

Richard Salem
UW-Whitewater
re: AB 517
(414) 472-1133

Representative Clifford Otte
January 16, 1998
Page 2

notes was not legally justified. He told the jury they could presume the notes would have been unfavorable to the officer. The case eventually went to the U.S. Supreme Court.

The Supreme Court ruled in favor of the officer. The principle that applies to Wisconsin's Statutes is that the federal privilege extends to communications between licensed social workers and their clients. Under present law social workers are not licensed. We do not want that challenge to happen to any of our members. AB517 will assure that that statute will not be challenged. If it is not changed, our members will seek counseling where the privilege of confidentiality is guaranteed.

The MPA prays that you and the members of your committee will recommend AB517 for passage as soon as possible. Thank you for your consideration.

Sincerely,

MILWAUKEE POLICE ASSOCIATION



Bradley DeBraska
President
Local #21, IUPA, AFL-CIO

BD/cmm

c: Representatives Black, Hasenohrl, Johnsrud, M. Lehman, Ott,
Urban and Williams and Senators Farrow and Grobschmidt

Milwaukee POLICE Association

Local #21 IUPA-AFL-CIO



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January 16, 1998

Representative Clifford Otte
Chair, Consumer Affairs Committee
109 West, State Capitol
P.O. Box 8953
Madison, WI 53708-8953

Dear Representative Otte:

It has come to the attention of the Milwaukee Police Association (MPA) that AB517, Social Workers, Marriage and Family Therapist, and Professional Counselor licensure bill, has had a hearing before your committee. I am writing to urge you to move on this bill before it becomes impossible to move through both houses.

At your public hearing, Representative Michael Lehman asked one of the testifiers whether she ever had been challenged on the confidentiality between her and her clients. She said no. While she may not have clients who worked in law enforcement, I want you to know that it is a concern to us. Every time a tragedy happens on the job, the shooting of an officer or of a suspect, the officers involved are given the opportunity to receive counseling and therapy. It is very important that this service is not only available but is free of any intimidating aspects. The lack of protection for the confidentiality of counseling results in avoidance.

Our association participated in the *Jaffee v Redmond* - U.S. Supreme Court decision with an amicus brief. The case began when an on-duty police officer working in the Village of Hoffman Estates in Illinois, shot and killed a suspect. The officer subsequently engaged in six months of psychotherapy with a licensed clinical social worker employed by the village. The family of the deceased suspect sued the officer in Federal District Court. Their attorney sought access to the psychotherapy notes. The court ordered disclosure. The officer did not consent to their release and the licensed social worker did not provide them. The jury awarded over \$500,000 in damages. The Judge stated that the failure to provide the psychotherapy

AB 517

State of Wisconsin / Department of Regulation & Licensing

Fax Cover Sheet

Please Deliver to:

Legis. Aide Daniel Young

Fax Number: 67038
Phone Number:
Company Name: Rep. Clifford Otte

From:

Name: Myra L. Shelton, Executive Assistant
Fax Number: (608) 267-0644
Phone Number: (608) 266-8608

Number of Pages: 2

Message:

Wishing all of you a great weekend! Myra

(Binder)

cc: MAC
Ymc
KN/RB
BD/BG
File



CLIFFORD OTTE

WISCONSIN STATE REPRESENTATIVE
27TH ASSEMBLY DISTRICT

February 4, 1998

TO: Myra Shelton, Executive Assistant
Dept. Of Regulation & Licensing

FROM: Daniel Young, Committee Clerk *DAN*
Assembly Committee on Consumer Affairs

RE: LRBs0368/2 (ASA to AB 517)

Here is a copy of the substitute amendment to AB 517.
Please let me know if the Department has any concerns about it.
Thanks.

Don,

2-13-98

*Secretary Cummings says the Department still
opposes this bill. Have a great weekend.*

Myra

*P.S. Have attached comparison chart we had
prepared on substitute amendment.*



FYI - Dan
From - Myra
State of Wisconsin

DEPARTMENT OF REGULATION AND LICENSING
CORRESPONDENCE/MEMORANDUM

DATE: February 11, 1998 **FILE REF:** Social Workers Section-ASA
to 1997 Assembly Bill 517

TO: Examining Board of Social Workers,
Marriage and Family Therapists and Professional Counselors

FROM: Myra L. Shelton, Executive Assistant

SUBJECT: Assembly Substitute Amendment to 1997 Assembly Bill 517 (LRBs0368/3)

Please find attached a comparison chart on (LRBs0368/3), Assembly Substitute Amendment, to 1997 Assembly Bill 517 relating to the regulation of social workers, advanced practice social workers, independent social workers, independent clinical social workers, marriage and family therapists, and professional counselors. The chart shows a comparison between current law and what is being proposed in Assembly Substitute Amendment to AB 517. Your legal board counsel, Bob Ganch, prepared this chart for us and can advise you on any questions you may have.

We hope the comparison chart will serve as a useful tool for you in reviewing this legislation. If I can be of any further assistance please let me know.

Thanks-Myra

cc: Secretary Marlene A. Cummings
Kimberly Nania, Bureau Director
Robert Ganch, Legal Board Counsel

attach:

**ASSEMBLY SUBSTITUTE AMENDMENT TO 1997 ASSEMBLY BILL 517
 LICENSING AND PRACTICE PROTECTION FOR MARRIAGE AND FAMILY THERAPISTS, PROFESSIONAL COUNSELORS,
 SOCIAL WORKERS, ADVANCED PRACTICE SOCIAL WORKERS, INDEPENDENT SOCIAL WORKERS, AND INDEPENDENT
 CLINICAL SOCIAL WORKERS**

CURRENT STATUTE, CH. 457 STATS.	ASA - AB 517
<p>A. Social workers, advanced practice social workers, independent social workers, independent clinical social workers, marriage and family therapists and professional counselors are CERTIFIED by the Board.</p>	<p>1. Changes "certified" to "LICENSED" and makes related changes in terminology, for marriage and family therapists, professional counselors, independent social workers and independent clinical social workers. The proposal would not make such change as to social workers and advanced practice social workers.</p>
<p>B. Restricts use of the title "advanced practice social worker" but does not define advanced practice social work as an area of practice.</p>	<p>2. Defines "advanced practice social work" and "advanced practice social worker." [ss. 8 and 9]</p>
<p>C. Restricts use of the title "independent social worker" but does not define independent social work as an area of practice.</p>	<p>3. Defines "independent social work" and "independent social worker." [ss. 13 and 14]</p>
<p>D. Restricts use of the title "independent clinical social worker" but does not define independent clinical social work as an area of practice.</p>	<p>4. Defines "independent clinical social work" and "independent clinical social worker." [ss. 11 and 12]</p>
<p>E. Defines "social work", which term includes psychotherapeutic principles, psychotherapeutic diagnosis, and psychotherapeutic treatment of psychological, emotional or mental disorders.</p>	<p>5. ASA - AB 517 does not repeal or amend this definition of social work. Original AB 517 does revise the definition of social work to eliminate reference to psychotherapeutic principles, psychotherapeutic diagnosis, and psychotherapeutic treatment of psychological, emotional or mental</p>

	<p>disorders. [s. 21] In ASA - AB 517, these terms are included in new definitions of "advanced practice social work", "independent social work", and "independent clinical social work". [ss. 8, 11, 13]</p>
<p>F. Does not include definitions of advanced practice social work, advanced practice social worker, independent social work, independent social worker, independent clinical social work and independent clinical social worker.</p>	<p>6. Creates new definitions of advanced practice social work, advanced practice social worker, independent social work, independent social worker, independent clinical social work and independent clinical social worker. [ss. 8, 9, 11, 12, 13, 14]</p>
<p>G. Protects the titles "social worker," "marriage and family therapist," "professional counselor," "advanced practice social worker," "independent social worker," and "independent clinical social worker." Practice is not restricted to certificate holders.</p>	<p>7. Expands the scope of title protection for the same titles, and prohibits the practice of independent social work, independent clinical social work, marriage and family therapy or professional counseling unless the person holds the appropriate license. Does not restrict practice of social work or advanced practice social work to certificate holders. [s. 33]</p>
<p>H. Exceptions to requirement of certification: pastoral counselors, investment counselor, vocational counselor, career counselor, certified alcohol and drug counselor or chemical dependency counselor, licensed school social worker, licensed school counselor, licensed psychologist, and licensed psychiatrist.</p>	<p>8. Adds as exceptions to certification and license requirements [ss. 20 - 28]:</p> <ul style="list-style-type: none"> • Employee assistance counselors; • Students enrolled in bachelor's or master's social work degree programs practicing within the scope of their education and training and under the supervision of a person with a bachelor's, master's or doctorate degree in social work, (supervisor's degree must be at least at the level of the student's degree program); • Persons lawfully practicing within the scope of a license, permit registration, or certification granted by this state or the federal government;

