS AND
CLINICAL PROFESSIONAL COUNSELORS

11-8-18
PO Box 370130
Las Vegas, Nevada 89137
Office: (702) 486-7388
FAX: (702) 486-7258

PRIMARY SUPERVISOR APPLICATION

Adrienne Sutherland

Applicant's name (print)

#CPO117

License Number

Community Chest, Inc.

Business/Agency (if applicable)

adrienne@communitychestnevada.net

Email

3881 N. Westpoint Drive

Address

Phone Number

Reno

City

NV

State

89509

Zip

775-762-6795

Cell Phone Number

Pursuant to NAC 641A.182, please check all that apply:

☒ Transcript showing at least one 45-hour graduate-level supervision course taught by an instructor deemed appropriate by the Board
OR;

() A certificate of a professional training program as evidence of supervision taught by an instructor deemed appropriate by the Board, which is provided by the American Association for Marriage and Family Therapy or the National Board for Certified Counselors AND;

☒ Evidence of 25 hours of supervisory experience (via signature below) OR;

() A copy of a Mentorship Agreement signed by the Mentor and the Mentee supervisor(s) entering the training relationship.

In lieu of the above, please check all that apply:

() A copy of "Approved Supervisor" or "Supervisor Candidate" certificate from AAMFT OR;

() A copy of "Approved Clinical Supervisor" certificate from the NBCC.

My signature below affirms that I understand and will comply with all provision of NAC 641A.178

Supervisor Candidate Name (Print)

Signature

Date

Adrienne Sutherland

[Signature]

10/16/18

I attest that I have mentored, or will mentor, the above-named individual in 25 hours of supervision.

Mentor Name (Print)

Signature

Date

Erik Schen

[Signature]

10/20/18

**I waive the 21 working days notice required by NRS 241.033 and agree that the Board of Examiners for Marriage and Family Therapy and Clinical Professional Counseling may consider my request at its next scheduled Board Meeting.

[Signature]

[Applicant]

[Signature]

[Mentor]

2/2018



THE UNIVERSITY OF NORTH CAROLINA

GREENSBORO

School of Education

Certificate of Completion

Adrienne Sutherland

has completed 45 hours of the Approved Clinical Supervisor Training which encompasses all of the educational components for the ACS credential.

Dr. J. Scott Young

Department of Counseling and Educational Development

228 Curry Building, Greensboro, NC 26170

Phone: 336-334-3423 Email: ced@uncg.edu

University of North Carolina at Greensboro
NBCCACEP Provider #3014



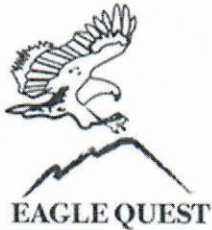
10/18/2018

AGENDA ITEM #5

The following have submitted plans to be approved by the Board for CPC-Interns and MFT-Interns to engage in private practice and **In-Home Therapy** at facilities without a Licensed Mental Health Professional on-site:

Eagle Quest
Victory Alliance
DCFS

(For possible action)



EAGLE QUEST

Quality Behavioral Healthcare and Unmatched Customer Service

Address: 3680 N. Rancho Drive, Las Vegas, NV, 89130
Phone: (702) 646-5437
Fax: (702) 396-4193
Website: eaglequest.us.com

September 27, 2018

To the Nevada Board of Marriage and Family Therapists & Clinical Professional Counselors:

This letter is in regards to Kristina Moore-Swift and her providing therapy services to clients in their home in the community.

Eagle Quest is a mental health agency that provides services for youth, adults, families. The majority of our clients are youth in specialized foster care. Our therapists have been going to the foster home to provide services for over 8 years. These homes are licensed foster homes by the Clark County Department of Family Service (DFS) and meet their standards. Additionally, Eagle Quest Case Managers go into these homes at least twice a month for home visits and to assure safety and licensing compliance. We have policies and procedures to assure safety and privacy in the homes.

We have developed a 24 hour on-call response service for our employees. Ms. Moore-Swift can call:

- Trent Hansen, LCSW, Director of Clinical Services, at 702-319-1509.
- Eagle Quest's main line, 702-646-5437, at any time to be connected to an employee who can connect to on call workers and supervisors.
- David Doyle, Director of Operations, 702-376-0612

These procedures and contact methods have helped assured safety for our employees. If you have further questions, please contact Trent Hansen at 702-319-1509 or thansen@eaglequest.us.com.

Ms. Moore-Swift can also contact her internship supervisor:

- Laura Sutton, LMFT, 702-498-1821

Sincerely,

Trent Hansen, LCSW, Eagle Quest Director of Clinical Services

Kristina Moore-Swift, CPC Intern

Laura Sutton, LMFT, CPC Internship Supervisor

Plan(s) modification and/or approval. If qualified, Direct Supervisors may also function as Clinical Supervisors. Direct Supervisors must document the following activities:

- a. Their face-to-face and/or telephonic meetings with Clinical Supervisors.
 1. These meetings must occur before treatment begins and periodically thereafter;
 2. The documentation regarding this supervision must reflect the content of the training and/or clinical guidance;
 3. This supervision may occur in a group and/or individual settings.
- b. Their face-to-face and/or telephonic meetings with the servicing provider(s).
 1. These meetings must occur before treatment/rehabilitation begins and, at a minimum, every 30 days thereafter;
 2. The documentation regarding this supervision must reflect the content of the training and/or clinical guidance;
 3. This supervision may occur in group and/or individual settings;
- c. Assist the Clinical Supervisor with Treatment and/or Rehabilitation Plan(s) reviews and evaluations.

Main Responsibilities

Direct Supervisors are responsible to:

- Meet with Clinical Supervisors to receive training and clinical guidance regarding treatment and service delivery to the client; meetings must occur before treatment begins and at least 90 days thereafter (prior to the next Medicaid PAR); meetings must be face-to-face or via phone, cannot be done in email, text, or voice mail.
- Meet with employees who provide services to give them training and the clinical guidance regarding delivering services to the client, in accordance to the treatment plan in place; meetings must occur before treatment begins and at least every 30 days thereafter; meetings must be face-to-face or via phone, cannot be done in email, text, or voice mail.
- Document the above supervision meetings and the content of the training and guidance on the "Service Supervision Tracking Log".
- Assist Clinical Supervisor with developing, reviewing, and evaluating treatment plans.

Client Record Audit Responsibilities

Case Managers, Family Support Specialists, and other assistants are responsible to have the information in their client's chart up to date. Select Administrative Assistants, Direct Supervisors, and/or other designated employees will audit each chart using the "Client Record Audit" form to help assure that the case record is being kept up to date. Each chart should be audited at least once every 60 days.

The chart auditor will use the "Client Record Audit" form to audit clients' charts, document complete or deficient items, and sign the form. If there are no deficient items, the auditor will file the form in the client's chart. If there are deficient items, the auditor will notify the employee and/or supervisor responsible for keeping the chart up to date.

