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**NAME OF BUREAU**

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**DIRECTOR**

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## **MANAGEMENT DIRECTIVE**

**SUBJECT:** **CLINICAL LICENSURE PROGRAM POLICY (LCSW, LMFT, LPCC)**

**POLICY #** MD 18-01

**EFFECTIVE DATE:** May 25, 2018

This Management Directive cancels and replaces MD 02-04 dated April 2002. The Statutes and Regulations Relating to the Practice of: Professional Clinical Counseling, Marriage and Family Therapy, Educational Psychology, and Clinical Social Work issued by the Board of Behavioral Sciences, January 2018 will be referenced throughout this policy. The Department's Clinical Licensure Program secures and coordinates clinical supervision for all eligible DCFS employees. It meets the experience and supervision standards and follows the regulatory requirements set by the BBS, Business and Professions Code of California, Chapter 13 (LMFT), Chapter 14, (LCSW) and Chapter 16, (LPCC) and California Code of Regulations, Article 3 (LPCC), Article 4 (LMFT) and Article 6 (LCSW).

Current policy, procedures, and forms regarding the Department of Children and Family Services' Clinical Licensure Program can be found on the [Education and Licensure Section website](#) on LA Kids Intranet. All information related to state licensing for LCSW, LMFT and LPCC can be found on the Board of Behavioral Sciences website at [www.bbs.ca.gov](http://www.bbs.ca.gov).

### **1. DEFINITIONS**

#### **A. Eligible Employee**

Any permanent full-time employee (licensed or unlicensed) who maintains a satisfactory or better rating on his/her performance evaluation is eligible to

participate in the Clinical Licensure Program. A new employee's probationary status does not prohibit participation in the program.

B. Eligible Supervisee

Any unlicensed employee who is BBS registered as an Associate Social Worker (ASW), an Associate Marriage and Family Therapist or an Associate Professional Clinical Counselor and who provides direct services as defined by their registration status and BBS scope of practice guideline and has taken the Law and Ethics licensing exam.

**NOTE:** DCFS will do its best to accommodate the needs of all eligible employees who participate in this program. Program funding and the unavailability of clinical supervisors at times create limitations which may negatively impact your experience.

C. ASSOCIATE

An unlicensed person registered with the BBS as an Associate Clinical Social Worker (ASW). An Associate must possess a master's degree (MSW) from an accredited school or department of social work. BBS Statutes and Regulations, January 2018 SECTION 4996.18.

D. ASSOCIATE MARRIAGE AND FAMILY THERAPIST

"An unlicensed person who has earned his or her master's or doctor's degree qualifying him or her for licensure and is registered with the board" as a Marriage and Family Therapist Intern. BBS Statutes and Regulations, January 2018 SECTION 4980.03.

E. ASSOCIATE PROFESSIONAL CLINICAL COUNSELOR

"An unlicensed person who meets the requirements of Section 4999.42 and is registered with the board". BBS Statutes and Regulations, January, 2018 Section 4999.12.

F. Eligible Clinical Supervisors

- 1) Meets the "REQUIREMENTS FOR ASSOCIATE CLINICAL SOCIAL WORKER SUPERVISORS" as stipulated in Article 6, Section 1870 of the California Code of Regulations within the BBS Statutes and Regulations, January 2018 and/or
- 2) Meets the "REQUIREMENT FOR SUPERVISORS" as stipulated in Article 4, Section 1833.1 of the California Code of Regulations within the BBS Laws and Regulations, January 2018 and/or

- 3) Meets the “REQUIREMENTS FOR SUPERVISORS” as stipulated in Article 3, Section 1821 of the California Code of Regulations within the BBS Laws and Regulations, January 2018 and
- 4) Has a current and valid license in “good standing.”
- 5) Has “practice psychotherapy as part of his/her clinical experience for at least two (2) years within the last five (5) years immediately preceding supervision.”
- 6) Has taken the required Clinical Supervision Training.
- 7) Has been licensed for at least 2 years prior to commencing any supervision.
- 8) Has a completed and signed Supervisor Application on file with the Clinical Licensure Program.

G. Clinical Licenses

Licensed Clinical Social Worker (LCSW)  
Licensed Marriage and Family Therapist (LMFT)  
Licensed Professional Clinical Counselor (LPCC)

**NOTE:** It is a BBS mandate that LCSW's, LMFT's, and LPCC's secure continuing education units (CEUs) prior to license renewal. The number of required units can always be found in the BBS Laws and Regulations and currently totals 36.

H. Clinical Supervision

“Supervision means responsibility for and control of the **quality** of clinical social work services being provided. Consultation shall not be considered to be supervision.” BBS Statutes and Regulations, Article 4, Section 4996.23 (c).