<p>1. Administrative rules may allow only advanced practice social workers, independent social workers, independent clinical social workers, marriage and family therapists and professional counselors to engage in psychotherapy, only if such persons have engaged in the equivalent of two years supervised clinical practice after receiving the master's or doctorate degree required for certification. Basic level social workers not permitted to practice psychotherapy.</p>	<ul style="list-style-type: none"> • Persons who are certified and licensed as a marriage and family therapist, professional counselor or social worker in another state or territory of the U.S. and who provide a consultation or demonstration with a Wisconsin certified or licensed marriage and family therapist, professional counselor or social worker; • A person who delivers human services (defined in s. 46.23(2)(a)) for a tax exempt (501(c)(3)) organization or for a governmental entity provided the person does not use any title or designation tending to represent that he or she is licensed as or engages in the practice of independent social work. <p>9. Administrative rules:</p> <ul style="list-style-type: none"> • May not permit a certified social worker to engage in psychotherapy. • May permit practice of psychotherapy with supervision by certified or licensed advanced practice social workers, independent social workers, independent clinical social workers, marriage and family therapists and professional counselors. • May permit practice of psychotherapy without supervision only by certified or licensed advanced practice social workers, independent social workers, independent clinical social workers, marriage and family therapists and professional counselors who have engaged in the equivalent of two years supervised clinical practice after receiving the master's or doctorate degree required for certification or licensure. [ss. 30 - 31]
<p>J. Provides for a social worker and professional counselor training certificate.</p>	<p>10. "Training certificate" changed to "training permit." [s. 41 -48, and 51 - 52] Also, professional counselor training permit holders restricted to practicing</p>

	<p>professional counseling within the scope of his or her training or supervision. [s. 52]</p>
<p>K. Provides for temporary certificates for social workers, marriage and family therapists and professional counselors</p>	<p>11. Changed to temporary licenses and adds temporary licenses for advanced practice social work, independent social work, independent clinical social work. [s. 53]</p>

2-98

Prof. Salama

re: /3

> tremendous improvement

> Rep. Underheim have been
talking about social worker legislation

> include in Urban bill.

> would place them in position to
accept what they want.

> social worker training certificate
in interim the Board has been
difficult to deal w/ i.e., let
people get certified, get courses.

> This is advisory board.

> tried to get in mini-budget

> policy might for Budget ^{deleted}

> if they went along w/ their proposal,
This is better.

> ✓ w/ Sandy in Greg's office
for copy.

Office:
P.O. Box 8953
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District:
1652 Beech St.
Oshkosh, WI 54901
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Legislative Hotline (toll-free): 1 (800) 362-9472




GREGG UNDERHEIM

State Representative • 54th Assembly District

The attached is provided for your information.

Please let me know if I can be of further assistance.

*Dan - Here's the Richard
Salem language. Let
me know what's going
on! Sandy*

 Printed on recycled paper

FOR THE GOVERNOR'S BUDGET ADJUSTMENT BILL

Proposal to create a "social worker training certificate advisory committee" for the Social Workers Section of the Board of Social Workers, Marriage and Family Therapists and Professional Counselors.

Ammend 15.405 (7c) to specify that a "social worker advisory committee" be created to provide advice and consent for actions that the social worker section may take with regard to granting social worker training certificates or declaring eligibility for the certification exam and for any actions of the social worker section on administrative rules, and other policy positions or practices which may effect the social worker training certificate. The committee shall consist of three members appointed by the Secretary or designee of the Department of Regulation and Licensing. Each member shall be appointed for a period of three years and have a doctorate in either sociology, psychology, criminal justice or other human service (not including social work) who hold faculty appointments at a Wisconsin college or university. Further, nominees for appointment shall be made by their respective Wisconsin or regional associations to the Secretary of the Department of Regulation and Licensing or designee.

This proposal is necessary to enable the section to have adequate expertise available to evaluate the credentials and represent the interests of those seeking permanent certification through the "Social Worker Training Certificate". As well, the section should have available as a member an individual who has a broad understanding of the social sciences which form the basis of social work practice. The appointment of an advisory board as described above has its basis in the enactment of the 1995-97 budget which implemented the "Social Worker Training Certificate". This certificate allows those who have the Bachelor's degree in Sociology, Psychology, Criminal Justice or other human services to be eligible for the social worker certification exam. This eligibility is based on the completion of at least four courses with appropriate content and an internship or period of employment for the development of specific job related skills.

*T. ...
after 9:00
7:30 am 11 2*

EXPLANATION FOR THE PROPOSAL TO CREATE A
SOCIAL WORKER ADVISORY BOARD FOR
THE SOCIAL WORKERS SECTION OF THE BOARD OF SOCIAL WORKERS,
MARRIAGE AND FAMILY THERAPISTS AND PROFESSIONAL COUNSELORS

In the Spring of 1992 the legislature passed and Governor Thompson signed an act which required certification for individuals who used the job title: "social worker," "marriage and family therapist," or "professional counselor." This required certification for any individual holding a job with such a title or who represents themselves as such a practitioner. Certification subsequent to this law would be attained by individuals through the passing of an exam administered by the Department of Regulation and Licensing. Certification in these areas would be granted by the Department in conjunction with the Board of Social Workers, Marriage and Family Therapists which, itself, was established by the 1992 law.

Unfortunately, the law as it applied to those seeking the lowest of the four levels of social worker certification, "social worker" allowed only those with the bachelor's degree in social work to be eligible (the three higher levels all require a master's degree in social work). This excluded those with bachelor's degrees in the associated disciplines of sociology, psychology, criminal justice or human services from eligibility for certification despite the fact that individuals with these degrees have been widely employed in social and human services since the early 20th century. Faculty teaching in these disciplinary areas from colleges and universities throughout Wisconsin and many county social service directors (assisted by the Wisconsin Counties Association) lobbied to allow eligibility for the certification exam. The rationale for this effort was based upon the tremendous overlap of the content of these disciplines with social work (indeed social work has as its basis sociology and psychology) and the desire of county and private social service providers to be able to hire the most qualified individual irrespective of the particular emphasis of their social science/human service degree.

These efforts resulted in the establishment of the "social worker training certificate" which allows those with a bachelor's degree in either sociology, psychology, criminal justice or other human service to be employed as a social worker for two years. During the period they are expected to take at least four courses and a supervised internship with appropriate content. Any or all of these courses and internship could have been taken as part of their bachelor's degree program. However, the Social Work Section (of the Combined Board) is expected to judge the content of the coursework and internship to determine eligibility to take the exam. Although administrative rules and additional procedures developed by the Department of Regulation and Licensing govern these decisions it is important to have one member of the Social Workers Section familiar with the coursework and programs of the other areas. As well it is particularly important to have the interests of the applicants from the other areas (as well as the interests of social service managers who would prefer to hire staff from varied backgrounds) represented. Currently, all members of the Social Work Section, except the public member, are expected to have degrees in social work.

February 4, 1998

Professor Richard Salem
Department of Sociology
University of Wisconsin - Whitewater
800 West Main Street
Whitewater, WI 53190

Dear Professor Salem:

Please find enclosed a copy of a new substitute amendment to Assembly Bill 517. I would appreciate it if you would review it and let me know what you think about it. Thank you.

Sincerely yours,

Daniel A. Young
Committee Clerk
Assembly Committee on Consumer Affairs

Enclosure: LRBs0368/3



October 21, 1997

Representative Clifford Otte
State Capitol
P.O. Box 8953
Madison, Wisconsin 53708

Dear Representative Otte:

I am writing to urge that you and each member of the Consumer Affairs Committee vote against AB517 if you call the committee to executive session on this bill. I have no problem with the licensure of "marriage and family therapists" or "professional counselors" or "social workers" with M.A. degrees. However, licensure of bachelor's level social workers in conjunction with the extremely broad definition of "social work" will require virtually every human services provider or individual seeking to advocate for social change be licensed. This could include a long list of paid workers in state and county employment such as probation/parole agents, county human services specialists, county intake workers, county group home workers, county mental health technicians, county income support specialists, and county juvenile probation officers. Even more significantly effected will be the private human services agencies which provide services to the county and state of Wisconsin under contract such as W-2 caseworkers, W-2 job specialists, group home workers, community workers, caseworkers, child care technicians, client service specialists and a host of others. Indeed, private non-profit agencies have large staffs composed of individuals with a variety of bachelor's degree backgrounds who could fall under the proposed definition of social work. Moreover, agencies which use large members of volunteers such as battered women's shelters, hospice care programs, foster care homes and community centers for disadvantaged youth will all be subject to this law.

As might be expected, these jobs expect a wide variety of competencies and experience which may or may not be attained through the attainment of a social worker license. More importantly, however, many of these jobs are often held by recent college graduates who hope eventually to use the experience to eventually pursue a better paid position as a social worker with a county human service department or private agency. These are jobs that are often held by individuals who have obtained a social worker training certificate and seek eventual certification as a social worker by an alternative track (that is they have their bachelor's degree in sociology, psychology, criminal justice or human services). This legislation would end this opportunity. That consequence, in fact, could be the intent of the sponsors of AB517 (The National Association of Social Workers). On page 15 line 13 the phrase "practice social work within the scope of his or

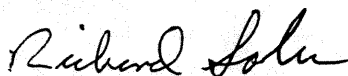
DEPARTMENT OF SOCIOLOGY

College of Letters & Sciences • 800 West Main Street • Whitewater, WI 53190-1790
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her training or education" seems to give the "social work section of the Combined Board of Social Workers, Marriage and Family Therapists and Professional Counselors discretion not now available in granting "Training Certificates".