The employee responsible for the chart will review the deficient items and then write a correction plan on the "Client Record Audit" and take the necessary action to correct the deficiency within the next 30 days. They will also sign the form.

By the 30th day, the employee will give the "Client Record Audit" form to the appropriate supervisor to verify that the corrections were made and the chart is now up to date. If up to date, the form will be filed in the client's chart. If not up to date after 30 days, the auditor will report the outstanding deficiency to the Clinical Supervisor. Supervisor will also sign the form.

For items over 30 days deficient, the Clinical Supervisor will review the "Client Record Audit" and take and document the further action necessary on the "Client Record Audit: Page 3 – Clinical Supervisor Review" to assure the chart is up to date. Clinical Supervisor will sign the form.

Direct Supervisor Responsibilities in Clinical Supervision

In meetings with Clinical Supervisors, the Direct Supervisor should:

- Describe how service delivery is proceeding in accordance to the client's treatment plan.
- Describe the client's progress toward treatment goals and discuss any needs for modification for treatment plan goals, objectives, and interventions. (The Direct Supervisor is not responsible for modifying the treatment plan, but is responsible for informing the Clinical Supervisor of any possible need for modification.)
- Report any high risk behaviors of the client, including running away, self-harm, drug use, aggression, sexual acting out, high risk environment, and poor boundaries. All emergency situations such as suicidal ideation, homicidal ideation, active psychosis, medication adverse effects, hospitalizations, and arrests should be reported immediately.
- The Direct Supervisor will assist with any actions that Clinical Supervisor might assign to be carried out to address any issues.

PRIVACY AND SAFETY

Policy:	Implementation Date:	NRS/NAC/COA Standard:
Privacy and Safety	2015	---
Applies to:	Related Procedures:	Related Forms:
All service providers	---	---
Developed by:	Approved by:	Date of Initial Approval:
Nichole Gwyn, Trent Hansen	Trent Hansen, David Doyle	2015
Revision Date:	Approved by:	Date of Approval:
10/24/2016	Trent Hansen, David Doyle	10/24/2016

In-Home Therapy Privacy

Eagle Quest may be able to provide in-home therapeutic counseling if it can be arranged. In-home counseling is when an Eagle Quest therapist comes to the client's home to conduct individual, family, or group psychotherapy.

If it is able to be arranged, the in-home counseling will require a private space free from distractions. Information and interventions conducted in psychotherapy are very personal and sensitive in nature. Federal law (HIPAA) requires that information shared in a counseling session be kept private, and should not be able to be heard by others. If in-home counseling is possible in the client's home, the client or caregiver/guardian must ensure the following:

- Therapy must be conducted in a space where the therapist and client conversations are not able to be heard by others in home. If their voices can be heard in another room, through a door, through a vent, etc., then another location must be chosen or soundproofing (including using a sound conditioner) be implemented.
- The area must not be disturbed by others in the home during sessions. It should not be in an area where another person would need to pass by or through for any reason. This may include a foyer area where others need to leave or answer the door, kitchens where others may come in to eat, etc.
- The area must be safe to do therapy. This includes having safe access for coming into the home and to the area where therapy will be performed.
- Clients and caregiver/guardian should treat the therapist with respect. Driving to a residence and doing in-home counseling is a service not provided by many therapists and agencies in the county. Eagle Quest is pleased to offer it when the agency can.

If these are not able to be arranged, clients must be seen for therapy at the agency office.

Safety in the Field

Before going into the field, all staff should have their own safety action plan. It should encompass what actions to take before going to a home visit and what preventive measures to utilize while in the field. *Staff should feel empowered to be able to reduce risk and to take appropriate actions if needed.*

Before a Home Visit

- Complete CPI certification training.
- Note any questions they may have after reviewing the intake materials (NIA, SPD, Safety Plan Map and Organizer, and/or Safety Plan).
- Ask questions about the current situation to ensure they have the most up-to-date information. Learn what they can about the client's and/or family's histories, learn if they have had prior encounters with the police, schools, or social services, determine if they have had negative interactions with agencies in the past. Find out if there is a history of mental illness in the family. Much of this information can be gleaned from intake documentation. Additional information may be obtained during the initial contact with DFS Worker.
- Make sure they have the correct contact information, correct address, and detailed directions to a new client's home.
- Ensure their schedule is current with appointments, so their supervisor knows where they are and when they expect a visit/session to end.
- Carefully consider the streets, neighborhoods, or areas where the families live. For example, wearing jewelry in known drug areas, isolated places, or high crime areas.
- Wear an Eagle Quest uniform shirt, and abide by Eagle Quest dress code.
- Dress to allow for ease of movement, including comfortable shoes. Remove hanging jewelry, religious or political symbols or anything that could be used as a weapon or increase agitation in a client.

- Travel with a cell phone that is charged, turned on, and preprogrammed to call 911 for assistance in any emergency or threatening situation.
- Make sure that their car is in good working order and that they have plenty of gas in it. They should also have a spare tire with a jack, a working horn, spare change, a flashlight, jumper cables, and a first aid kit.
- Be careful of what is posted on public social networking sites, especially regarding information that can disclose routine habits, and/or popular locations.

When Arriving at a Residence

- Drive by the residence first to see if things seem okay or if there is anything suspicious going on.
- Observe who is hanging around and what their general attitude is when pulling into a parking lot or neighborhood and make note of at least two (if possible) exits and entrances to the parking area.
- Park close to any lights if there is a chance of returning to their car before or after daylight.
- Back cars into a parking space, where applicable, so it is possible to exit quickly if needed.
- Park where their car can be seen from the residence whenever possible.
- Avoid parking directly in front of the home or residence.
- Remember that valuables can be an incentive for others to break into a car. Be careful about what is left on car seats or the dashboard. Keep personal items such as a purse or briefcase locked in the trunk of their car and only keep keys, a little money, and a phone on their person.
- Always keep car doors locked when away from the car or sitting in it.
- Walk with purpose and confidence after exiting car and going to the residence. Attitude is important. Remain aware of what and who is around. Be cautious of strangers. Be alert.

At the Residence

- Introduce themselves clearly, letting the family know who they are and why they are there.
- Ask the client/parent if there is anyone else in the house (besides people they see). Also, ask if anyone else is expected to come to the house during the time of the visit/session.
- Note the general layout, exits, and phones of the residence, and position themselves for an easy exit if necessary.
- Maintain appropriate boundaries.
- Remember to stay calm – never show a client they are scared. Always remain professional. Follow safety plan if they feel uncomfortable.

When Leaving the Residence

- Have their car keys in their hand as they approach their vehicle.
- Scan the area as they approach their car and always check the floor and backseat before getting in.

Trust your Instincts

If driving in an area that may have a higher rate of crime, etc. and activity near the client's home that is of concern is observed, drive a few blocks away. Then call supervisor to find out how to proceed. Staff should also call the client to check in so they are informed about staff whereabouts.

If one has a bad feeling about a situation, they should call their supervisor or the police. One should never go into a situation that they feel is unsafe. If one feels threatened in a home, they should leave immediately.

