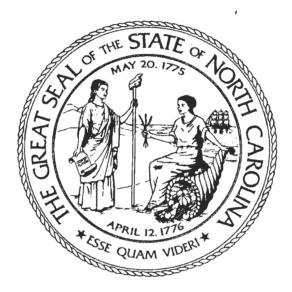


LEGISLATIVE COMMITEE ON NEW LICENSING BOARDS

CLINICAL SOCIAL WORKERS



FINAL ASSESSMENT REPORT (HB 880/SB 694)

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NORTH CAROLINA GENERAL ASSEMBLY LEGISLATIVE COMMITTEE ON NEW LICENSING BOARDS STATE LEGISLATIVE BUILDING

RALEIGH, NC 27611

SENATOR PAUL SMITH, CHAIRMAN SENATOR JAMES FORRESTER SENATOR RALPH HUNT SENATOR TOMMY POLLARD SENATOR ROBERT MARTIN



REPRESENTATIVE HAROLD BRUBAKER REPRESENTATIVE HOWARD BARNHILL REPRESENTATIVE FOYLE HIGHTOWER REPRESENTATIVE ALBERT LINEBERRY

COUNSEL: LINWOOD JONES TELEPHONE: (919)733-2578

June 18, 1991

TO: Members of the General Assembly

FROM: Senator Paul Smith, Chairman Legislative Committee on New Licensing Boards

The Legislative Committee on New Licensing Boards is pleased to present to the members of the General Assembly the final and preliminary assessment reports on the mandatory certification of clinical social workers. These reports are issued in accordance with the provisions of Article 18A of Chapter 120 of the North Carolina General Statutes.

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OVERVIEW

Clinical social work is the professional application of social work theory and methods to the psychosocial diagnosis, treatment, or prevention of emotional and mental disorders. The practice of clinical social work involves the treatment of individuals, couples, families and groups, including the use of psychotherapy and referrals to and collaboration with other health professionals when appropriate. Clinical social workers provide mental health services to more persons than are served by any other mental health profession, including psychiatrists and psychologists.

Currently. clinical social workers are regulated by the State only if they wish to hold themselves out or advertise themselves as being "certified." Only one-third of the 1200 + clinical social workers presently practicing in the State have voluntarily certified themselves by completing the educational and examination requirements established under the Social Worker Certification Act (Chapter 90B of the General Statutes).

House Bill 880 and Senate Bill 694, companion bills, would require that clinical social workers practicing in North Carolina obtain a license from the North Carolina Certification Board for Social Work. The North Carolina Certification Board for Social Work currently oversees the voluntary certification of social workers, master social workers, clinical social workers, and social work managers. The pending legislation would require licensing only for the clinical social workers. The remaining categories would remain subject to voluntary certification and are unaffected by the legislation.

FINDINGS

The Committee finds that the unregulated practice of clinical social work may endanger or harm the public health, safety or welfare. Any person may practice clinical social work without possessing any academic qualifications or experience. The provision of mental health services by clinical social workers to mentally distressed patients requires appropriate training, education, experience, and testing. This is especially true since the consumers of clinical social work services are often mentally distressed patients who are unable to meaningfully evaluate the competence of the provider.

The Committee also finds that the practice of clinical social work possesses qualities that distinguish it from ordinary labor and requires specialized skill or training. Clinical social work practice is based on the knowledge and theory of biological, psychological, and social development, normal human behavior, psychopathology, and the causes and effects of physical illness and disability, unconscious motivation, interpersonal relationships, family dynamics, environmental stress, social systems, and cultural diversity. The appropriate delivery of clinical social work services requires a graduate degree from an

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accredited school of social work and several years of supervised experience. The degree includes academic preparation in social work theory, treatment methods, professional values, psychopathology, marital and family therapy, treatment of the individual, and in specific problem areas, such as suicide.

The Committee finds that the public cannot effectively be protected by other means. The current certification system allows competent individuals to distinguish themselves through certification; however, certification is voluntary. The certification process does not prevent an individual from fraudulently holding himself or herself out as a trained clinical social worker. Moreover, the only recourse against a certified clinical social worker involved in professional misconduct is revocation or suspension of his or her certification. The revocation or suspension does not prevent the individual from resuming the practice of clinical social work as long as he or she does not use the certification title.

The Committee finds that licensing of clinical social workers will not have a substantial adverse fiscal impact on the cost of clinical social work services. Clinical social work fees are stated to be less than those charged for psychiatry and psychology. Since the pending legislation does not restrict the practice of psychologists and psychiatrists. consumers will have choices among various mental health disciplines. The proposed legislation will ensure that those choosing the services of a clinical social worker will be protected from incompetent practitioners.

The Committee also finds that many of the consumers of clinical social work services are mentally or emotionally distressed and are therefore not in a position to evaluate the competence and qualifications of clinical social workers.

RECOMMENDATIONS

The Committee recommends that the General Assembly give favorable consideration to House Bill 880 and Senate Bill 694 to the end that the practice of clinical social work will be licensed by the existing North Carolina Certification Board for Social Work.

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The Committee makes its favorable recommendation contingent upon the following two amendments to be made in the appropriate standing committee:

- (1) Exempt State employees from the act for the first five years after ratification.
- (2) Exempt health care facilities. as appropriate, since they assume responsibility for the training and competence of their staffs.

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PRELIMINARY ASSESSMENT REPORT

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June 18, 1991

Clinical Social Work

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