As might be surmised from my comments, the major thrust of this legislation is to remove the ability of county departments and private agencies to make decisions about the skills and qualifications of potential employees and allocate these responsibilities to a Board within the Department of Regulations and Licensing. Thus, these departments and private agencies will not have an opportunity to choose employees who have the kinds of educational backgrounds and personal experience they deem appropriate for the jobs that need to be done.

Sincerely,



Richard Salem
Professor

RS:eb

cc: Rep. DuWayne Johnsrud
Rep. Alvin Ott
Rep. Michael Lehman
Rep. Frank Urban
Rep. Annette "Polly" Williams
Rep. Donald Hasenohrl
Rep. Spencer Black



Tommy G. Thompson
Governor

State of Wisconsin \ DEPARTMENT OF REGULATION & LICENSING

Marlene A. Cummings
Secretary

1400 E. WASHINGTON AVENUE
P O BOX 8935
MADISON, WISCONSIN 53708-8935
(608) 266-2112

STATEMENT OF
Marlene A. Cummings for the
DEPARTMENT OF REGULATION AND LICENSING
Before The
ASSEMBLY COMMITTEE ON CONSUMER AFFAIRS
Concerning
1997 Assembly Bill 517
October 23, 1997
Room 417 North, State Capitol

Chairperson Otte, members of the Committee, thank you for this opportunity to present information concerning 1997 Assembly Bill 517. I am Marlene Cummings, Secretary of the Department of Regulation and Licensing.

Assembly Bill 517 transforms the certification requirements under current law into licensing requirements and restricts the use of titles related to social work, marriage and family therapy or professional counseling to persons who are licensed. With certain exceptions, the bill also prohibits, a person from practicing social work, marriage and family therapy or professional counseling unless he or she is licensed. The basic regulatory changes made by the bill are listed in a chart attached to this statement.

The Department opposes this proposal because it is unnecessary, limits competition and employment in the field of social work and counseling, provides no clear benefit to consumers, creates a professional hierarchy that is confusing to the public and the profession, and will probably increase health care costs to all of us.

Why does Wisconsin need this increased level of regulation over these six professions? Certainly no evidence can be presented to support the proposal based on the experience of the Examining Board of Social Workers, Marriage and Family Therapists and Professional Counselors.

Regulatory Boards

Accounting; Architects; Landscape Architects; Professional Geologists; Professional Engineers; Designers and Land Surveyors; Auctioneer; Barbering and Cosmetology; Chiropractic; Dentistry; Dietitians; Funeral Directors; Hearing and Speech; Medical; Nursing; Nursing Home Administrator; Optometry; Pharmacy; Physical Therapists; Psychology; Real Estate; Real Estate Appraisers; Social Workers, Marriage and Family Therapists and Professional Counselors; and Veterinary.

The experience Wisconsin government has had with the certification of social workers marriage and family therapists and professional counselors since regulation of this profession was initiated in 1992 does not warrant changing the form of regulation to "practice protection." In the last session of the legislature, in 1995 Wisconsin Act 188, the statute the regulation profession of psychology was changed from a "title protection" law to a practice act. The bill drew on the Psychology Board's experience in regulating psychology under a title protection law over more than twenty-five years. The request made in this bill is premature. We do not have sufficient experience in regulating marriage and family therapists, professional counselors and social workers to rewrite the law and do a decent job of it.

Practice restrictions imposed on the social worker and counseling profession by this proposal are likely to cause turmoil in the state's social services programs. The form of regulation proposed is the most restrictive. For example, the bill would prohibit anyone not licensed as a social worker from practicing social work. [Section 457.04 (1)]. What does "practicing social work" mean? Under the bill, "social work" is defined as:

"Social work" means applying psychosocial or counseling principles, methods or procedures in the assessment, evaluation, or psychosocial or diagnosis, prevention, treatment or resolution of a difficulty in the social, or psychological, personal, emotional or mental functioning of an individual, couple, family, group of individuals or community, including the enhancement or restoration of, or the creation of societal conditions favorable to the enhancement or restoration of, the capacity of an individual, couple, family, group of individuals or community for social functioning or the delivery of services to a group of individuals or a community to assist the group or community in providing or improving the provision of social or health services to others.

There is a minimum \$5,000 penalty for practicing social work without a license. [Sec. 457.30, Stats.] If this bill passes those uncertified counselors and social workers who have been employed in positions where they do not use the title "counselor" or "social worker" will be put out of work. Continuing to work would be at the peril of a forfeiture or fine and imprisonment.

The proposed practice restriction act does not provide adequate guidance to the public, state administrative agencies, prosecutors and the courts. The definitions for the four professions in existing and proposed statutes do not

include distinctions that can be understood and applied by the general public. The broad scope of the terminology in the definitions would capture care activities provided by volunteers and others and may result in reducing social services that are available to the public.

An attempt by a profession to move from a title protection law to a practice act is usually related to removing barriers to fee reimbursement from insurers or the government. I urge the Legislature to identify the relationship between this proposal and reimbursement. Approving a proposal without a fiscal study may result in unanticipated increases in health care costs.

The bill is particularly unsound in retaining a four-level social worker hierarchy. No differences exist in the bill between the practice of a social worker, advanced practice social worker, independent social worker, or independent clinical social worker that justify four separate licenses. In fact, under current law, the practice differences between the four levels are abstract and unclear.

Current statutes provide that the Board is to specify in rule the services included within the four levels of practice. [Sec. 457.03 (2), Stats.] The second of the two attached charts identifies the distinctions between the four levels and show absolutely no difference between the services that can be provided by an advanced practice social worker and an independent social worker. The same unity between the two levels exists in Assembly Bill 517. In Section 15 the bill states that "independent social work" has the meaning given for advance practice social work in sub (1d)." True, the qualifications for getting a license as an independent social worker differ from the qualifications for a license as a advance practice social worker. But if the scope of professional practice is identical for both, why create two professions?

On the basis of the need for caution and common sense in occupational regulation, I urge the committee to reject Assembly Bill 517.

1997 ASSEMBLY BILL 517
LICENSING AND PRACTICE PROTECTION FOR MARRIAGE AND FAMILY THERAPISTS, PROFESSIONAL COUNSELORS,
SOCIAL WORKERS,, ADVANCED PRACTICE SOCIAL WORKERS, INDEPENDENT SOCIAL WORKERS, AND INDEPENDENT
CLINICAL SOCIAL WORKERS

CURRENT STATUTE

PROPOSAL

- | | |
|---|---|
| <p>A. Social workers, marriage and family therapists professional counselors, advanced practice social workers, independent social workers, independent clinical social workers are certified by the Board.</p> <p>B. Restricts use of the title "advanced practice social worker" but does not define advanced practice social work as an area of practice.</p> <p>C. Restricts use of the title "independent clinical social worker" but does not define advanced practice social work as an area of practice.</p> <p>D. Restricts use of the title "independent social worker" but does not define advanced practice social work as an area of practice.</p> <p>E. Defines "social work"</p> | <p>1. Changes "certified" to "licensed" and makes related changes in terminology.</p> <p>2. Defines "advanced practice social work" and "advanced practice social worker." [ss. 10 and 11]</p> <p>3. Defines "independent clinical social work" and "independent clinical social worker." [ss. 13 and 14]</p> <p>4. Defines "independent social work" and "independent social worker." [ss. 13 and 14] "Independent social work" is defined to mean "advanced practice social worker." [s. 15]</p> <p>5. Revises definition to eliminate reference to psychotherapeutic counseling and diagnosis. s. 21] (These terms are retained in definition of "advanced practice social work." [s. 10])</p> |
|---|---|

- F. Protects the titles "social worker," "marriage and family therapist," "professional counselor," "advanced practice social worker," "independent social worker," and "independent clinical social worker." Practice is not restricted to certificate holders.
 - G. Provides for a social worker and professional counselor training certificate.
 - H. Provides for temporary certificates for social workers, marriage and family therapists and professional counselors
-
- 6. Expands the scope of title protection for the same titles and prohibits the practice of social work, advanced practice social work, independent social work, independent clinical social work, marriage and family therapy or professional counseling unless the person holds the appropriate license. [ss. 28-30]
 - 7. Changed to "training permit." [s. 37 and 48]
 - 8. Changed to temporary licenses and adds temporary licenses for advanced practice social work, independent social work, independent clinical social work. [s. 50]

Differences in levels of social worker practice as described in current Examining Board rules (current chs. SFC 6 and 7).			
SOCIAL WORKER (SFC 6.01)	ADVANCED PRACTICE SOCIAL WORKER (SFC 6.02)	INDEPENDENT SOCIAL WORKER (SFC 6.03)	INDEPENDENT CLINICAL SOCIAL WORKER (SFC 6.04)
Evaluate and assess difficulties in psychosocial functioning, develop a plan to alleviate those difficulties, and either carry out the plan or refer clients to other qualified resources for assistance	Evaluate and intervene in complex difficulties in psychosocial functioning.	Same as Advanced Practice	Provide services without supervision for the diagnosis, treatment, and prevention of mental and emotional disorders in individuals, families, and groups to restore, maintain, enhance social functioning.
Intervention plans may include psychosocial evaluation, counseling of individuals, families, and groups; advocacy; referral to community resources; and facilitation of organizational change to meet social needs	Same as Social Worker.	Same as Social Worker.	Treatment interventions may include, but are not limited to, psychosocial evaluation; counseling of individuals, families and groups; referral to community resources; advocacy; and facilitation of organizational change to meet social needs; and individual, marital, and group psychotherapy
May not engage in psychotherapeutic activities.	May engage in psychotherapeutic activities only after completing 3,000 hours of supervised clinical practice subsequent to receiving a master's degree.	Same as Advanced Practice Social Worker	Same as Advanced Practice Social Worker
May not engage in psychotherapeutic activities.	May engage in the practice of psychotherapeutic social work when he or she has completed the 3,000 hour supervised clinical practice period, or is listed in certain national registries.	Same as Advanced Practice Social Worker	Same as Advanced Practice Social Worker
May not engage in psychotherapeutic activities.	May engage in the practice of psychotherapeutic social work only under the supervision of a social worker, nurse, physician, or psychologist who meet certain qualifications.	Same as Advanced Practice Social Worker	No supervision required by statute or rule



URBAN

Wisconsin State Representative • 99th Assembly District

DR. FRANK H. URBAN

Testimony by Representative Frank Urban in support of AB 517.