The best preparation will still not remove all threats of danger. Vigilance and situational awareness are imperative.

Prohibited Interventions

For Clinical staff and staff providing Rehabilitative Mental Health Services, the following techniques or interventions are not allowed:

- Shaming
- Disrespectful toward a client or family
- Making threats (contact with family etc.)
- Any other technique determined by Eagle Quest to cause pain, severe discomfort, or severe emotional distress to the individual are prohibited. All Eagle Quest direct care staff must sign a Discipline Agreement not to use physical punishment and agreeing not to consent to others' use of physical punishment with youth

Guidelines for Interventions

Eagle Quest requires uniform guidelines to all direct care staff concerning proper and improper disciplinary techniques, and to provide protection for the dignity and welfare of the youth involved. The aims of discipline are threefold:

1. To help the child accept his responsibility to other
2. To help the child realize that others also have responsibilities and privileges
3. To help the child accept the fact there are unpleasant and difficult things which everyone must do at times

Discipline, to be effective, must be fair, reasonable, consistent and related to the offense. It must be handled with kindness and understanding and administered in such a way as to help the child develop self-control and to assume responsibility for his own behavior.

Well-defined rules setting limits on behavior must be established and made known to each child. Basic household rules and expectations are outlined in the Youth Handbook which is provided to each youth upon admittance. Appropriate and timely remedial action must be taken when youth in foster care exhibit inappropriate behavior, are out of control or commit delinquent acts. The following are recommended behavior management techniques:

1. Informing the child in a simple and positive manner what conduct is expected.
2. Praising and recognizing a child who behaves in the expected manner.
3. Redirecting the child to a new or different activity.
4. Sitting with a child until he gains control of his behavior and can return to normal activities.
5. The use of a point system to recognize good behavior and create an incentive to improve inappropriate behavior.
6. Restriction to the child's room or other area and/or withholding privileges such as attending social gatherings or watching television.
7. Eagle Quest authorizes the use of Non-Violent Physical Crisis Interventions by trained adults for a child who is physically aggressive in order to protect oneself, the child or others from harm.

Prohibited Interventions

Any other technique determined by Eagle Quest to cause pain, severe discomfort, or severe emotional distress to the individual are prohibited. All Eagle Quest direct care staff must sign a Discipline Agreement not to use physical punishment and agreeing not to consent to others' use of physical punishment with youth placed in their care. The following are examples of unacceptable disciplinary techniques. This list is not exclusive. The staff shall not:

1. Subject a child to verbal abuse, humiliate the child, threaten the child or make derogatory remarks about the child or his family.
2. Threaten to subject or subject a child to pushing, punching, shaking, rough handling, force feeding, biting, hitting of any kind, including with an implement, isolation in a closed space, such as a closet or unlit or unventilated space, or other extreme discipline.
3. Threaten a child with the loss of love of any person.
4. Threaten a child with punishment by a deity.
5. Threaten to deny or deny food, shelter, medication or rest, or threaten to restrict or restrict the use of a toilet or other bathroom fixture as punishment.
6. Threaten to subject or subject a child to any form of punishment by other youth.
7. Threaten to subject or subject a child to excessive time out.
8. Threaten to wash or wash a child's mouth out with soap or detergent or threaten to tape or tape the mouth of a child.
9. Threaten to deprive or deprive a child of visits with significant others in the child's life as a form of punishment when the agency placing the child has identified the visitation as appropriate.
10. Threaten to withhold or withhold the allowance of a child provided by the agency which provides child welfare services.
11. The threat of or use of spanking as a form of discipline is prohibited.
12. Threaten to deprive or deprive a child of visits with significant others in the child's life as a form of punishment when the agency placing the child has identified the visitation as appropriate;
13. Threaten to withhold or withhold the allowance of a child provided by the agency which provides child welfare services or provided by the parent(s) of a child in custody of their family, and;
14. Subject a child to meaningless work as punishment, i.e. scrubbing the floor with a toothbrush, writing repetitive menial sentences, pulling weeds in a field of weeds excessive exercise, or other such similar activities.
15. Behavior controlling medication shall not be used as punishment, for the convenience of the Staff, as a substitute for a behavior plan, or in quantities that interfere with a youth's ability to function.



Victory Alliance
Las Vegas

SEP 26 2018

Victory Alliance LLC
222 S. Rainbow Blvd. Ste 107
Las Vegas, NV 89145
Phone: 702.912.5404
Fax: 702.786.6911
victoryallianceLasVegas@gmail.com

September 14, 2018

State of Nevada
Board of Examiners for Marriage and Family Therapists
and Clinical Professional Counselors
P.O. Box 370130
Las Vegas, NV 89137

Dear Board Members,

This letter is to outline proposal for a Victory Alliance LLC employee and CPC Intern, Angel Lash to provide in home counseling services as a necessary aspect of his job. Our intention in clearly outlining this plan for the Board's consideration and approval includes a justification for the need of in home counseling; a summarization of Angel's qualifications to provide in home counseling; and a clearly defined plan to ensure that Angel is safe and has immediate access to clinical support at all times while in a client's home.

Angel Lash was hired by Victory Alliance LLC in April 2016, as a therapist. Angel has received training regarding Victory Alliance LLC policies and procedures, safety issues, emergency protocols, the unique nature of in home therapy, and supervision requirements. She has experience working with clients of diverse cultural and ethnic backgrounds and is increasing knowledge and skill in assessment and diagnosis, treatment planning, mood disorders, abuse/neglect, trauma, and evidence based therapeutic interventions.

The nature of Angel's proposed work will require both anticipated, routine appointments and unanticipated crisis responses. Our plan, to ensure appropriate supervision, covers both scenarios. We have set up a chain of supervisors, identifying who she will be in contact first, second, and third if each prior supervisor is unavailable. Angel's first, and most frequent, point of contact, will be with Laura Sutton, PsyD, MFT, who is a Board approved Primary Supervisor to Angel. If Ms. Sutton is unavailable, Angel will make contact with Alexandra LaPlante, LCSW, Clinical Director and Owner of Victory Alliance LLC. If Ms. LaPlante is unavailable, either by planned absence or otherwise, Angel will make contact with Bruce Mufson, LCSW, intern supervisor at Victory Alliance LLC. We, her supervision team, anticipate that it will be a rare instance, if ever, that she will need to move through all three supervisors.

Below are the safety steps taken for in home counseling for Victory Alliance LLC.

Victory Alliance
Behavioral and Mental Health Counseling and Rehabilitative Services for Families and Individuals

Plan of Supervision for Crisis Appointments:

- Check in with a clinical supervisor prior to visiting the client's home to ensure supervisor awareness of whereabouts and to ensure the supervisor can be available if needed during the appointments.
- Do not go into the client's home until a clinical supervisor has been contacted. If needed crisis counseling can still be provided in a timely manner, by meeting the client at the office.
- Upon leaving the home visit, check in again with a clinical supervisor.