“Supervision includes ensuring that the extent, kind, and quality of counseling performed is consistent with the education, training, and experience of the person being supervised”. BBS Statutes and Regulations, Chapter 16, Article 1, Section 4999.12 (m-1).

“Complies with supervision requirements established by this chapter and by board regulations”. BBS Statutes and Regulations, Chapter 13, Article 1, Section 4980.03 (g-5).

“Defined as the relationship between supervisor and supervisee in which the responsibility and accountability for the development of competence, demeanor, and ethical practice take place.” NASW Standards in Social Work Supervision, 2013.

I. Clinical Supervision Options:

- a) **Individual Supervision:** One hour of face-to-face contact with one supervisor and one supervisee.
- b) **Group Supervision:** Two hours of face-to-face contact in a group of not more than 8 Supervisees and one or more Supervisors.
- c) **Videoconferencing:** “can be defined as connecting two or more locations at the same time utilizing cameras, microphones, monitors and a network.” Videoconferencing is considered face-to-face supervision and may be done in either individual or group. There is no limit to the number of hours that may be claimed through live two-way videoconferencing in a government entity.

J. Clinical Social Work

“The practice of clinical social work is defined as a service in which a special knowledge of social resources, human capabilities and the part that unconscious motivation plays in determining behavior, is directed at helping people to achieve more adequate, satisfying, and productive social adjustments. The application of social work principles and methods includes, but is not restricted to, counseling and using applied psychotherapy of a non-medical nature with individuals, families, or groups; providing information and referral services; providing or arranging for the provision of social services; explaining or interpreting the psychosocial aspects of the situations of individuals, families, or groups; helping communities to organize, to provide, or to improve social or health services; or, doing research related to social work; and the use, application, and integration of coursework and experience required by Sections 4996.2 and 4996.23”. BBS Statutes and Regulations, Section 4996.9 January 2018.

“Clinical social work has a primary focus on the mental, emotional, and behavioral well-being of individuals, couples, families, and groups. It centers on a holistic approach to psychotherapy and the client’s relationship to his or her environment. Clinical social work views the client’s relationship with his or her environment as essential to treatment planning.” NASW Standards for Clinical Social Work, 2005.

K. Social Work Case Management

“A process to plan, seek, advocate for, and monitor services from different social services or health care organizations and staff on behalf of a client.”  
“The social work case manager engages the client (and, when appropriate, other members of the family system) in all aspects of case management and tailors services to the client’s needs, preferences, and goals. The therapeutic relationship or working alliance between the social work case manager and the

client is integral to helping the client achieve her or his goals.” NASW-Social Work Case Management Standards, 2013.

L. Psychotherapy

“Psychotherapy, within the meaning of Chapter 14 of the Business and Professions Code (Section 4996.9) is the use of psychosocial methods within a professional relationship, to assist the person or persons to achieve a better psychosocial adaptation, to acquire greater human realization of psychosocial potential and adaptation to modify internal and external conditions which affect individuals, groups, or communities in respect to behavior, emotions, and thinking, in respect to their intrapersonal and interpersonal processes.”

M. Direct Supervisor

Direct Supervisors hold the Department’s work item of SCSW. A Direct Supervisor may or may not be the supervisee’s Clinical Supervisor and is responsible for the training, job performance, supervision and case management decisions of their employee.

N. Program Coordinator

A member of the Education and Licensure Section, the Clinical Licensure Program Coordinator is responsible for the organization, maintenance, and enhancement of the Clinical Licensure Program including but not limited to supporting licensed employees, securing clinical supervision resources for registered employees, the provision of clinical supervision, oversight of agency adherence to BBS Law and Regulations and monitoring of BBS trainings provided to agency staff, consultation services to BBS licensed and registered staff; provision of BBS information and updates, and presentations of the Clinical Licensure Program at all academies.

## **2. POLICY AND STANDARDS**

- A. The protection and safety of a child is always the first priority.
- B. DCFS case records are confidential under applicable law, including but not limited to Welfare and Institutions Code Section 827 and order of the Los Angeles County Juvenile Court. Failure to follow confidentiality policy may lead to disciplinary action, including discharge, civil action and criminal prosecution.
- C. The policy and procedures in this release are effective upon release for all DCFS employees who are BBS licensed as an LCSW, LMFT, LPCC or BBS registered as an ASW, an Associate Marriage and Family Therapist, or an

Associate Professional Clinical Counselor who have applied for participation in the Clinical Licensure Program.