At the request of the WI Chapter of the National Association of Social Workers, the WI Counseling Association and the WI Association for Marriage and Family Therapy I introduced AB 517. This bill changes the current law governing these professions from a "title protection act" to a true "practice act". There are several reasons why I feel this is a good proposal.

Under current law, only persons with a certificate granted by the examining board of social workers, marriage and family therapists and professional counselors may use the titles related to social work, marriage and family therapy and professional counseling.

However, current law does not prohibit someone without a certificate from calling themselves social workers, marriage and family therapists and professional counselors and does not prohibit them from practicing social work, marriage and family therapy or professional counseling. After introducing this bill, I received a letter from a licensed counselor in the Fox Valley who told me that when she opened her private counseling practice several years ago she advertised in the phone book and in the yellow pages she found a massage parlor listed under the heading of counselor, where her business was also listed.

This type of law is commonly referred to as a title protection law. In 1992, the 11th Circuit Court of Florida ruled that a title protection law is a form of infringement of freedom of speech. As a result of the ruling, at least until the law was rewritten as a practice act, consumers had no way of knowing whether individuals were qualified or subject to regulation by the state. We need to prevent similar challenges from occurring in Wisconsin.

AB 517 would fulfill this purpose by creating a social work, marriage and family therapy and professional counselors practice act. Last session, I authored a similar practice act for psychologists which was passed into law. The vote in the Assembly was 93-4, with all current members of this committee voting in favor of the bill.

Although there has been concern expressed by members of the legislature and the Governor that there is excessive legislation creating licensing requirements for "new" professions, I must point out and stress that this is not licensure of a new profession. The individuals covered under AB 517 are already certified and licensure is the logical next step in protecting both the people who practice the respected professions of social work, marriage and family therapy and professional counseling, and the people who turn to these professionals for their assistance.

I urge the committee to support AB 517.



Tommy G. Thompson
Governor

Marlene A. Cummings
Secretary

1400 E. WASHINGTON AVENUE
P.O. BOX 8938
MADISON, WISCONSIN 53708-8938
(608) 266-2112

**Testimony on Assembly Bill 517
Before The
Assembly Committee on Consumer Affairs
Thursday, October 23, 1997, 9:00 A.M.
Room 417N, State Capitol**

Good Morning, Chairman Otte, and members of the committee, thank you for the opportunity to submit testimony on Assembly Bill 517. **The Professional Counselors Section of the Examining Board of Social Workers, Marriage and Family Therapists and Professional Counselors, three out of four members, supports the passage of Assembly Bill 517.**

The members feel that AB 517 will strengthen the protection of consumers and the public by the addition of licensing requirements. The certification requirements have been good at protecting the public to date, but as more and more individuals are credentialed this licensing requirement provides the public better assurances that professional counselor providers are skilled individuals. There is a lot of interest on the part of consumers and credential holders, who are interested in having this practice bill become law.

Submitted by: Susan A. Kell, Board Member, Professional Counselors Section of the Examining Board of Social Workers, Marriage and Family Therapists, and Professional Counselors.

SK/mls

Regulatory Boards

Accounting; Architects, Landscape Architects, Professional Geologists, Professional Engineers, Designers and Land Surveyors; Auctioneer; Barbering and Cosmetology; Chiropractic; Dentistry; Dietitians; Funeral Directors; Hearing and Speech; Medical; Nursing; Nursing Home Administrator; Optometry; Pharmacy; Physical Therapists; Psychology; Real Estate; Real Estate Appraisers; Social Workers, Marriage and Family Therapists and Professional Counselors; and Veterinary.

LIECHTI-NIESEN COUNSELING SERVICE

456 MT. VERNON STREET
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(920) 233-5551
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2430 CARLETON AVENUE
APPLETON, WISCONSIN 54915
(920) 731-2040
FAX (920) 731-0203

Rep. Clifford Otte
Chairman, Consumer Affairs Committee
P.O. Box 8953
Madison, Wisconsin 53708

Dear Rep. Otte,

This letter is to urge you to ~~have~~ hold a hearing on the professional counselor mental health practice act bill number A.B. 517.

When I began my private counseling practice in 1984, I decided to advertise in the phone book. I was greatly surprised when I found a massage parlor under the same heading as counselor!

I have a deep concern that individuals who are in pain can be assured that the counselors and therapists they choose to open their hearts and minds to are professionally trained.

As you know, this is not the licensure of a new profession. We are already certified. Licensure will make that certification a practice protection rather than a title protection law. Certification can be challenged as it was in the Florida federal court.

My biggest concern is that with only title protection anyone could practice psychotherapy under another name. The consumer would not be protected if that person was not adequately trained. Assurance of protection is given to the consumer through A.B. 517. No more massage ads in the professional counselor, social worker, marriage and family, psychologist or psychiatrist ads in the yellow pages.

Your bill, A.B. 509, which I think is a boon to the therapist who has not completed his/her requisite 3000 hours of supervised therapy practice might be incorporated into A.B. 517.

Thank you for your work. This bill will help protect thousands of consumers.

*Warm Regards,
Marya Liehti-Niesen*



KENOSHA COUNTY DEPARTMENT OF HUMAN SERVICES

714 52nd Street - Kenosha, WI 53140
Central (414) 653-6500 Administration (414) 653-6516 Fax (414) 653-6901

Director
Seymour J. Adler, ACSW, CISW

October 17, 1997

Honorable Clifford Otte
P.O. Box 8953
Madison, WI 53708

Dear Representative Otte:

I am writing to urge your support for Assembly Bill 517 (Practice Act).

As you know, this Bill would substitute "Licensing" for "Certification" relating to regulation of the various categories of social workers, marriage and family therapists and professional counselors. The requirements would remain the same, only the title would change.

This is an important distinction and would further protect the public as under the current law (Wisconsin Act 160) there is confusion as to whether the state mandates certification or licensure. Some agencies and insurance companies make a distinction and do not authorize service payment.

Licensure would expand consumer choice of mental health providers. Currently, at least one Wisconsin company (Kohler) and several out of state companies will only reimburse licensed providers.

Licensure would lower costs of mental health treatment for consumers who would not be limited to psychologists and psychiatrists (who are much more expensive) if their insurance company required a licensed mental health provider.

Social workers, who provide the bulk of mental health counseling, serve society's most vulnerable clients. These are the very people who need the protection licensure affords. Yet they are the least likely to have the resources to get their needs met and their voices heard.

There are also the people Human and Social Service Departments throughout the state are charged with serving. We want to be sure that the therapists we employ and those we refer clients to are both qualified and competent.

We are also interested in therapy being provided at the lowest possible cost to both the taxpayer and consumer.

I hope you agree that passage of Assembly Bill 517 will go a long way toward this commendable end.

Sincerely,

Seymour J. Adler, Director
Department of Human Services

October 22, 1997

**Representative Clifford Otte
Wisconsin Assembly
State Capitol
Madison WI 53702**

RE: ASSEMBLY BILL 517

Dear Representative Otte:

I understand you will be Chairing a hearing regarding **AB 517, Relating to Licensing Social Workers** and other Titles on Thursday, 10/23/97. I am writing to offer my perspective on this bill and requesting that you include this correspondence along with other oral and written testimony that will be taken.

I urge the Committee to reject consideration of **AB 517** for the following reasons:

Departments like ours in Jefferson county are dependent upon our ability to recruit and hire personnel who have broad abilities, and come from many different kinds of academic and experiential backgrounds. For instance our social work staff includes persons with degrees and/or training in the disciplines of education, police science, sociology, criminal justice, divinity and others. All are highly competent professionals who provide quality services to the public. Passage of **AB 517** would structure the social work field so that persons such as these could not qualify for employment without additional, and unnecessary training and expense, in order to attain licensure.

Public Human Services work demands that agencies be flexible and that services be integrated and coordinated. Many departments, including Jefferson County, have defined our job descriptions very broadly in order to allow for maximum flexibility in providing public services. We have found that by hiring persons trained in education, police science, criminal justice, etc. that we have been able to increase our service capabilities by allowing these individuals to practice social work within our Department. **AB 517** would destroy this ability - and instead create a "**members only**" social work club from which we would be forced to recruit our staff.