Before A Visit:

- Let the owner or clinical supervisor know where you are going.
- Review intake information for possible concerns of violence or hazards.
- Wear comfortable shoes.
- Bring cell phone.

Once at the home:

- Park so that it is possible to make a quick exit.
- Lock valuables in the trunk of the car.
- Be aware of the exits.
- Keep yourself between the client and the door.
- Never enter a client's bedroom.
- Respect the client's home and their emotions.
- Use common sense and be cautious.
- Leave if feeling threatened:
 - If feeling threatened or a critical incident does occur, contact the police then one of the owners or clinical supervisor immediately.
 - Once notifying owners, please fill out an information only note.

Our hope is that the Board will recognize the diligence with which this plan has been created and the commitment of each signee of this letter to ensure the plan is implemented as intended. We eagerly await your approval.

Sincerely,

Alexandra R. LaPlante, LCSW

Alexandra LaPlante, LCSW

Laura Sutton, PsyD, MFT

Laura Sutton, PsyD, MFT

Angel Lash, CPC-Intern

Angel Lash, CPC Intern

Victory Alliance

Behavioral and Mental Health Counseling and Rehabilitative Services for Families and Individuals



State of Nevada
Board of Examiners for Marriage & Family Therapists
and Clinical Professional Counselors
P.O. Box 376180 • Las Vegas, NV 89134 0180

RICHARD WHITLEY, MS
Director

ROSS E. ARMSTRONG
Administrator

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF CHILD AND FAMILY SERVICES
4538 W. Craig Road, Suite 290
North Las Vegas, NV 89032
Telephone (702) 486-5610 • Fax (702) 486-5630
dcfs.nv.gov

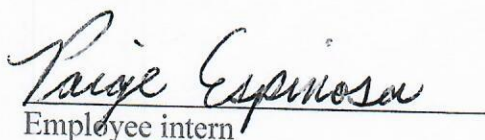
To Nevada State Board of Examiners,

This document is being submitted to the Nevada State Licensing Board for Marriage and Family Therapists and Clinical Professional Counselors on behalf of Paige Espinosa, MFT-I (License Number – MI0674). Paige was hired by the State of Nevada Division of Child and Family Services (DCFS) as a Mental Health Counselor working in the Children's Mental Health Mobile Crisis Response Team. Paige was hired to provide therapeutic services on site and in the community under the behavioral health guidelines of Nevada State Medicaid. In order to provide effective treatment for those clients who have barriers (disabled, transportation, or caregiving issues) and as a provider type 14 for the State of Nevada, the division provides client centered treatment at a location conducive to individualized therapeutic treatment needs.

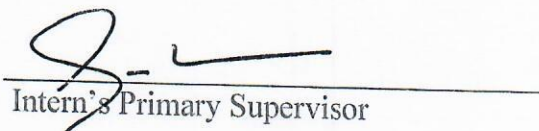
Attached is a detailed In-Community Therapy Safety and Procedures Plan signed by all relevant parties.

The Division of Child and Family Services and Paige respectfully request that you approve her to provide community-based treatment through the State of Nevada and under her Marriage and Family Therapy Intern license.

Respectfully,


Employee intern


Employee's DCFS agency supervisor


Intern's Primary Supervisor

In-Community Therapy Safety and Procedures Plan

The State of Nevada Mobile Crisis Response Team (MCRT) provides crisis intervention, assessment, and stabilization services to clients in the community who are experiencing a mental health crisis. The safety and security of clients as well as team members is of primary focus in all interactions. The following procedures and guidelines have been developed to ensure the safety and privacy of all parties.

In-Home Therapy Visits:

Ensuring client and employee safety begins at employing competent well trained staff. All clinicians work under the Mental Health Counselor classification through the State of Nevada and in compliance with the regulations of the Nevada Board of Examiners for Marriage and Family Therapists and Clinical Professional Counselors or the State of Nevada Board of Examiners for Social Workers. Additionally, Mobile Crisis Response clinicians operate in accordance with the program guidelines defined in the MCRT Procedures Manual.

Assessment of safety begins at the first interaction and continues throughout each contact. Upon receiving a crisis response call the call taker begins to assess for safety concerns. Information is gathered about the residence (such as location, condition of the home, security concerns, weapons present, pets), family (number living in home, number present in home), and presenting problem(s). All information is then staffed with a program supervisor who is a fully licensed therapist. After determining suitability of the response and assessing the safety concerns, the program supervisor will determine which team (if any) will respond to the call. If safety concerns are present in the community setting, clients may be asked to make an appointment in office.

The Mobile Crisis Response Team work in teams of two: one clinician and one psychiatric case worker. Upon arrival to the home/response site teams will assess for any safety and privacy concerns at the site. Clinicians and psychiatric case workers complete all intake paperwork including informed consent forms and authorization for treatment forms. During the assessment clinicians evaluate safety concerns using the evidence-based and empirically validated Nevada Crisis Assessment Tool. All clinicians using the Nevada Crisis Assessment tool receive formal training on how to administer and score the assessment.

Clinician teams are required to contact their on-call program supervisor to review the case prior to making recommendations for course of treatment. During this call, the supervisor and clinician will assess if the client represents an acute threat to themselves or to others and what course of treatment is best suited.

Formal written safety plans are completed with the family and client for any clients not admitted for hospitalization. All response paperwork is required to be complete and turned in to the intake coordinator within 48 hours so that it can be entered into the system and sent to the billing department.

Training Specific to treatment delivery

The State of Nevada Division of Child and Family Services educates clinicians to deliver/administer empirically sound evidence-based assessments and treatment interventions. All clinicians on the Mobile Crisis Response Team must complete training in Trauma-Focused Cognitive Behavioral Therapy prior to their first interaction with clients. Additional trainings in treatment planning, suicide assessment and safety planning, solution focused therapy, motivational interviewing, and cultural diversity are provided by the agency.

The Division of Child and Family Services recognizes that community-based treatment involves a unique set of safety and confidentiality concerns, for that reason, all Mobile Crisis clinicians and psychiatric case workers are provided training in safety holds and breakaway techniques, situational assessment of safety, and HIPPA and Confidentiality Awareness Training. All clinicians are required to maintain adult, child, and infant CPR and first aid certification.

Group supervision occurs daily in the Mobile Crisis Response Team. Team members attend a daily meeting to discuss their cases with both Program Supervisors. In addition to the daily supervision meetings, clinicians working towards full licensure are assigned a board approved licensed primary and secondary supervisor that they meet with individually each week. Additionally, clinicians have access to their supervisors as needed. During supervision clinicians are encouraged to identify the impact of the therapy setting on the treatment of the client and course of therapy.

Emergency Procedures

All clinicians must follow the emergency and safety procedures outlined in the MCRT Procedures Manual. MCRT members are required to provide their weekly scheduled appointments on a shared calendar which can be accessed by primary supervisors, secondary supervisors, and DCFS program supervisors. All appointments include the location of service, session length, and telephone number of the client.