- D. The Clinical Licensure Program identifies and communicates with DCFS employees who are interested, registered or licensed with the Board of Behavioral Sciences. The process begins with new employees at all academies with a formal presentation of the Clinical Licensure Program. All program participants are placed in e-mail distribution lists which allows for ongoing communication and organization.
- E. Clinical supervision cannot be provided to LMFT Trainees or to Clinical Counselor Trainees. The reasons include but are not necessarily limited to 1.) a lack of resources creates an inability to meet the school's expected time frames, 2.) not being recognized as an acceptable placement to claim practice hours by many schools 3.) agency inability to meet school expectations of their practice requirements, 4.) agency approval process makes timely signing of agreements extremely difficult.
- F. Clinical supervision will no longer be available to employees who have received or completed their hours at DCFS but failed to apply for and take their licensing exam. Any exceptions to this must be approved by the Clinical Licensure Program Manager.
- G. Though it is not a requirement for employment, it is Department policy to provide clinical supervision towards licensure to all eligible employees. Providing clinical supervision for employees while they pursue an LCSW, LMFT, or LPCC license serves to enhance clinical case management practice with clients and fosters professional growth for staff. DCFS provides pre-licensure training and post-licensure continuing education training courses as well as encourages both CSW's and SCSW's to use their individual \$300.00 annual self-directed education funds towards licensure related costs. Participation in the Clinical Licensure Program is voluntary. The ability to secure clinical supervision is contingent upon the availability of licensed staff who agrees to provide such supervision and program funding.
- H. Participation in the Clinical Licensure Program as a Clinical Supervisor or a Clinical Supervisee shall be counted as part of an employee's work week and, therefore, may occur on county time.
- I. An LCSW, LMFT, or LPCC employee who, by application, is participating in the Clinical Licensure Program is the only authorized individual to provide clinical supervision and sign for licensure hours at DCFS. There are no exceptions.
- J. An employee who seeks and secures clinical supervision from a resource outside of DCFS **may not apply this supervision towards their DCFS work experience. DCFS policy regarding client confidentiality and the confidentiality of case records prohibits the processing of effective clinical supervision according to BBS standards. Agency policy**

**regarding client confidentiality remains paramount to the BBS regulations regarding an employee's ability to secure clinical supervision from a non-employee.**

- K. The DCFS Clinical Licensure Program conforms to the BBS regulations applicable for each license. It is the primary responsibility of the Clinical Supervisor and the Clinical Supervisee to know and follow the guidelines set by the current BBS standards, laws, and regulations. Clinical Supervisors remain responsible to ensure that the supervision they provide and sign hours for meets BBS standards. Clinical Supervisees who seek licensure remain responsible for the pursuit of their license including maintaining their registration with the BBS, performing practice hours as defined by their license scope of practice guideline, securing the training required, being proactive in securing and attending clinical supervision, and passing the licensing exams.
- L. Participation in the DCFS Clinical Licensure Program must be through the application process highlighted in the Procedures Section of this policy directive. All program participants must have management approval to provide or receive clinical supervision. The Supervisee and Supervisor Program applications document management approval. ([Attachment I](#) and [II](#)).
- M. Clinical Supervisors are provided reimbursement for their services to the program through a monthly stipend. Supervisors may claim this reimbursement on a monthly basis but should claim the reimbursement no later than on a quarterly basis (every 3 months).
- N. Employees participating in clinical supervision may use a maximum of four hours per week. This allows for participation in either individual or group supervision and travel time to secure such supervision at other work locations. Mileage may also be claimed as clinical supervision is part of an employee's work week. Employees are not allowed county time to participate in "study group" activities which are solely for the purpose of studying for the licensing exam. Employees must use their own time to study for and/or take their licensing exams.
- O. Securing clinical supervision for employees in their office or in the office nearest to them remains a program goal.
- P. Employees in the following positions: Hotline, IDC, Court Officer, HSA, management, and administration will not be supported by the Clinical Licensure Program to secure clinical supervision as these job functions are not clinically oriented. Employees must be doing direct clinical practice to participate in the clinical licensure program.