I understand that proponents of **AB 517** feel that its passage would protect the public by guaranteeing a standard of licensure and practice. This is simply untrue. In the first place supervising, guiding, and teaching on the job have been, and always will be, the primary methods that produce excellent workers. We evaluate personnel for hiring based on the total person, including personal attributes, experience, education, and background. We would not rely on certification or licensure to determine our hiring decisions. Secondly, our public system is full of public protections beyond our hiring and supervision practices. Every agency must distribute its policies on complaints, concerns, grievances, treatment rights, billing procedures, etc., to its

Representative Clifford Otte
October 22, 1997
Page Two

customers. We all have internal policies to provide avenues of protection to the public including review of client concerns with our Administrative Boards. For agencies that operate as Mental Health Clinics there are the treatment and certification standards for Out-Patient, and Alcohol and other Drug Abuse, services. This certification requires regular treatment, procedure, and billing review, including review of individual case files. Reviews of our Long-Term Support Programs include home visits and client interviews by State supervisory staff. Intake workers within our Departments already have mandatory training and certification requirements which we comply with. In cases involving out-of-home placements of children there are mandatory placement and treatment review meetings which include non-agency staff. Our Infant Development Program is intensely scrutinized during state reviews in a process that includes customer satisfaction questionnaires. There are also other ways that public agencies are monitored but I believe the point is made here. Does additional regulation of the helping field of human service protect the public more or increase the program quality? No it does not and my belief is that the great majority of Human Service Directors would agree on this point.

My final comment on **AB 517** is that I believe that the real purpose is to exclusively define the field, creating a "**members only club**" who will then attempt to leverage higher compensation, including required regular training which public agencies will foot the bill for.

More regulation, and bureaucracy will not increase the quality of services or protect the public. We do not need our hiring possibilities curtailed. We need them expanded as we continue to create new ways to combine functions and duties and even merge more public departments together.

Again, I urge the Committee to reject **AB 517**.

Sincerely,



Thomas Schleitwiler
Director
Jefferson County
Human Services

TS/bhm

cc Senator Scott Fitzgerald
Senator Joanne B. Huelsman
Representative Steven Foti
Representative David Ward
Representative Stephen Nass



UNIVERSITY OF WISCONSIN-WHITEWATER

800 West Main Street, Whitewater, Wisconsin 53190-1790

October 9, 1997

Clifford Otte
P. O. Box 8953
Madison, WI 53708

Dear Mr. Otte:

I am writing to express my deep concern regarding some of the proposed changes in social work certification. Wisconsin currently has a clearly defined means for persons who have graduated with social work undergraduate degrees and degrees in other related disciplines to gain state certification as social workers. Apparently, some proponents of other disciplines such as sociology and psychology have been lobbying either to consider automatically such disciplines as sociology or psychology the same as social work, or to remove social work certification at the undergraduate level altogether.

Social work education has a strong accreditation process where strict rules regarding course content, continuity, and field practicum must be followed at the undergraduate level. This includes content on human diversity and the acquisition of appropriate professional values for work with clients. Other disciplines such as sociology, psychology, or criminal justice do not have such accredited programs. Yet, some proponents of such programs are saying that they are the same as social work. This makes no sense.

The state has in place a means for persons having majors other than social work to gain certification as social workers with required additional social work course content and designated minimum practice experience, in addition to passing two state exams. This makes sense. Clients must be protected so that they are served by persons with at least minimal competence in social work.

Social work is not sociology or psychology. Those who espouse this are self-serving and are not telling the truth.

I hope you will support the continuation of social work certification at its current level. Thank you for your time and attention.

Sincerely,

A handwritten signature in cursive script, appearing to read "Karen K. Kirst-Ashman".

Karen K. Kirst-Ashman, Ph.D., CICSW
Professor

William A. Berkan ACSW, CISW

726 Anthony Lane
Madison, Wisconsin 53711

Telephone (608)233-8327

Personal Testimony Re: AB 517

10-23-97

My name is William A. Berkan. I recently retired from my position as School Social Work Consultant with the Wisconsin Department of Public Instruction. I am currently working as the administrator of an Early Childhood Center and volunteering at the Wisconsin Committee for the Prevention of Child Abuse and Neglect. I also serve on the executive board of the Wisconsin Chapter of the national Association of Social Workers. I was employed full time as a Social Worker for over thirty years. In that time I have been a line social worker, a supervisor, an administrator and a state consultant.

My major reason for supporting AB 517 is that it will enable us to establish a higher standard for those who are expected by our communities to work with individuals and groups with problems. Currently, the quality of individuals who are administering our public programs varies from extraordinarily good to extraordinarily bad. Let me give you just two examples from my personal experience in the field.

#1 Two unrelated boys, both age 10, had been placed in a foster home before either was a year old. The home was a loving one, with high standards and excellent discipline. Both boys were happy. A new agency supervisor, who was not a trained social worker decided that all foster children who had been in placement more than 18 months should be placed for adoption. He forced his supervisee's to work toward that goal. My supervisor was a trained social worker, as was I. We assessed the situation and felt strongly that the foster home placement was a good one, in fact it was a social adoption. Since the boy was doing well we maintained the placement. The boy who stayed in the home currently is married and supporting his family. The boy who left the home fared differently. He became disturbed by the move away from the only home he had ever known and did not graduate from high school. Years later I met up with him again and became his mentor. He now has his GED and drives a dump truck. I helped him get treatment for an alcohol problem and to get his current job. It is not at all certain, even now, how his life will turn out. I am sure that, had he been left in the original foster home his life would have been significantly different and much more positive.

As an administrator, a social worker came to me with the case of a young girl who had leukemia. This was in the days when treatment for that illness was felt to be futile. The young girls doctors felt she had an excellent chance if she received a new medicine which had to be administered at the hospital on a regular basis. The social workers supervisor, who had been hired before I got there and who was not trained, had refused the request for payment. I was the final agency administrative appeal. We investigated the treatment and found that it was a legitimate one approved by the FDA. We talked to the parents

and clarified the critical nature of their role in administering medication at home to enhance the hospital treatments. We let them know that we were available to talk to any time they were discouraged or wanted to quit the treatment. After all of this preparation, we approved the payment for the treatment. There were days the social worker spent some long hours with the family supporting them, when she arranged transportation or child care when that was a problem. There were no guarantees that all this would make a difference but it was the legal, professional and ethical thing to do. The little girl, now a young woman, is living in another state now. The last I heard she had a child of her own.

There are many more stories I could tell and, if any of you would like, I would be glad to spend time privately, or in a group, with you to do just that.

These two examples illustrate what social workers do. We use the training we receive at specialized programs to:

- Assess a situation based on social and emotional factors
- Determine what the resources the client has to resolve their own problem
- Support them in their efforts
- Provide clients with information and training about developing other needed skills

To do this the social worker must be trained in psycho-social interviewing skills, the causes of human social problems, recognizing client strengths and weaknesses, and in how to use available resources to insure that the individual is better able to set and achieve goals. Trained social workers accept and understand some basic principles of social work. It is important to maintain confidentiality, to accept individuals as they are and not as they should be, to identify and work with the potential of each person who comes to us for help. We do make judgments about the effect of clients actions on themselves, others and society, and we confront them with the consequences of those actions.

The knowledge and skills for all this requires a very specific knowledge base. The Council On Social Work Education (CSWE) was formed to accredit social work programs on the college level who met minimum standards. Persons who graduate from these programs acquire at least the minimum knowledge and skills necessary to do social work. There are 15 colleges in this state who meet the CSWE standards and who graduate a total of nearly 400 social workers each year. There are two Universities which provide social work education at the masters degree level. Both of these institutions exceed the CSWE standards. These 17 programs provide our state with a valuable resource, individuals who are prepared to help those with problems and to make some very difficult decisions about the lives of others. Persons with less preparation, in my opinion, after 30 years experience, simply cannot consistently perform competently as social workers. They are not prepared to make the difficult decisions effecting other peoples lives. They are not ready to assess either what must be done or how it must be done to protect the individual and the community.

Finally, I support AB 517 because it would provide a tool to protect the public, a way we could weed out the poorly prepared, the incompetent and the unethical. I am adamant about this. It is time we had the ability to effectively address the legitimate criticism over those individuals in social work positions who are doing harm. In so doing we will more adequately meet our responsibility to the public in general and clients specifically. I am proud of being a social worker, I will be prouder still when those who claim to be social workers, but who are not, are no longer allowed to be in social work positions.



Wisconsin Mental Health Counseling Association

A Division of American Mental Health Counseling Association
Branch of American Association for Counseling and Development

The WISCONSIN MENTAL HEALTH COUNSELORS ASSOCIATION is comprised of Certified Professional Counselors and Certified Clinical Mental Health Counselors. All of the members are master's degreed and some are doctorate degreed. The educational tracks include: educational psychology, counseling psychology, clinical psychology, rehabilitation counseling, and human development.

A primary goal of mental health/professional counselors is to focus on the therapeutic process vs social bureaucracy; to facilitate healing in an environment that is emotionally safe and secure for the client. By exploring the hurt, confusion, and dis-ease and learning effective coping skills for diversity of life challenges the individual and/or family can be integrated back to health and well being.