All MCRT members are provided a mobile phone to ensure that contact can be made between team members and supervisors at any time while out in the community. Supervisors are available to assist if an emergency arises or to provide clinical guidance. The MCRT has one supervisor on call at all times for after-hours support.

As outlined in the MCRT Procedures Manual, if an emergency arises the clinician and psychiatric case worker are to first ensure that they are safe and the proper authorities are called (911) and then report the incident to the Mobile Crisis Program Supervisor for further direction. If at any time during the course of treatment clinicians determine that the client is a threat to self or others, the clinician is to call their supervisor and discuss the proper course of action to take. Clinicians are to discuss non-emergency safety concerns with their supervisor as they arise to determine the course of action needed.

Demonstrate awareness and agreement with involved parties

Agreement:

It is agreed that supervisee and supervisors have agreed to the terms of the In-Community Therapy Safety and Procedures Plan. All parties listed below agree that they have been fully informed of the procedures outlined in this agreement, have had time to review the agreement and ask questions, and have received clarification and answers to those questions.

Raige Espinosa
Employee intern

[Signature]
Intern's Primary Supervisor

[Signature]
Employee's DCFS agency supervisor

AGENDA ITEM #6

Yu-Jung (Celine) Liu, MFT Intern petitions the board for consideration of an additional renewal of her internship due to extenuation circumstances. Her current internship will exhaust in February of 2019

(For possible action)

August 22, 2018

The Board of Marriage and Family Therapist and
Clinical Professional Counselor Examiners
P.O. Box 370130
Las Vegas, NV 89137-0130

To whom it may concern,

My name is Yu-Jung (Celine) Liu. I am a MFT state intern (MI0412) under the primary supervision of Marj Buchholtz-Castronova. My internship was granted on February 15, 2013. It was renewed once in 2016. I am here to request for an extension of the current MFT state internship.

Please kindly take the following reasons into consideration for my request:

1. I was on maternity leave from May 8, 2014 to August 31, 2016 to take care my two young aged children. Please see attached letters (addressed by my primary supervisor Marj Buchholz-Castronova on November 19, 2013 and June 17, 2014) and copies of my six-month reports for more information.
2. After returning to work I was diagnosed with Lupus and Mixed Connective Tissue Disease in 2017. These diseases gave me frequent fatigue and other physical symptoms. In order to maintain physical wellness I had to decrease workload.

I have tremendous passion in the field of marriage and family therapy. With my unique cultural background and bilingual skills, I was able to serve a handful of diverse clients in my practice. I hope that you will grant me an extension before the expiration of my current intern license, so I could continue working with clients and serving the local community.

If you have any questions, please feel free to contact me at 702-465-3363 or celineyliu@gmail.com. Thank you!

Sincerely,



Yujung Celine Liu, M.S. MFT-intern (#MI0412)

August 23, 2018

Nevada Board of Marriage and Family Therapy &
Clinical Professional Counselor Examiners
P.O. Box 370130
Las Vegas, NV 89137 – 0130

I am writing on behalf of Yu-Jung (Celine) Liu, MFTI0412, who is one of my primary interns in reference to needing an additional extension past her six years.

In November of 2013 requesting a 3 a leave from seeing clients as she was on Maternity leave (December 23, 2013 until March 2014 for 3 months) then I wrote the board again in June 2014 to notify the board that Celine would be on maternity leave and not seeing clients from May 8, 2014 to August 31, 2015 (which she actually extended to August of 2016 for a total of 16 month. This means she took off 19 months during her six years.

In June 2017 Celine told me that she had to slow her pace of seeing clients as she had been diagnosed with a chronic illness. In addition, Celine is Taiwanese and has also consistently gone back to Taiwan each year.

Due to these extenuating circumstances I am willing to continue to supervise Celine as her primary supervisor.

Sincerely,

Marj Castronova, PhD
NV LMFT #0832
AAMFT Approved Supervisor
702-480-4171

AGENDA ITEM #7

Brian Chapman petitions the board to approve his MFT internship under exigent and extenuating circumstances

(For discussion/possible action)

To the MFT Board

I am requesting to be put onto the agenda for the board meeting coming up in November 16th. The subject is requesting state reciprocity from California where I am listed as an Intern. The request is to grant me internship here in Nevada pursuant to NAC 641.085, section 8 (b) which states that it is within the boards purview to grant interns from another state internship in Nevada as opposed to having to sending them back to college to take more courses.

In brief I have already submitted all of my paperwork back in March of this year, the board reviewed my education and responded in June that I needed one more practicum course which I completed in the second week of October of this year as was requested. I have learned as of this date the requirements have changed, which of course makes it unfair since it becomes a moving target. This puts my pending employment in jeopardy since their need is within the next 30 days.

In terms of experience I have completed another course of hours doing individual therapy, course work, supervision and reports during this last practicum, all post internship.

In addition, I have worked as a counselor at a residential treatment center working with juvenile offenders for 3 years prior to my internship and worked out of the chaplain's office at Stanford Hospital with responsibility in trauma and cardiac care providing spiritual care and relationship therapy.

I also have worked for thirty years providing counseling albeit in another industry and discipline, utilizing my ability to listen, diagnose, and goal set.

Lastly, I have taken my formal test in California which is required to continue as an intern in ethics and law passed in March of this year.

Brian M Chapman

OFFICIAL TRANSCRIPT

CALIFORNIA SOUTHERN UNIVERSITY

3330 Harbor Blvd, Costa Mesa, California 92626
T: 714.882.7836 / 800.477.2254 ext. 4236 F: 714.882.7866
calsouthern.edu

OCT 31 2018

University Number: 1641502658

Address: 4885 Mountainshire Rd
Reno, NV 89519
USA

Name: Brian Chapman

Official Transcript

Brian Chapman
Registrar

California Southern University

Degree Program: Course by Course Graduate

Date of Admission: 6/18/2018

Basis of Admissions:

Total Credits Accepted in Transfer: 0

Credits Accepted in Transfer		Credits	
n/a		0	
Course Title	Number	Credits	Grade Points CGPA
10/22/2018 Practicum III	MFT 86706A	3	S .00
Total Credits Earned through CalSouthern:		3	.00
Total Credits Earned Toward Degree:		3	

Degree Awarded: No Degree Awarded

Date Awarded:

Degree Program: Master of Arts in Psychology

Date of Admission: 4/11/2011

Basis of Admissions: BA - Sonoma State University, Rohnert Park, CA 1984

Total Credits Accepted in Transfer: 0

Credits Accepted in Transfer		Credits	
n/a		0	
Course Title	Number	Credits	Grade Points CGPA
8/26/2011 Counseling Theories and Strategies	PSY 6502	3	A 12.00
10/24/2011 Ethical Issues in Marriage, Family and Child Therapy	MFT 6504	2	A 8.00
1/13/2012 Human Sexuality	MFT 86507	1	A 4.00
1/21/2012 Theories of Human Development and Functioning	PSY 86505	3	A 12.00
2/27/2012 Psychopathology	PSY 86506	3	A 12.00
5/12/2012 Cross Cultural Mores and Values	PSY 86508	3	A 12.00
7/1/2012 Psychology of Marriage and Family Systems	PSY 86509	3	A 12.00
7/19/2012 Child & Adolescent Psychology	MFT 86510	3	A 12.00
8/27/2012 Family Systems Theory	PSY 86532	3	A 12.00
9/15/2012 Alcoholism/Chemical Dependency	PSY 86511	3	A 12.00
12/6/2012 Group Psychology	PSY 86512	3	A 12.00
12/29/2012 Psychological Tests and Measurements	MFT 86513	3	A 12.00
2/25/2013 Psychopharmacology	MFT 86700	2	A 8.00
3/10/2013 Psychology of Violence	MFT 86328	2	A 8.00
6/4/2013 Psychology of Aging	PSY 86517	3	A 12.00
1/25/2014 Practicum I	MFT 86704	3	A 12.00
5/31/2014 Research Methods and Statistics	MFT 86900	3	A- 10.98
1/29/2015 Child Abuse Reporting	MFT 86510.1	1	A 4.00
2/18/2015 Practicum II	MFT 86705	3	W .00
7/27/2015 Practicum II	MFT 86705	3	A 12.00
11/22/2016 Ethical Issues in Marriage, Family and Child Therapy II	MFT 86504A	1	A- 3.66
Total Credits Earned through CalSouthern:		51	202.64 3.97
Total Credits Earned Toward Degree:		51	

Degree Awarded: Master of Arts in Psychology

Date Awarded: 11/22/2016

Honors: MAGNA CUM LAUDE

Emphasis: Marriage and Family Therapy

Date Printed: 10/23/2018

Patent #5,636,874



TouchSafe®

*****END OF TRANSCRIPT*****END OF TRANSCRIPT*****

THIS INFORMATION IS CONFIDENTIAL AS DEFINED IN PUBLIC LAW 93-380.
IT IS NOT TO BE GIVEN TO A THIRD PARTY WITHOUT EXPRESS WRITTEN CONSENT FROM THE STUDENT.
TRANSCRIPT IS UNOFFICIAL IF SEAL ON ENVELOPE IS BROKEN.

RAISED SEAL NOT REQUIRED

Patent #5,772,248



TamperSafe®

OCT 31 2018

10/30/2018

State of Nevada
The Board of Examiners for Marriage and Family Therapist
7324 West Cheyenne Suite 9
Las Vegas , NV 89129

Enclosed please find my official transcript and unofficial transcript showing that I have completed a 3 unit course of a Supervised Clinical Practicum as was requested by the board .

Brian Chapman
bchap1@aol.com
775-722-1326



State of Nevada

The Board of Examiners for Marriage and Family Therapists
and Clinical Professional Counselors

P.O. Box 370130
Las Vegas, NV 89137-0130
(702) 486-7388 Fax: (702) 486-7258

OCT 31 2018

Jake Wiskerchen., President
Roberta Vande Voort, Secretary/Treasurer
Erik Schoen, Member
Hal Taylor, J.D., Member
John Nixon, Ed.D, Member
Marta Wilson, Member
Adrienne O'Neal, Member

June 14, 2018

TELECOPIED TO: Brian Chapman

Dear Mr. Chapman,

After careful review of your transcripts, a committee of the Board has determined that your application file is incomplete. You will need to complete one or more of the following:

- ☐ Your file needs an Official ☐ Undergraduate and/or ☐ Graduate Transcript (s ☐
☒ You will need to complete additional university credit hours in the following area(s):

NOTE: PLEASE DO NOT FAX THIS INFORMATION!

# classes	Areas of Study
	Human Development - Developmental Studies, Personality Theory, Basic Human Relations Skills, Psychopathology, Concepts of Psychotherapy, Human Sexuality, etc. <input type="checkbox"/> Please provide syllabus documentation for course(s):
	Marital & Family Systems - Family Development, Communication Theories, System Theory, etc. <input type="checkbox"/> Please provide syllabus documentation for course(s):
	Marital & Family Therapy - Couple Therapy, Structural Family Therapy, Strategic Family Therapy, Sex Therapy, etc.
	Ethics & Legal Issues in MFT - Ethics, professional Organizations, Family Law, Legislation, etc. <input type="checkbox"/> Please provide syllabus documentation for course(s):
✓	Supervised Clinical Practice in MFT - Practicum, Individual Therapy, Family Therapy, etc. Short 1 course-You will need one course for 3 credit hours here. Please see NAC 641A.085
	Diagnosis/Assessment - DSM IV, etc. <input type="checkbox"/> Please provide syllabus documentation showing DSM-IV training for course(s):
	Research - Research Design, Statistics, etc. <input type="checkbox"/> Please provide syllabus documentation for course(s):
	Substance Abuse -

Should you have any questions, please feel free to contact this office. Thank you.

Sincerely,

Sherry Rodriguez
Office Administration



OCT 31 2018

 Sign
 Degree Program: Course by Course Graduate
 School: CC - Course by Course
 Enrolled: 6/18/2018

Welcome, Brian Chapman

Today is Tuesday, October 30, 2018. The time at CalSouthern is 8:57 /

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 Degree Program: **Course by Course Graduate**
 Catalog Version: April 2017

Course Summary	
Degree Program: 3	Attempted: 3
Transferred: 0	Completed: 3
Units Required: 3	GPA: 0.00

Smtr	Course	Units	Mentor	Start	End	Exten. 1	Exten. 2	Completed	Grade	Program Code
1	MFT 86706A - Practicum III	3	Kimberly Western	7/1/2018	10/21/2018			10/22/2018	S	CrsXCrsG
	MFT 86504A - Ethical Issues in Marriage, Family...	1	Nicole Johnson-Nguyen	8/1/2016	11/21/2016			11/22/2016	A-	MA
	MFT 86705 - Practicum II	3	Nicole Johnson-Nguyen	4/1/2015	7/22/2015			7/27/2015	A	MA
	MFT 86510.1 - Child Abuse Reporting	1	Victoria Bloom	10/1/2014	1/21/2015			1/29/2015	A	MA
	MFT 86900 - Research Methods and Statistics	3	Jonathan Rich	2/1/2014	5/24/2014			5/31/2014	A-	MA
	MFT 86704 - Practicum I	3	Christine Tanimura	8/1/2013	11/21/2013	12/22/2013	1/21/2014	1/25/2014	A	MA
	PSY 86517 - Psychology of Aging	3	Sherri Muchnick	4/1/2013	7/22/2013			6/4/2013	A	MA
	MFT 86528 - Psychology of Violence	2	Barbara Lackey	12/1/2012	3/23/2013			3/10/2013	A	MA
	MFT 86700 - Psychopharmacology	2	Linda Salvucci	1/1/2013	2/26/2013			2/25/2013	A	MA
	MFT 86513 - Psychological Tests and Measurements	3	Victoria Bloom	9/1/2012	12/22/2012			12/29/2012	A	MA
	PSY 86512 - Group Psychology	3	Wendy Nickerson	9/1/2012	12/22/2012			12/6/2012	A	MA
	PSY 86511 - Alcoholism/Chemical Dependency	3	Barbara Lackey	7/1/2012	10/21/2012			9/15/2012	A	MA
	PSY 86532 - Family Systems Theory	3	Sherri Muchnick	7/1/2012	10/21/2012			8/27/2012	A	MA
	MFT 86510 - Child & Adolescent Psychology	3	Patrick McKiernan	5/1/2012	8/21/2012			7/19/2012	A	MA
	PSY 86509 - Psychology of Marriage and Family S...	3	Barbara Lackey	5/1/2012	8/21/2012			7/1/2012	A	MA
	PSY 86508 - Cross Cultural Mores and Values	3	Kate Andrews	3/1/2012	6/21/2012			5/12/2012	A	MA
	PSY 86506 - Psychopathology	3	Sherri Muchnick	1/1/2012	2/26/2012			2/27/2012	A	MA
	MFT 86507 - Human Sexuality	1	Suzanne Hunter	12/1/2011	1/26/2012			1/13/2012	A	MA
	PSY 86505 - Theories of Human Development and F...	3	Benton Allen	10/1/2011	1/21/2012			1/21/2012	A	MA
	MFT 6504 - Ethical Issues in Marriage, Family a...	2	Victoria Bloom	7/1/2011	10/21/2011			10/24/2011	A	MA
	PSY 6502 - Counseling Theories and Strategies	3	Benton Allen	5/1/2011	8/21/2011			8/26/2011	A	MA