- Q. Employees in the SCSW job function may claim clinical hours while in clinical supervision *if* they are doing clinical hours of practice. Oversight for SCSWs in clinical supervision is defined and guided by the Clinical Licensure Program through the SCSW-Scope of Practice Agreement ([Attachment III](#)) and the SCSW Tracking Log ([Attachment IV](#)) forms.
- R. Employees whose primary job function is not direct client service must add a clinical component, under supervision, to accrue qualifying experience hours. Administrative tasks, travel time, indirect services and agency paperwork **do not count** as qualifying hours of experience. **Qualifying experience is defined by the BBS through the BBS scope of practice guidelines, tracking logs, and Experience Verification forms.**
- S. The clinical Supervisor/Supervisee relationship:
- 1) Clinical supervision can be provided by an employee's direct operational supervisor or any other licensed employee so long as the Supervisor/Supervisee relationship **does not create a conflict of interest for either party.**
  - 2) If during the course of supervision, the Clinical Supervisor becomes aware of any physical or emotional impairment of a Supervisee that significantly impacts his/her work with DCFS clients, this information shall be shared with appropriate parties to maintain the safety of the clients involved.
  - 3) Clinical Supervisors are encouraged to terminate supervision with Supervisees who fail to resolve or grow from issues addressed in supervision and who demonstrate a disregard for the process by failing to attend or come prepared for supervision on a regular basis. Clinical Supervisors serve as gatekeepers to the exam and as such provide a safety net for the clients we serve.
  - 4) Formal termination of the supervisee/supervisor relationship is a professional expectation that should be met prior to any clinical supervisee entering into another clinical supervision arrangement.
  - 5) In the event of a disagreement between the clinical supervisor and the clinical supervisees' direct supervisor, both parties shall meet to discuss/resolve areas of concern as soon as possible. If the disagreement cannot be satisfactorily resolved, the supervisees' chain-of-command will be followed for consultation/resolution. Case-management decisions remain the primary responsibility of the CSW/SCSW.
- T. All employees who are licensed or registered with the BBS are expected to acknowledge, understand, and abide by their profession's "code of ethics."
- U. The Clinical Licensure Program Coordinator is responsible to report to the Clinical Licensure Program Manager any employee who is under BBS



disciplinary action. Issues of concern related to participating in clinical supervision will be addressed directly with the employee by the Licensure Program Manager or designee.

- V. Staff licensed and registered with the BBS must be aware of and adhere to their licensing laws and regulations regardless of employment role functions or Department expectations. DCFS employment does not provide exemption from BBS rules and regulations regarding practice behaviors and advertising guidelines.
- W. All employees licensed and registered with the BBS must display their license or registration certificate in a conspicuous place at their primary place of practice and adhere to advertising mandates defined by the BBS. Business cards must include licensed or registered complete title OR the initials of the BBS status AND the license or registration number. Additionally, BBS registrants shall inform their clients of their status and identify their clinical supervisor by name and number on their business cards.
- X. The Board will accept a maximum of 40 hours per week of qualifying experience. Given our exempt setting and the fact that employees must perform many tasks that are not defined as clinical, the Clinical Licensure Program has set the maximum standard at 30 hours for case-carrying positions and 10 hours for SCSW positions. Any clinical hours above those maximum standards should be claimed on an approved OT basis and the clinical supervisor should secure documentation of this. Actual hours may be less depending on the work assignment of the supervisee.

### **3. PROCEDURES**

- A. Information and forms regarding the Clinical Licensure Program can be obtained directly from the Program Coordinator or the [Education and Licensure website](#) or the [DCFS policy website](#) on LAKids.
- B. The Clinical Licensure Program provides the BBS mandated oversight of the clinical supervision process through 1.) Coordination of services, 2.) Clarification of the BBS rules/regulations/directives/guidelines, 3.) Participation in BBS meetings and decimation of updates/changes, 4.) Provision of consultation services to both licensed and registered participants.
- C. All active participants in the Clinical Licensure Program must first be BBS licensed as an LCSW, LMFT, or LPCC or registered as an ASW, an Associate Marriage and Family Therapist or an Associate Professional Clinical Counselor.
- D. Licensed or Registered Program participants found not following stated program policy will be denied the ability to provide or receive clinical supervision

for a period of no less than 6 months. Exceptions to this and return to active program participation must be approved by the Clinical Licensure Program Manager.