Mental Health Counselors are well trained, highly qualified professionals who have been a part of the clinical environment for over 25 years in Wisconsin. The Wisconsin Counseling Association has been an active organization for over 40 years. The University of Wisconsin system offers counseling degrees at Whitewater, Oshkosh, Stout, Madison, Milwaukee. Again this is a master's degree and not a bachelor's degree. We do not have bachelor's trained counselors which is why the certification/licensure efforts have always been focused on the master's trained individuals.

As one of the co-founders of WMHCA back in 1980, I was looking for an organization that would meet my needs as a clinician. I was not trained as a social worker and did not want to affiliate with that group as I knew that we would view issues from different perspectives. The national mental health counselors were very organized and provided the foundation for the state organization. In Wisconsin there are over 2000 Certified Professional Counselors but only about 160 are actively involved with the state organization. We do not have any paid staff so that makes it difficult to work as hard as we could because clinical practice must take precedent. There has always been a core group of counselors who have contributed time and energy to keep the mental health/professional counselors in the fold.

Mental Health Counselors/Professional Counselors are found in private practice,



MARIAN
COLLEGE

45 S. NATIONAL AVE. ♦ FOND DU LAC, WI 54935-4699 ♦ (414) 923-7600 ♦ FAX (414) 923-7154

Memo

To: Clifford Otte, Chair, Consumers Affairs Committee, Wisconsin Legislature
From: Phi Alpha Social Work Honor Society
Marian College Social Work Program
Date: October 23, 1997
Re: Assembly Bill 517 Concerning Social Work Licensure

We are faxing this message to you to indicate our support for Assembly Bill 517. As a graduating class of "Social Workers", we feel licensure will ensure that those who use the title are legally empowered and protected to do so.

It is our hope that your committee will favorably consider moving forward on this proposed legislation.

Lori Hills

Kristi Sook

Rhonda Habriga

Holly Van Ark

Joanne Tolonen

MEMORANDUM

DATE: October 23, 1997

TO: Clifford Ott, Chair, Consumers Affairs Committee, Wisconsin Legislature

FROM: Carol Schulke, Director, Marian College Social Work Program

RE: Assembly Bill 517 Concerning Social Work Licensure

I am faxing you this message to indicate my support for Assembly Bill 517 for which you will be holding a hearing this morning. Since I am unable to attend that hearing in person due to my teaching obligations, I would like to convey some of my reasons for supporting social work licensure.

1. As an educator for a practicing profession at the baccalaureate degree level, I am intensely aware of the obligation that a nationally accredited program such as Marian College has for assuring that all of its graduates meet recognized standards of competence for entry level practice. While some critics would argue that it is up to social agencies to screen out potentially incompetent social work professionals, it is my contention that an accredited program can provide a credible mechanism for screening through its process of required studies toward degree completion. Our records would show that not all students make it through the program. From my vantage point (and I am certain that this applies to other practicing professions) I do not believe that it would be fair to my agency colleagues for me to suggest that the screening responsibility be placed solely on their shoulders through their hiring decisions.
2. Another reason for supporting social work licensure is to ensure that those who use the title are legally empowered and protected to do so. It is my understanding that a recent federal court decision in Florida, *Abramson V. Gonzales*, 949 F2d 1567 (11th Cir. 1992) ruled that the Psychology Act which forbids unlicensed individuals from using the title "psychologist" was unconstitutional based on commercial free speech. This would appear to me to call into future question the current social work title protection afforded through certification under Wisconsin Act 160. Again, as an educator who is held accountable to accreditation standards for preparing B.S.W. practitioners, I maintain that it confuses and misleads consumers of social services or the public-at-large if we allow any one with any degree to use the social work title. I wish for our practicing social work professionals to be held accountable, based on professional standards. I wish for a licensing bill which strengthens my profession's accountability to the public and to consumers.
3. Finally, for those of my colleagues who have advanced degree practice credentials to offer clinical services, I would also believe that it is important for them to be licensed in order to meet insurance requirements for being a licensed mental health practitioner.

It is my hope that your committee will favorably consider moving forward on this proposed legislation. Furthermore, I welcome any and all opportunity for ongoing discussion with you about social work licensure, about educational preparation for social work, or any other questions you might have relative to why the time may be now to move forward in this regard.

October 21, 1997
4403 Anapaula Street
Green Bay WI 54311

Representative Clifford Otte
PO Box 8952
Madison, WI 53708

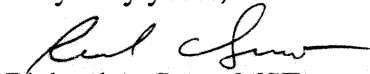
Dear Representative Otte;

I'm writing to ask your support - - and that you schedule a hearing for AB-517. Full licensure for Counselors, Social Workers and Marriage and Family Therapists is needed now for two major reasons: First, the consumer is only marginally protected by the existing certificate/title protection legislation. Unqualified individuals can perform psychotherapy unless there is licensure/practice protection legislation.

And second, our existing certificate legislation is highly exposed to challenge as was recently discovered in Florida Federal Court.

Please act promptly to assure responsible practice of these professions by moving us from certificate to licensure status

Very truly yours,



Richard A. Snow MSE
Certified Professional Counselor
Certified Independent Clinical Social Worker

Ericka Bethke
109 Benson Hall
Whitewater WI 53190
October 20, 1997

Clifford Otte
Chair of Assembly Consumer Affairs Committee
P.O. Box 8953
Madison WI 53708

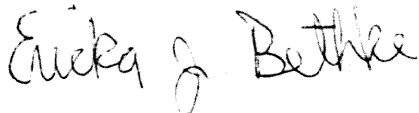
Dear Mr. Otte,

I am writing to inform you that I am opposed to Assembly bill 517 which wants to not only license social workers, but allow persons with other majors to become licensed social workers if they pass the required exam.

As a student about to enter the work force, I can well understand that professors like Dr. Salem want their students to have a good chance at finding a job. This bill will make more jobs available for his students. What I am concerned about is that these students may not be prepared if they are hired in a social work position. Psychology and Sociology students are not required to take classes in either practice, policy or even an internship in the field. We are required several classes in human behavior and specific techniques while the above mentioned majors are required more research oriented classes than interpersonal communication. Because their coursework doesn't allow them to possess the background to work with clients one on one, I strongly suggest that your committee make every effort not to have this bill pass. These skills are as essential for a successful career in social work as are research and group skills which are a part of the social work curriculum. As a social work student, I am well aware of what it takes to graduate

I would like to hear what happens to Assembly bill 517 while your committee debates it. Please send me a letter with the results. Thank you very much for your time and I look forward to hearing from you.

Sincerely,

A handwritten signature in cursive script that reads "Ericka J. Bethke". The signature is written in dark ink and is positioned above the typed name.

Ericka J. Bethke



Wisconsin Association for Marriage and Family Therapy

1650 Pilgrim Parkway • Elm Grove, WI 53122 • Phone & Fax: (414) 784-6858

TESTIMONY ON ASSEMBLY BILL 517

BY

ASSEMBLY COMMITTEE ON CONSUMER AFFAIRS

Presented by Judith A. Schaffer, M.A., CMFT
October 23, 1997

Good morning Chairperson Otte and members of the committee. My name is Judith Schaffer. I am a member of the Wisconsin Association for Marriage and Family Therapy, recently helped found the Milwaukee Area Association for Marriage and Family Therapy, and served as the first elected President. In only two years, our membership has grown to sixty. At monthly meetings, experts present workshops on topics as diverse as suicide, treating adoptive families, ethical implications of managed care, and researching the effectiveness of marriage and family therapy.

We are especially grateful to Representative Urban and the cosponsors in the Assembly and Senate for introducing 1997 Assembly Bill 517, which we strongly support. This bill changes the statutes governing the practice of Marriage and Family Therapy, Professional Counseling, and Social Work, by transforming the certification requirements under current law into licensing requirements. We believe that it is essential to do so for the following reasons:

- To protect consumer choice
- To support patient confidentiality
- To acknowledge federal trends requiring licensure for mental health professionals
- To address the reality of insurance company and managed care guidelines for provider status
- To respond to a recent federal court decision eliminating certification of titles

I am a recent transplant, having moved here three years ago from New York City. In 1984 I read a book by one of the foremost experts in Marriage and Family Therapy, describing a treatment approach developed here in Wisconsin at the Brief Family Therapy Center. My colleagues and I were intrigued. We began to use these techniques in treatment of a complex client population – families fostering and adopting foster children who had experienced abuse and neglect. We were gratified by both the elegance and effectiveness of the treatment described by Steve de Shazer, Insoo Kim Berg, Eve Lipchik, Elam Nunnally, Michelle Weiner-Davis, Ron Kral and the others at BFTC. Using a one-way mirror, and following our clients after therapy, allowed us to judge the worth of what is now called Solution Focused Brief Therapy.

This approach to treatment is practiced worldwide. Those who developed this model are in demand internationally as lecturers. Their schedules are filled for several years in

advance. They teach licensed Psychiatrists, Psychologists and other mental health professionals. Each presents their work at professional conferences. All publish books and articles in professional journals. Solution Focused Brief Therapy is part of the standard curriculum in mental health. Insurance and managed care companies accept it. YET NONE OF THOSE WHO CREATED IT ARE ELIGIBLE FOR LICENSURE IN WISCONSIN.

