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My name is Sandra Holman, and I have been a clinical social worker for 46 years. I have practiced in public and private clinics, agencies, and hospitals. I am currently in the private practice of clinical social work and I provide clinical supervision, clinical consultation, and continuing education for mental health professionals in Colorado. I have had faculty positions in the Department of Psychiatry at the Health Sciences Center and the University of Denver Graduate School of Social Work. I have an MSW from the University of Minnesota and a Ph.D. from the Smith College School for Social Work. I have chaired the Social Work Practice Standards Committee since 1988, a committee which considers issues of ethical practice and writes Guidelines and Recommendations for competent social work practice. I come to you to speak on behalf of the members of NASW CO Chapter.

As you know NASW and the social work profession went to the Colorado Legislature to clarify the scope of social work practice to be regulated by DORA. According to the revised statute in the “Definitions” section, 12-43-401 (4), “‘Clinical social work practice’ means the practice of social work as defined in section 12-43-403”. Section 12-43-403, “Social work practice defined” (1) “For the purposes of this part 4, ‘social work practice’ means the professional application of social work theory and methods by a graduate . . . for the purpose of prevention, assessment, diagnosis, and intervention with individual, family, group, organizational, and societal problems, . . . based on the promotion of biopsychosocial developmental processes, person-in environment transactions, and empowerment of the client system.” Section 12-43-403 (2) lists 21 social work activities which are included in “professional social work practice”. Fifteen of these activities involve direct interventions and problem solving with clients and/or their systems based on a biopsychosocial assessment.

Core Clinical social work practice activities and skills involve direct interventions and problem solving with clients and their systems based on a biopsychosocial assessment, and includes the activities listed in 12-43-403(2). Passing the National Social Work licensing exam, required by this Board as part of qualifying for an LCSW, establishes a basic competence to practice clinical social work or direct practice social work. As you may know NASW Ethical Standards in section 1.04 require that “Social workers should provide services and represent themselves as competent only within the boundaries of their education, training, license, certification, consultation received, supervised experience, or other relevant professional experience.” It is both an ethical and a legal responsibility for social workers to practice within their areas of competence. This is the reason that the qualifications for licensure must match the professions definition of social work practice.

As the Board considers revisions to the qualifications for an LCSW which are identified in Rule 17, NASW and the social work profession have some objections to the proposed additions in 17 (c)(4) (C), which reads “The post-degree hours required under 17 (c)(4)(B) above must meet the following requirements:”. Based on the changes to the statute from HB 1339 and our definitions of the practice of social work, we propose the following changes.

We propose that 17 (c)(4)(C)(1) rely upon the statute changes in 12-43-401 and read “Clinical social work practice for LCSW licensure as noted in 12-43-401(4) and in 12-43-403”.

We further propose that (C)(1)(a) read “At a minimum, half of the work experience hours (1,680) must include direct intervention and problem solving with clients and/or their systems based on a biopsychosocial assessment, and will include in addition to assessment one or more of the activities listed in 12-43-403(2)(a)-(m)(q)(t): assessment; differential diagnosis; treatment planning and evaluation; measurement of psychosocial functioning; crisis intervention, out-reach, short- and long-term treatment; therapeutic individual, marital and family interventions; client education; case management; mediation; advocacy; discharge, referral and continuity of care planning and implementation; consultation; supervision; social group work; psychotherapy.”

Rule 17(c)(4)(C)(2) appears to exclude the LSW as a prerequisite for post-degree work experience. Thus, we propose adding “The required post-degree work experience and supervision hours noted in 17(c)(4)(C)(1) will only count towards licensure if the applicant is a Licensed Social Worker authorized to practice those activities listed in 12-43-403(2) or if the applicant is licensed, registered or certified in another profession that is authorized to practice those activities stated in C.R.S. 12-43-201 (9) or listed in the State Grievance Board Database . . .”.

It is NASW’s opinion that these revisions to Rule 17 will more accurately and clearly reflect the social work profession’s definition of social work practice and enable the Board of Social Work Examiners and DORA to regulate the practice of social work in Colorado to protect the greatest number of public consumers of the multi-varied social work services in this state.