- E. Unlicensed employees who seek clinical supervision but who are not yet registered with the BBS will be considered “deferred” until BBS registration is secured. Clinical supervision towards licensing hours cannot be acquired without first being BBS registered with a “clear” status.
- F. A BBS registered employee seeking clinical supervision must first secure management approval which is documented on the Clinical Licensure Program’s Supervisee Application ([Attachment I](#)). The employee must provide to the program coordinator a completed and signed Supervisee Application with a copy of the BBS registration certificate and documentation that 1.) the first Law and Ethics exam has been taken and passed, or 2.) the 12-hour course has been taken and registration for retaking the exam is secured.
- G. All documentation should be scanned to the program coordinator. If scanning capability is not available, the employee may fax or mail to the address on the application. The Program Coordinator will confirm by email the receipt of all documentation and the fact that the applicant has been placed on the **Program’s Needs List** (for supervision).
- H. Employees seeking clinical supervision must be on the Program’s Needs List. The Needs List is updated every month and emailed to all participating licensed employees who are currently on file and able to provide clinical supervision. The clinical supervisor will contact the employee in need of supervision directly or ask the coordinator to refer to them people in need of supervision. Once an arrangement for supervision has been confirmed, the supervisee’s name is removed from the list. It remains the supervisee’s responsibility to contact the program coordinator should their status and need change.
- I. Effective 1-1-16, the BBS restructured the licensing exams which will now require BBS registrants to take and pass a written Law and Ethics exam within the first year of their BBS registration. **Upon the effective date of the Clinical Licensure Program Policy, DCFS employees who secure their BBS registration on or after 1-1-16 will not be placed on the Needs List or provided clinical supervision until proof this test has been passed or if not passed, proof the registrant has scheduled to retake it. This does not apply to registrants on program lists prior to this DCFS policy change.**
- J. Clinical Supervisors decide who they work with and when they start and stop supervision as long as the individuals who are offered supervision are identified through the Program’s Needs List.
- K. The **Program’s Ineligible List** is updated and emailed every month to all participating licensed employees who are currently on file and able to provide clinical supervision. Employees listed are those who are BBS registered and wanting clinical supervision but remain ineligible to get supervision due to 1.) no

signed application on file, 2.) having a “delinquent” registration status with the Board, or 3.) being in a non-clinically oriented job function.

- L. The Program's Needs and Ineligible Lists are shared on a regular monthly basis with all program participants who need and want clinical supervision. Healthy communication supports adherence to program procedures and calms the individual's anxiety regarding waiting time frames and allows the coordinator to get necessary updated information.
- M. Licensed employees who choose to provide clinical supervision must first complete the Program's Supervisor Application ([Attachment II](#)). The application is complete when administrative approval has been secured and a recommendation for participation has been made. The applicant must provide to the Program Coordinator the signed Supervisor Application, a copy of their current BBS license and proof that the BBS mandated training has been completed. The Program Coordinator will confirm receipt of application and materials by email and place the clinical supervisor on the Program's Active Clinical Supervisor's email distribution list. The new applicant will now receive on a monthly basis the Program Lists and all communication directed to active clinical supervisors.
- N. The Program Coordinator provides a mini orientation to all new clinical supervisors at their worksite to review program procedures, BBS mandates, and be available to support the new process and respond to specific questions and needs.
- O. Completion of the Supervisor or Supervisee Application form is required for participation in the Clinical Licensure Program. A new application is not required when there is a change in work location or management chain. A new application will be required when 1.) a promotion or change in job function occurs, 2.) returning from a leave of absence, 3.) disciplinary action is taken and participation in clinical supervision is removed by management.
- P. The LCSW, LMFT, and LPCC License must be renewed with the BBS every two years. BBS registrants must renew yearly. Documentation of program participants' status and renewals are secured by the program coordinator directly off the [BBS website](#).
- Q. Clinical Supervisors and Supervisees shall maintain their own records regarding their participation in clinical supervision. Clinical supervision must be weekly and structured to place and time. Clinical supervisors should have their supervisees sign-in to document their attendance. A sign-in sheet has been provided by the Clinical Licensure Program to simplify the request ([Attachment VI](#)).
- R. The BBS mandated forms are fundamentally the responsibility of the supervisee to secure and safeguard as it becomes part of the application for licensure. Supervisees are provided the original forms from every clinical supervisor they

work with. Clinical Supervisors should make copies of all BBS forms provided to their supervisees. The identified forms are:

- The Supervisor Responsibility Statement is required for the LCSW, LMFT and LPCC
- The Supervisory Plan is required for the LCSW and LPCC
- The ASW Weekly Log required for LCSW
- The Weekly Summary of Hours of Experience required for LMFT and LPCC
- The Experience Verification Form required for LCSW, LMFT and LPCC

S. To be licensed as an LCSW, LMFT or LPCC, a registrant must take and pass two written examinations. To get licensed and be allowed to take the second clinical exam, the registrant must complete the following:

- Take and pass the first written Law and Ethics exam
- 3200 hours of practice for an ASW
- 3000 hours of practice for LMFT and LPCC Associates
- 104 weeks of clinical supervision for ASWs, LMFT and LPCC Associates

T. Clinical Supervisors claim reimbursement for weekly hours of supervision provided by completing the Clinical Supervision Claim form ([Attachment V](#)). This form must be completed and signed by the Clinical Supervisor and either the Regional Administrator or Assistant Regional Administrator. The **original** signed form must be forwarded to the Clinical Licensure Program Manager. The Program Manager will sign and forward to finance for payment after the Program Coordinator reviews and cross references the information provided with the information on file.

U. Direct Supervisors who also provide Clinical Supervision for BBS registrants in their unit may claim a reimbursement for the clinical supervision provided.