I often came to Milwaukee to learn and then to collaborate. I grew to love your State for many reasons, not the least being your incubation and support of leading marriage and family therapists like Carl Whitaker, Virginia Satir, and Alan Gurman. Not one would be, or is eligible for licensure in Wisconsin as a Marriage and Family Therapist. When my children became adults, they finally permitted me to move here in the summer of 1994. Coincidentally, Brief Family Therapy Center was holding a month long summer residency program. People who are licensed Psychiatrists, Psychologists, Physicians, Marriage and Family Therapists, Social Workers and Professional Counselors came here from the United States, Sweden, Norway, Korea, Bulgaria, Poland, Germany, Switzerland, Austria and England, to become more proficient in their practice of Solution Focused Brief Therapy. Yet those who they came to learn from are not eligible for licensure in Wisconsin.

Why is licensure so important to us? Very simply, because it protects a consumer's right to choose treatment, and, in addition, to be protected from the harm that results from incompetent treatment.

Licensure is currently the accepted language regarding mental health treatment. The trend of national legislation refers to licensure of mental health providers, not certification. Most people who seek treatment for mental health problems do so for symptoms associated with family and other relationship difficulties. A requirement that they see only licensed mental health providers would prevent them from choosing a professional uniquely educated and trained to treat clients as members of families and other groups and systems. Or they would have to pay for these services independently.

Insurance companies, and managed care providers are increasingly regional and national in scope. Although I have worked in Mandated Clinics, provider status is always granted to me as an individual. Each application that I complete refers to "licensure." Several clients, who sought treatment with me because of my expertise in adoption, were unable to use their insurance benefits, because I am not "licensed." When challenged, they refused to recognize certification.

Recent decisions in federal courts concern those of us who are certified, not licensed. One recent decision limited protection of confidential client information to licensed mental health providers. A second decision overturned certification of titles. It is only a matter of time before there are challenges to both client confidentiality and certification here in Wisconsin.

Thank you for giving me an opportunity to both live in your beautiful State, and also to represent the views of WAMFT and MAAMFT here today in strong support of licensure for Marriage and Family therapists.

Social Work Program
Department of Human Behavior and Diversity
University of Wisconsin-Superior
Superior, Wisconsin 54880

October 15, 1997

Clifford Otte, Chair
Assembly Consumer Affairs Committee
P.O. Box 8953
Madison, Wisconsin 53708

Dear Mr. Otte:

This is a letter in support of the four level practice act, Assembly Bill 517, which is scheduled for hearing before your committee on Thursday, October 23, 1997. We heartily endorse the idea that the current certification of social work in Wisconsin become a matter of licensure which includes all four levels, including the B.S.W. level. We further request that licensure not be expanded at the baccalaureate level to include all non-social work baccalaureate graduates, as is currently allowed under certification rules.

This Program has been working for over a year now with non-social work graduates, who seeing that there are jobs in our field at the entry level, have decided to pursue certification. Our experience tells us that these persons, while receiving wonderful educations in related areas, have little or no understanding of the history of social welfare and the development of the profession of social work. They usually lack the needed cross-disciplinary background in other required pre-professional areas like psychology, sociology, economics, political science, and anthropology which enable the B.S.W. graduate to approach client issues with a more fully informed knowledge base. Finally, the four courses that are currently required to prepare them for certification do not adequately prepare them for practice; they have not been adequately exposed to the knowledge and application opportunities necessary to function at all levels of practice (micro-mezo-macro) nor to a strong enough mix of education to prepare them for the ethical and human diversity issues they will face in the field. While many of them do use the required four courses/internship along with available study kits to "cram for the exam", they have only been minimally prepared for actual practice; they have not been socialized to rely on and be guided by the values and ethics of the profession which place client well-being, self-determination, empowerment, and social functioning at the heart of professional activity.

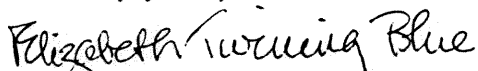
B.S.W. graduates must possess a demonstrated commitment to the work and ideals which are central to the practice of social work. They have to complete carefully crafted rigorous academic programs with closely supervised, contract-based field practica which have been individually designed to apply and integrate all their prior academic learning.

They also face formal admissions and screening processes which demand they examine their motivation and readiness for making a commitment to the profound and life-altering professional decision to work with vulnerable people. They must develop the research and other critical thinking skills so desperately needed in today's human service venues.

Because B.S.W. graduates hold a specialized professional degree which has prepared them for entry level practice, they enter the workplace ready to function professionally. It requires less time and money to integrate them into social work positions, and they are more versatile employees, having been prepared to work directly in a wide variety of helping, brokering, teaching, planning, administrative and change agent roles.

Today, given all the demands being made on our profession, it is more imperative than ever that persons entering the field at all levels be adequately prepared and ready to act. There is a difference between minimal acceptable levels of preparation and being fully professionally prepared. The clients we serve in both public and private arenas ought to be assured that the practitioners with whom they interact have been professionally educated and are ready to act with them and on their behalf. We urge you to consider the four levels of licensure and to focus on full, rather than minimally adequate preparation, for the responsibilities inherent in this work.

Sincerely yours,

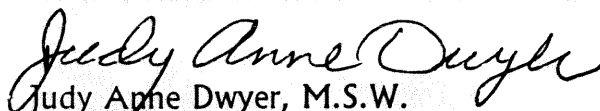


Elizabeth Twining Blue, M.S.W.

C.I.S.W. (Wisconsin)

L.I.S.W. (Minnesota)

Coordinator and Associate Professor of Social Work



Judy Anne Dwyer, M.S.W.

Coordinator of Field

Associate Professor of Social Work

NASW-WI Chapter Presentation to the Committee on Consumer Affairs
Thursday, October 23, 1997

I am a certified independent clinical social worker in this state and am here today to speak in favor of AB517 and to talk specifically about its relevance to the two independent or advanced practice certifications in the field of social work.

Certified Independent Social Workers have masters degrees from accredited schools and two years of experience. CISW's are found in administrative positions in public and non profit agencies; they often supervise other practitioners or programs, including social work services to special populations like youth, elderly, corrections, hospitals, residential treatment facilities, etc. CISW oversee highly sensitive social work services.

Certified Independent Clinical Social Workers, like myself have Masters Degrees and 3,000 hours of supervised clinical work before being able to practice psychotherapy in mental health settings, like outpatient clinics (private profit or non profit, public). We provide psychotherapy or counselling to individuals suffering from a wide variety of psychiatric disorders, including: depression, anxiety disorders, adjustment disorders. Clinical social workers help individuals, couples, and families with medical problems, disabilities, divorce, school problems, domestic violence and numerous other problems. We often work with psychologists and psychiatrists, schools and community resources.

When I began my practice as a clinical social worker, at private outpatient mental health clinic here in Madison, 23 years ago--I was one of only 3 in the phone book. Independent clinical social work was new to Wisconsin. Now you will find a couple columns of clinical social workers listed in the Yellow Pages. The Legislature has long recognized the importance of regulation in mental health care, with its licensure of psychiatrists and psychologists, but only recently, in 1993, certified clinical social workers--Wisconsin Act 160. This law finally provided consumers with a board to hear complaints and to take appropriate action in the public interest. The Board is also currently in the process of setting requirements for continuing education for the profession. Previously these activities had been left to the NASW-WI Chapter or other professional groups, who had the intention, but not the authority of law to regulate.

I am here not only representing NASW but also on behalf of CISW's and CICSW's to urge you to support AB517 for 3 reasons: consumer protection, freedom of informed choice for consumers, and privileged communication.

CONSUMER PROTECTION

AB517 will modify the title protection granted in the current certification bill to provide licensure for the **practice** of social work and clinical social work by qualified practitioners. Certification is not perceived as legally strong as licensure in sanctioning a profession. To illustrate this, let me refer you to a federal court decision in Florida in 1992. In *Abramson v. Gonzales* the court ruled that the Psychology Act which forbid unlicensed individuals from using the title "psychologist" was unconstitutional --that title protection violated commercial free speech. This precedent could put our state's certification or title protection at risk and leave consumers with not protection again. Currently the Certification Board is reviewing complaints on all four practice levels, so it is clear that such regulation is needed by the public. Also, in the United States, there are 43 states with licensure and practice protection. The American Association of State Social Work Boards, which oversees all state regulatory boards, has urged all states to move to a "practice act" model of regulating social workers. Their Model Practice Act has been used to design AB 517. To assure that consumers continue to have a regulation board to hear complaints, there must be a practice act like AB517.

CONSUMER CHOICE

Secondly, consumers need licensure for clinical social workers to be able to have choices in their provider selection. Consumers' choices of mental health providers can be limited by insurance companies or HMO's any time they decide to use **licensure** as a criterion for coverage. Currently, at least one WI insurance carrier and many out-of-state insurers will reimburse only **licensed** clinicians. This mean that consumers who are forced to change insurers because of a job move, may not be able to continue with clinical social workers with whom they have been working...interrupting the continuity of their mental health care.