* To access any current or completed course, click on the course link above.

Grade Report

STATE OF NEVADA BOARD OF EXAMINERS-MFT & CPC REQUIRED MFT GRADUATE DEGREE TRAINING WORKSHEET

NR

Applicant Name: Brian Chapman Licensed: Y/N Application Reviewed by: John Nixon, Edd, CPC Date: 5/31/18

Graduate Degree/Institution: CALIFORNIA SOUTHERN UNIVERSITY-MA-Psychology 11/22/2016: Regionally Accredited: Yes / No *WASC

Undergraduate Degree/Institution: SONOMA STATE UNIVERSITY-BA-Political Science 12/84 Regionally Accredited: Yes / No *WASC

FBI: ✓ State: ✓

AREA OF STUDY	Min. Number of Courses	Hours (Sem/Quar)	Meet Area Requirement?
HUMAN DEVELOPMENT (Developmental Studies, Personality Theory, Basic Human Relations Skills, Psychopathology, Concepts of Psychotherapy, Human Sexuality, etc.)	2	6/8	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
1. Theories of Human Development	1	3	
2. Human Sexuality	1	1	
3. Psychology of Aging	1	3	
MARITAL & FAMILY SYSTEMS (Family Development, Communications Theories, Systems Theory, etc.)	2	6/8	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
1. Family Systems Theory	1	3	
2. Psychology of Marriage and Family Systems	1	3	
MARITAL & FAMILY THERAPY (Couple Therapy, Structural Family Therapy, Strategic Family Therapy, Sex Therapy, etc.)	3	9/12	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
1. Counseling Theories and Strategies	1	3	
2. Child and Adolescent Psychology	1	3	
3. Group Psychology Psychology of Violence	1	3	
ETHICAL and LEGAL ISSUES IN MFT (Ethics, Professional Organizations, Family Law, Legislation, etc.)	1	3/4	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
1. Ethical Issues in MFT	1	2	
2. Ethical Issues in MFT II	1	1	
SUPERVISED CLINICAL PRACTICE IN MFT (Practicum, Individual Therapy, Family Therapy, and Supervised Experience with Clients etc.)	3	9/12	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
1. Practicum I	1	3	
2. Practicum II	1	3	
3. 25 hours individual therapy	1	3	
DIAGNOSIS/ASSESSMENT (including the use of the Diagnostic and Statistical Manual)	1	3/4	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
1. Psychological Tests and Measurements	1	3	
RESEARCH (Research Design, Statistics, etc.)	1	3/4	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
1. Research Methods and Statistics	1	3	
ABUSE OF ALCOHOL OR CONTROLLED SUBSTANCES (Academic Course, Certified Training from a State Bureau or Organization, etc.)	1	3/4	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
1. Alcoholism and Chemical Dependency	1	3	
2. Psychopharmacology	1	3	

*in the current course catalog
**credit may not be assigned or assumed for anything not on transcript

AGENDA ITEM #8

Brandon Lane, CPC

Petitions the board to become a primary supervisor. Previously
tabled agenda item from October 19, 2018 meeting

(For discussion/possible action)

BRANDON LANE, LCPC
2810 W. CHARLESTON BLVD. STE. 77, LAS VEGAS, NV 89102

September 21, 2018

To whom it may concern,

I would like to pursue becoming a primary supervisor for licensed interns in the State of Nevada. Since 2014, I have been an onsite supervisor. In 2015, I was approved as an onsite supervisor for students. In 2016, I was approved as a secondary supervisor for licensed interns. Since my incident in 2012, I have become more knowledgeable of the State regulations as well as the ACA code of ethics to be able to practice in an ethical manner. I complete ethics CEU's yearly as part of my required CEU's to maintain licensure as well as clinical supervision CEU's that are not required. I have received the ACS certification from the National Board for Certified Counselors. I went through an intense ethics review with them and after 6 months, I was approved. I have also met the requirements outlined by the board to be a primary supervisor. I would like to be given the opportunity to give back to the profession by helping guide licensed interns to become licensed therapists. I feel that I follow ethical and legal guidelines in daily practice. I understand how important it is to follow the ethical standards that have been put in place.


My lack of knowledge and experience when I was an Intern is no excuse, I understand that I am responsible for my own behavior, regardless of how others are practicing. I understand how important it is to not misrepresent myself. NRS 641A.430 states that it is unlawful to use certain terms without license. This is also listed in the ACA code of ethics section C.4.a, accurate representation. My main priority as a therapist/counselor, is to do no harm to clients. I never had any intention of causing harm to clients or other professionals in the community. This behavior put my professional beliefs into question as well as my personal beliefs and ethics. I do not want to be looked at as someone who is unethical. I want colleagues and clients to look at me as a therapist that is responsible, ethical,

BRANDON LANE, LCPC

2810 W. CHARLESTON BLVD. STE. 77, LAS VEGAS, NV 89102

and looking out for the client's best interest and the counseling profession. I understand that I do not know everything and it essential that I consult with colleagues and board members that have more experience and knowledge. I will ensure that I follow all ethical guidelines and help licensed interns do the same.

Sincerely,

A handwritten signature in cursive script that reads "Brandon Lane, M.S., LCPC".