V. Clinical Supervisors claim reimbursement on a monthly basis and may claim on a quarterly basis. Clinical Supervisors not in compliance with license renewal, mandated trainings, or program procedures will not have their reimbursement claims approved for payment. Directives regarding reimbursement amounts can be found within the DCFS/Union Memorandum of Understanding (MOU) or the [Clinical Licensure Program website](#).

## 4. **FORMS**

### A. DCFS Forms Required:

1. Clinical Licensure Program, Supervisee Application, **Rev. 07/24**  
([Attachment I](#))
2. Clinical Licensure Program, Supervisor Application, **Rev. 09/24**  
([Attachment II](#))
3. Scope of Practice Agreement-SCSW, dated 12/14  
([Attachment III](#))
4. SCSW Tracking Log, dated 12/14  
([Attachment IV](#))
5. Clinical Supervision Claim Form, **Rev. 04/25**  
([Attachment V](#))
6. Clinical Licensure Program Supervision Sign-in Sheet, **Rev. 05/25**  
([Attachment VI](#))
7. Clinical Licensure Program Responsibility Statement, **Rev. 12/24**  
([Attachment VII](#))



## County of Los Angeles Department of Children and Family Services



### Clinical Licensure Program Supervisee Application

The Department of Children and Family Services' Clinical Licensure Program provides clinical supervision to eligible employees. The Department's Clinical Licensure Program meets the experience and supervision standards set forth by the Board of Behavioral Sciences (BBS) as stated in Business and Professions Code and the BBS Statutes and Regulations relating to the practice of LCSWs, (chapter 14), LMFTs, (chapter 13), and LPCCs (chapter 16).

The Department's Clinical Licensure Program manages the process for registered employees seeking clinical supervision. It is the goal of the Department's Clinical Licensure Program to guide and supervise practice skill development to BBS registered employees toward the provision of clinically oriented client services.

"Clinical Social Work and psychotherapy" (section 4996.9) is defined by BBS as follows:

*"The practice of clinical social work is defined as a service in which a special knowledge of social resources, human capabilities, and the part that unconscious motivation plays in determining behavior, is directed at helping people to achieve more adequate, satisfying, and productive social adjustments. The application of social work principles and methods includes, but is not restricted to, counseling and using applied psychotherapy of a nonmedical nature with individuals, families, or groups; providing information and referral services; providing or arranging for the provision of social services; explaining or interpreting the psychosocial aspects in the situations of individuals, families, or groups; helping communities to organize, to provide, or to improve social or health services; doing research related to social work; and the use, application, and integration of the coursework and experience required by Sections 4996.2 and 4996.23.*

*Psychotherapy, within the meaning of this chapter, is the use of psychosocial methods within a professional relationship, to assist the person or persons to achieve a better psychosocial adaptation, to acquire greater human realization of psychosocial potential and adaptation, and to modify internal and external conditions which affect individuals, groups, or communities in respect to behavior, emotions, and thinking, in respect to their intrapersonal and interpersonal processes."*

**NOTE: The DCFS Management Directive supports and encourages eligible staff in their efforts to secure clinical supervision; however, the decision to engage in or maintain a clinical supervision relationship remains with the Clinical Supervisor.**

#### **Applicant's responsibilities:**

1. Be registered with the Board of Behavioral Sciences (BBS) prior to applying for and acceptance to the Department's Clinical Licensure Program.
2. Provide confirming documentation that they have passed the BBS Law and Ethics exam in order to secure clinical supervision services.
3. Attach a copy of their BBS registration certificate and display the certificate at their worksite per BBS advertising guidelines.
4. Per the DCFS Management Directive, applicants are not required to complete probation in order to participate in the Department's Clinical Licensure Program. However, employees must receive management approval to participate in clinical supervision and be in control of their job function responsibilities prior to requesting clinical supervision services.

**DCFS Education and Licensure Section  
Clinical Licensure Program**

[Scan documents to: [DCFS Clinical Licensure Program](#)]  
For questions, please email the [DCFS Clinical Licensure Program](#) Inbox.