PRIVILEGED COMMUNICATION

In my opinion, the most important reason for supporting AB517 is that licensure assures privileged communication for the person seeking mental health care. I know from my own practice that more and more clients are concerned about the confidentiality of their mental health records, especially as the technology of record keeping seems to be eroding our privacy. Privileged communication is an essential

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component of any client being able to trust a mental health professional and therefore use psychotherapy. That's the reason for the long tradition of privileged communication for psychologists and psychiatrists. While current law provides this for certified independent clinical social workers in this state, there has been a recent Supreme Court ruling that specifically extends this right but only to LICENSED clinical social workers. In June 1996, in *Jaffe v. Redmond*, the Supreme Court (7-2 ruling) ruled: (from syllabus)

The federal privilege, which clearly applies to psychiatrists and psychologists, also extends to confidential communications made to licensed social workers in the course of psychotherapy. The reasons for recognizing the privilege for treatment by psychiatrists and psychologists apply with equal force to clinical social workers . . .

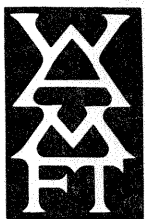
Justice Stevens went on to say:

The psychotherapist privilege serves the public interest by facilitating the provision of appropriate treatment for individuals suffering the effects of mental or emotional problems. The mental health of our citizenry, no less than its physical health, is a public good of transcendent importance.

This federal ruling definitely applies to LICENSED social workers, but will it extend to those only regulated with title protection? Wisconsin citizens and their psychotherapists deserve this protection of their privacy.

In summary, Wisconsin social workers practicing at the two independent practice levels, run countless agencies and programs and provide the majority of mental health services in the state. Social workers are among the most affordable clinicians, serving numerous Wisconsin citizens. AB 517 is important because it will provide WI citizens the ability to identify qualified independent and independent clinical social workers, the guarantee of both privileged communication with their clinician, as well as a board to hear their complaints if that should be needed.

Reuben Berkholz
608-274-0355



Wisconsin Association for Marriage and Family Therapy

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23 October 1997

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TO: Members of the Assembly Committee on Consumer Affairs: Clifford Otte (chair), Donald Hasenohrl, DuWayne Johnsrud (vice-chair), Michael Lehman, Alvin Ott, Frank Urban, Polly Williams, .

FROM: Fred Devett, CMFT, CICSW, President, Wisconsin Association for Marriage and Family Therapy (also representing our colleagues, the Professional Counselors)

The Wisconsin Association for Marriage and Family Therapy supports Assembly Bill 517 amending current law under Act 160 to transform current certification to title requirements to licensing requirements establishing a scope of practice for marriage and family therapists, professional counselors, and social workers.

It is becoming increasingly important to give the consumer, the employer and the insurance company a clear and consistent means by which to identify the credentials of practicing mental health professionals. Current regulation certifies individuals to use titles, thereby restricting who may call themselves a marriage and family therapist, a professional counselor, a social worker. Exactly what "certification" means, however, continues to elude the public. "What's the difference?" they ask. "So why aren't you licensed?" Because the regulation is not specific, consumers are hampered in their selection process. Insurance Companies are equally unclear.

The confusion begins with the very identification card that is issued. It states (bottom left-hand corner) "Signature of Licensee" and further states, as does the "certificate" on our office walls that I am "authorized to engage in the practice indicated." There is no current law in Wisconsin regulating who may do what I do in the practice of marriage and family therapy, and furthermore, Wisconsin law forbids me to say that I am "licensed," what is stated on my card notwithstanding.

As the health industry continues its changes and reforms, health care is becoming increasingly "regulated" by managed care companies and insurance coverage guidelines which establish credentialing requirements. Uniform language is sorely needed here. Their credentialing processes and case management frequently extend over large regions, sometimes the nation. Access to marriage and family therapists and professional counselors, as well as social workers, is often denied if the professional is not "licensed." Some insurance companies recognize "certification" along with licensure, many do not, "certification" cited as being "vague" or simply meaningless. Consumer choice is frequently limited simply by confusion in language.

We are concerned also by the direction of several recent Court decisions. A Federal court in Florida (Abramson v. Gonzalez, 949 F.2d 1567, 11th Cir.1992) ruled that the regulation of title was unconstitutional based on "commercial free speech." The Supreme Court upheld the confidentiality rights of a licensed social worker in another matter (Jaffe v. Redmond, 51 F.3d 1346).

In the past, there have been concerns about legislation taking jobs away from individuals or groups. We do not see this amendment to current legislation as taking jobs away from anyone currently employed. We are open to exclusions that maintain current qualifications for employment.

In Testimony dated August 31, 1995, Secretary of the Department of Licensing and Regulation, Marlene Cummings, addressed this Committee regarding similar legislation for the practice of psychology (subsequently passed). She states "the public health, safety and welfare requires that individuals providing these services should be required to demonstrate minimum competence to do so." As with psychologists, we ask you to recognize the same importance in licensing our Professions and refer you to her complete testimony.

In conclusion, we need to be able to present our credentials to the public, to employers and to insurance companies in a consistent and easily recognizable form as well as to limit unregulated, incompetent practice, especially in areas as important and delicate as the mental wellbeing of our children and families.

Thank you.

A Division of the American Association for Marriage and Family Therapy



Tommy G. Thompson
Governor

Marlene A. Cummings
Secretary

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**Testimony on Assembly Bill 517
Before The
Assembly Committee on Consumer Affairs
Thursday, October 23, 1997, 9:00 A.M.
Room 417N, State Capitol**

Good morning, Chairman Otte and members of the committee. Thank you for the opportunity to testify **in support of Assembly Bill 517** which would grant licensure to social workers, marriage and family therapists and professional counselors. My name is Cornelia Gordon Hempt. I serve as Chair of the **Social Worker Section of the Examining Board of Social Workers, Marriage and Family Therapists and Professional Counselors.**

Currently social workers, marriage and family therapists and professional counselors have certification or title protection. I support raising the level of regulation to licensure because I believe this affords greater safeguard for the public. I resolutely believe our first and foremost duty is protection of the public.

I held my first social work job in 1962, received my masters in social work from UW-Madison in 1975, and have been gainfully employed as a social worker ever since. I have worked in mental health settings, student services and higher education, and now engage in planning and administration. Five years ago I was honored to be appointed to the Social Worker Section of the Examining Board, and was reappointed last year.

Social work is a profession whose clients are almost uniformly vulnerable. They may be abused children, the infirm elderly, families experiencing disruption, hospital patients facing a severe medical crisis. They seek social work services (or client needs are brought to their attention by professionals mandated to report suspected child abuse and neglect) in order to alleviate severe distress in their lives. These clients require that social workers make competent psychosocial assessments, establish a mutually workable and agreeable intervention plan, and initiate and implement treatment plans. All of this involves specific skills and knowledge attained in specialized academic settings, and in highly structured and supervised field placements.

Social workers invariably enter a client's world when he or she is most exposed and unprotected. The social worker must create a sense of trust with the client and often the client's family. The social worker must display appropriate professional ethics, respect the client's wishes and assist the client and family to resolve conflicts and dilemmas. He or she must remain as a part of the helping system until both client and social worker determine the problems have been resolved. Given the nature of these difficulties, any professional wishing to work with clients in alleviating their distress must be professionally educated and trained under supervision.

Regulatory Boards

Accounting; Architects, Landscape Architects, Professional Geologists, Professional Engineers, Designers and Land Surveyors; Auctioneer; Barbering and Cosmetology; Chiropractic; Dentistry; Dietitians; Funeral Directors; Hearing and Speech; Medical; Nursing; Nursing Home Administrator; Optometry; Pharmacy; Physical Therapists; Psychology; Real Estate; Real Estate Appraisers; Social Workers, Marriage and Family Therapists and Professional Counselors; and Veterinary.

Page 2

Testimony-AB 517

SW Sec.-Hempe

In the approximately five years since social work certification has been in effect, our section of the Examining Board has witnessed practitioners working with clients who are devoid of professional education, lacking a clear understanding of professional ethics and boundaries, and about whom clients have complained bitterly. These persons can attempt to ply their trade by using titles other than social worker, and remain in a position to harm clients.

This is neither an instance where the market should rule, nor the caveat "let the buyer beware" govern. You and I may be distressed if and when a new appliance or car is seriously flawed, but there is legal recourse to obtaining a refund or new product. Not so when one's psychological frame of mind or social relations are disturbed by inept practitioners. Establishing a practice act ensures a basic level of competency and training for those who would work with distressed and vulnerable people, and ensures those not so educated and trained cannot attempt experimental and/or inept practices on those in emotional pain. Finally, there are broad exemptions for professionals in related fields, and for those whose practices cover specific domains. Competent colleagues in related professions are free to practice their callings and will not be limited by this proposed practice act.

I believe firmly that licensure must be enacted at all four levels, as is currently in 1997 AB 517. While masters' degreed social workers practicing psychotherapy share certain similarities with marriage and family therapists and professional counselors, social work as a profession encompasses a broader range of practice than psychotherapy or mental health. It is for this reason that social workers are recognized at the Independent Social Worker level (e.g., those in administrative, planning or policy making roles). It is also the rationale behind enacting licensure at the basic level.

Assuming this committee approves of licensure, I urge you to retain is the basic social work level. Those who would be licensed at the basic level are prohibited by statute from practicing psychotherapy, but they perform great service in particularly in child welfare and in nursing homes. None of us wants to entrust our elderly parents to incompetent professionals, as happened to my father last year (although not by a social worker). Without licensure, my mother and siblings had no idea of how to register a complaint with a regulating body.

Thank you for considering this testimony. I am most willing to respond to any questions you may have.

CGH/mls