Brandon Lane, M.S., ACS, LCPC



State of Nevada
The Board of Examiners for Marriage and Family Therapists
and Clinical Professional Counselors

P.O. Box 370130
Las Vegas, NV 89137-0130
(702) 486-7388 Fax: (702) 486-7258

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Suzanne Cram, Member

June 20, 2017

TELECOPIED TO:

Brandon Lane
[REDACTED]
[REDACTED]

Dear Brandon Lane,

Congratulations! On June 16, 2017, the Board considered and approved your application to provide Secondary Supervision to Clinical Professional Counselor Interns ONLY. Pursuant to NAC 641A.178, you may provide Secondary Supervision to up to ten (10) interns at one time, unless otherwise approved by the Board. Your Intern will need to accumulate at least 40 hours of Secondary Supervision during the course of their internship. Please be familiar with the Intern's Internship Proposal & Primary Supervisor Contract which may be provided to you by the Intern and the Secondary Supervisor Contract. This form will need to be completed entirely, before or after the internship has commenced. The Internship may be initially approved without it.

Please be diligent when signing off by being familiar with the intern's Six-Month Report Form the Secondary Supervisors Form to be submitted with the intern's Six-Month Reporting Primary Form. The intern may begin accumulating hours immediately. However, Secondary Supervision hours will not be official until the Board has approved the Secondary Supervision. The Secondary Supervisor Contract must be submitted for approval as soon as possible.

At the end of the internship, also be sure to submit a final Form #2 or #4 even if it has not been six months.

- You may assist your Intern by reminding them to submit six month reports on time.
- You may assist your Intern by reminding them to have a licensed Mental Health Professional on-site where they practice.
- You may assist your Intern by reminding them to inform clients of Internship status.
- You may assist your Intern in reminding them of the Internship Expiration Date.

Thank you.

Sincerely,

Quinn Kennedy
Interim Executive Director



NEVADA STATE BOARD OF EXAMINERS FOR
MARRIAGE & FAMILY THERAPISTS AND
CLINICAL PROFESSIONAL COUNSELORS

JUL 16 2018

PO Box 370130
Las Vegas, Nevada 89137
Office: (702) 486-7388
FAX: (702) 486-7258

PRIMARY SUPERVISOR APPLICATION

Brandon Lane

Applicant's name (print)

CP0077 (6/7/2013)

License Number

Brandon Lane

Business/Agency (if applicable)

brandonpc.lv@gmail.com

Email

2810 W. Charleston Blvd. STE 77

Address

(702) 706-8096

Phone Number

Las Vegas

City

NV

State

89102

Zip

(702) 885-7904

Cell Phone Number

Pursuant to NAC 641A.182, please check all that apply:

- ☐ Transcript showing at least one 45-hour graduate-level supervision course taught by an instructor deemed appropriate by the Board

OR:

☒ A certificate of a professional training program as evidence of supervision taught by an instructor deemed appropriate by the Board, which is provided by the American Association for Marriage and Family Therapy or the National Board for Certified Counselors **AND:**

- ☐ Evidence of 25 hours of supervisory experience (via signature below) **OR:**
- ☐ A copy of a Mentorship Agreement signed by the Mentor and the Mentee supervisor(s) entering the training relationship.

In lieu of the above, please check all that apply:

- ☐ A copy of "Approved Supervisor" or "Supervisor Candidate" certificate from AAMFT **OR:**
- ☒ A copy of "Approved Clinical Supervisor" certificate from the NBCC.

My signature below affirms that I understand and will comply with all provision of NAC 641A.178

Supervisor Candidate Name (Print)

Signature

Date

Brandon Lane, ACS, LCPC

Brandon Lane, ACS, LCPC

7/16/18

I attest that I have mentored, or will mentor, the above-named individual in 25 hours of supervision.

Mentor Name (Print)

Signature

Date

☒ I waive the 21 working days notice required by NRS 241.033 and agree that the Board of Examiners for Marriage and Family Therapy and Clinical Professional Counseling may consider my request at its next scheduled Board Meeting.

Brandon Lane
[Applicant]

[Mentor]

Center for Credentialing & Education, Inc.

hereby certifies that

Brandon S Lane

has successfully met professional supervision standards
established by CCE and in so doing has earned recognition as an:

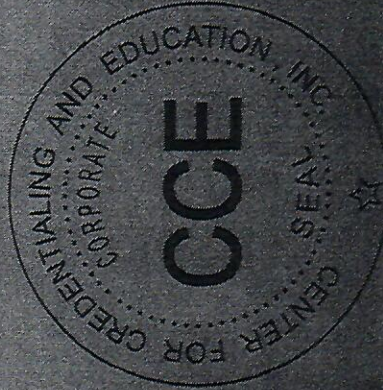
Approved Clinical Supervisor (ACS)

2760

Certificate Number

06/20/2018

Certificate Date




Margaret L. Bloom

Board Chair, Center for Credentialing & Education

06/30/2023

Expiration Date

Skip to



State of Nevada Board of Examiners

for Marriage and Family Therapists & Clinical Professional Counselors

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Services

MFT Qualifications

CPC Qualifications

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CPC Licenses Available

MFT Internship

CPC Internship

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Change of Address

Complaint Process

Continuing Education

Disciplinary Actions

License Renewal

Mailing Lists

Seminars

Sign Up for Email

Notification of Regulation

Changes

Verification of License

Form 6

DISCIPLINARY ACTIONS

Christensen, Ronald

#	Complaint Number	Name	MI	Last	License No.	Date
1	[REDACTED]					
	Basis for Action:		Action:			
	[REDACTED]					

Lane, Brandon

#	Complaint Number	Name	MI	Last	License No.	Date
2	NV12MFT010, NV12MFT011	Brandon		Lane	#MI0143	06/07/2013
	Basis for Action:		Action:			
	NRS 641A.2874(2)		Public Reprimand, Administrative Fine (\$5,000)			
	NRS 641A.310(3),(6),(7)and/or(8),					
	NAC 641A.196(1)and/or(3),					
	NAC 641A.243(1), NAC 641A.258(1)					
	AAMFT Code of Ethics Rules 8.4 and 8.6					

Request ADA document remediation for individuals using assistive technology devices

Home	Rules & Regs	Services	Application Processing
State of Nevada	Assembly Bill (AB) 93	MFT Qualifications	Academic Review
Nevada Legislature	(pdf)	CPC Qualifications	Licensure Process
	Nevada Revised	MFT Licenses	Exam/Test Schedule
	Statutes &	Available	
	Administrative Code	CPC Licenses	Internship
	Policies & Procedures	Available	Intern Application
	Adopted Regulations	MFT Internship	Process Flow Chart &
	(pdf)	CPC Internship	MFT Internship
	Adopted & Proposed	Interim Permit	CPC Internship
	Regulations	Change of Address	Internship
	Bill Draft Requests	Complaint Process	Independence
	Sign Up for Email	Continuing Education	Internship Final Report
	Notification of	Disciplinary Actions	Primary Supervision
	Regulation Changes	License Renewal	Secondary Supervision
		Mailing Lists	Graduate Program
		Seminars	Submittal
			Exam
			Internship Extensions

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Section 508
WCAG 2.0
ADA
Compliance
In Progress