## Applicant Information

**Applicant Signature**

## Management Approval

Date Application Received by Program Coordinator:	
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## Clinical Licensure Program Supervisor Application



The Department of Children and Family Services Clinical Licensure Program secures and coordinates clinical supervision for all eligible DCFS employees. The goal of our program is to support DCFS staff in providing clinically based services to their clients. The BBS defines Clinical Social Work and Psychotherapy as follows:

*“A service in which a special knowledge of social resources, human capabilities and the part that unconscious motivation plays in determining behavior, is directed at helping people to achieve more adequate, satisfying, and productive social adjustments. The application of social work principles and methods includes, but is not restricted to, counseling and using applied psychotherapy of a non-medical nature with individuals, families, or groups; providing information and referral services; providing or arranging for the provision of social services; explaining or interpreting the psychosocial aspects in the situations of individuals, families or groups; helping communities to organize, to provide, or to improve social or health services; or doing research related to social work.”*

*“Psychotherapy, within the meaning of this chapter (Chapter 14, subsection 4996.9), is the use of psychosocial methods within a professional relationship, to assist the person or persons to achieve a better psychosocial adaptation, to acquire greater human realization of psychosocial potential and adaptation, to modify internal and external conditions which affect individuals, groups, or communities in respect to behavior, emotion, and thinking, in respect to their intrapersonal and interpersonal processes.”*

“Supervision means responsibility for and control of the quality of clinical social work services being provided.” It is “the relationship between supervisor and supervisee that promotes the development of responsibility, skill, knowledge, attitudes, and ethical standards in the practice of clinical work.”

### **Guidelines for licensed staff who are willing to provide clinical supervision:**

1. Licensed staff applying to provide clinical supervision must be licensed for a minimum of two years in order to provide clinical supervision.
2. The following must be submitted to the Clinical Licensure Program:
  - a. Clinical Licensure Program Supervisor Application.
  - b. DCFS Supervisor Agreement.
  - c. A current copy of the clinical license.
  - d. Verification of the mandated clinical supervision training (training transcript or certificate of completion).
3. It is the responsibility of the Clinical Supervisor to maintain a thorough understanding of the BBS rules and regulations that define clinical supervision.
4. The decision to engage or continue in clinical supervision with a Supervisee remains solely with the Clinical Supervisor.
5. The Clinical Supervisor “has practiced psychotherapy or provided direct supervision of ASWs, Marriage and Family Therapist (MFT) Interns or Trainees who performed psychotherapy in two of the past five years immediately preceding the commencement of supervision.”
6. Financial reimbursement is available for services provided to the program (*Represented Staff Only*).

### **DCFS Education and Licensure Section**

Clinical Licensure Program

[Scan documents to: [DCFS Clinical Licensure Program](#)]

For questions, please email the [DCFS Clinical Licensure Program](#) Inbox.



LCSW Number: \_\_\_\_\_ MFT Number: \_\_\_\_\_ First Issued: \_\_\_\_\_

<b>Program Coordinator's Signature</b>	<b>Date</b>
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**County of Los Angeles  
Department of Children and Family Services**



**Scope of Practice Agreement-SCSW**

**Clinical Practice:**

The SCSW job function is a management position that may offer employees' opportunities for direct practice with clients that may meet the BBS scope of practice standards for both the LCSW and LMFT license (BBS Statutes and Regulations sections 4996.9 and 4980.02). Detailed documentation of qualifying practice performed while under clinical supervision is required to strengthen agency oversight of the process and to ensure that all employees involved are meeting the BBS expectations for practice in the same manner.

**Claiming of Hours:**

The number of clinical practice hours that may be claimed is fundamentally defined by the number of qualifying hours of practice the individual actually performs each week. BBS regulations sets the maximum hours they will accept at 40 weekly hours of clinical practice while under supervision. Generally speaking, it is a fair to state that, given the tasks required of all DCFS employees, employees do not do 40 weekly hours of clinical practice that fit the BBS scope of practice guidelines. Accepting this as a general fact, the Clinical Licensure Program is setting maximum standards for all employees involved:

- A CSW in a direct practice position may claim a maximum of 30 hours per week.
- A Unit Supervisor (SCSW) position may claim a maximum of 10 hours per week.

Any additional hours that may be claimed will need to be documented through our agency approved overtime process. If the supervisee (SCSW) has overtime hours approved and is doing acceptable BBS practice; this approval should be provided to the Clinical Supervisor.

The BBS Experience Verification forms not only guide the total number of hours and weeks but it also describes how the practice must be done. Given the Board's guidelines for acceptable practice to meet the licensing exam, it is highly recommended that SCSW registrants seek outside clinical experiences to ensure success within the 6 year time frame set by the BBS.

I have read, understand and agree to the above statements.

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**BBS Registrant-Print Name and Signature**

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**Date**

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**BBS Clinical Supervisor-Print Name and Signature**

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**Date**



**County of Los Angeles  
Department of Children and Family Services**



**SCSW Tracking Log for week of \_\_\_\_\_**

**“Client contact” done in the services of the supervisory/management role DOES NOT meet the standard for qualifying practice to claim while under clinical supervision. Qualifying direct practice includes but is not necessarily limited to the following:**

Description of direct client contact practice performed: (Check those that apply and number of hours worked):

☐ Case assignments: \_\_\_\_\_

☐ Home visits: \_\_\_\_\_

☐ Compliance visits: \_\_\_\_\_

☐ CFT Meetings: \_\_\_\_\_

☐ Family Conferences: \_\_\_\_\_

☐ Youth groups: \_\_\_\_\_

☐ Teen Clubs: \_\_\_\_\_

☐ AB12 Groups: \_\_\_\_\_

☐ Other: Describe: \_\_\_\_\_

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**Without approved overtime (O.T.) no more than 10 hours of clinical practice hours may be claimed each week.**

Cases worked- identified by name and case number: (158 attached)

1.

2.

3.

4.

5.

\_\_\_\_\_  
Clinical Supervisor signature

\_\_\_\_\_  
Date

Form to be used in conjunction with BBS tracking logs for both the LCSW and LMFT. BBS logs track both clinical and non clinical acceptable practice hours.

All tracking forms support the completion of the Experience Verification Forms for both the LCSW and LMFT.



# Clinical Supervision Claim Form



Clinical Supervision (Claimant) \_\_\_\_\_ Employee # \_\_\_\_\_

Work Address: \_\_\_\_\_

License #: \_\_\_\_\_ Expires on: \_\_\_\_\_ Month Claimed: \_\_\_\_\_ Year Claimed: \_\_\_\_\_

I have provided clinical supervision for the employees listed below and shall claim the following:  
(Please check on option)

- ☐ The \$40 monthly stipend for a weekly average of at least 1 hour of licensure supervision.
- ☐ The \$80 monthly stipend for a weekly average of at least 2 hours of licensure supervision.
- ☐ The \$120 monthly stipend for a weekly average of at least 3 hours of licensure supervision.
- ☐ The \$160 monthly stipend for a weekly average of at least 4 hours of licensure supervision.

Supervisee	Employee #	BBS Reg. #	Work Address	Type of Supervision

The above information is a true and accurate account of the clinical supervision I have provided. I am qualified to provide Clinical supervision according to BBS Standards.

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

The above Employee meets BBS licensing and training requirements to provide clinical supervision.

Martha Herrera-Salgado

Print Name

Clinical Licensure Program Manager Signature

Date

**Mail Original Claim to:**  
**Education & Licensure Section**  
**Clinical Licensure Program Manager,**  
**12440 E. Imperial Hwy., 5<sup>th</sup> Floor, Room 546**  
**Norwalk, CA 90650**



**DEPARTMENT OF CHILDREN AND FAMILY SERVICES  
CLINICAL LICENSURE PROGRAM**

           **GROUP**            **INDIVIDUAL/TRIADIC**

Clinical Supervisor: \_\_\_\_\_

Clinical Supervisee: \_\_\_\_\_

Location of Supervision: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

	DATE	SIGNATURE	COMMENTS
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**County of Los Angeles**  
**DEPARTMENT OF CHILDREN AND FAMILY SERVICES**  
**Education and Licensure Section**



## CLINICAL SUPERVISOR STATEMENT OF RESPONSIBILITY

As a County of Los Angeles, DCFS Employee and Licensed Clinical Supervisor, I hereby acknowledge that I have read and understand the DCFS Clinical Licensure Program Management Directive (MD-09-16). By initialing and signing this document, I attest that:

1. \_\_\_\_\_ I have received and read the Clinical Licensure Program Policy/Management Directive [MD 09-16]
2. \_\_\_\_\_ I acknowledge and will follow all procedures set in the DCFS Clinical Licensure Program Policy/Management Directive.
3. \_\_\_\_\_ I have sufficient knowledge of the BBS rules and regulations that guides my role as a clinical supervisor.
4. \_\_\_\_\_ I accept that DCFS Clinical Licensure Program provides oversight to ensure that all participants meet the practice requirements as set forth by the BBS.
5. \_\_\_\_\_ I agree to review the Licensure Program's Monthly Lists upon request.
6. \_\_\_\_\_ I agree to provide clinical supervision only to employees who are already identified and listed on the Program's Needs List.
7. \_\_\_\_\_ I understand that I am permitted to provide clinical supervision during my work hours and thus will not undermine the integrity of the Clinical Licensure Program as set forth in the Clinical Licensure Program policy/Management directive.
8. \_\_\_\_\_ I understand I will be denied the ability to provide clinical supervision for failure to follow the Clinical Licensure Program policy and procedures.
9. \_\_\_\_\_ I agree to submit Reimbursement Claims on monthly or quarterly basis.

*All above items must be initialed to serve as a Clinical Supervisor for DCFS.*

\_\_\_\_\_  
**Employee #**

\_\_\_\_\_  
**Print Name**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**