

 <p style="text-align: center;">County of Sacramento Department of Health and Human Services Division of Behavioral Health Services Policy and Procedure</p>	Policy Issuer (Unit/Program)	QM
	Policy Number	QM-09-03
	Effective Date	07-08-2002
	Revision Date	01-01-2014
Title: Continuing Education Requirements	Functional Area: Quality Improvement Program	
Approved By: (Signature on File) Signed version available upon request		
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BACKGROUND:

The Sacramento County Division of Behavioral Health Services maintains provider status for continuing education (CE) through the Board of Behavioral Sciences (BBS) for the purpose of offering licensed clinicians continuing education that fulfills licensee requirements. The provider determines the appropriateness of offering CE's for training, workshops, conferences, etc., on a case-by-case basis.

PURPOSE:

The purpose of this policy is to provide guidelines for continuing education courses in accordance with regulations and the BBS Criteria. All criteria must be met and approved by Quality management prior to the event.

DETAILS:

Requirements:

Providers must adhere to the requirements set by statute and regulation, and are responsible for ensuring that courses, instructors and record keeping meet BBS criteria.

Coursework needs to be related to the Licensed Marriage and Family Therapist (LMFT), Licensed Clinical Social Workers (LCSW) and Licensed Professional Clinical Counselor's (LPCC) scope of practice and incorporate at least one of the following:

1. Aspects of counseling or social work that are fundamental to the understanding or practice of counseling or social work;
2. Aspects of counseling or social work in which significant recent developments have occurred;
3. Aspects of other related disciplines that enhance the understanding or practice of counseling or social work;
4. Coursework must meet scope of practice for the related disciplines:
 - a) MFT scope of practice is that service performed with individuals, couples, or groups wherein interpersonal relationships are examined for the purpose of achieving more adequate, satisfying and productive marriage and family adjustments.
 - b) LCSW scope of practice is 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.

- c) LPCC scope of practice includes the application of counseling interventions and psychotherapeutic techniques to identify and remediate cognitive, mental, and emotional issues, including personal growth, adjustment to disability, crisis intervention, and psychosocial and environmental problems.

Provider Responsibilities:

1. A “**course**” is defined as:
“A systematic form of learning at least one hour in length (academic studies, extension studies, lectures, conferences, seminars, workshops, etc.).”
2. The Provider determines if the course meets **scope of practice** for LMFT’s, LCSW’s and LPCC’s. Courses can relate to direct patient/client care (theoretical frameworks, intervention techniques, etc.) or indirect patient/client care (legal issues, consultation, office management, insurance matters, supervision training, etc.).
3. The Provider must ensure that each attendee completes an **evaluation** upon course completion.
4. In general, licensees will earn **one hour of CE for each actual hour of instruction**. Lunch and breaks can be counted as hours of CE only if actual instruction outlined in the course syllabus is occurring during that time.
5. **Course advertisement** criteria includes the following:
 - a) Provider name;
 - b) Provider number;
 - c) The statement “This course meets the qualifications for [Number of Hours] of continuing education credit for MFT’s and/or LCSW’s as required by the California Board of Behavioral Sciences”;
 - d) Policy on refunds (if applicable) in cases of non-attendance;
 - e) A clear, concise description of the course content and objectives.
6. Providers are responsible for ensuring that **instructors** meet at least two of the following criteria:
 - a) A current, valid license, registration or certificate, free from disciplinary action, in an area related to the subject matter of the course;
 - b) A Master’s or higher degree from an educational institution in an area related to the subject matter of the course;
 - c) Training, certification, or experience in teaching material related to the subject matter of the course, or
 - d) At least two years experience in an area related to the subject matter of the course.
 - e) During the period of time that any instructor has a healing arts license that is restricted pursuant to a disciplinary action in California or in any other state or territory, that instructor shall notify all approved continuing education providers for whom he or she provides instruction of such discipline before instruction begins or immediately upon notice of the decision, whichever occurs first.
7. Providers are required to issue a **record of course completion** for the licensees’ record keeping requirements (e.g., letter of verification of attendance, certificates, grade slips, transcripts) to each attendee. These records of course completion must include:
 - a) Name of licensee and license number or other identification number;
 - b) Course title;
 - c) Provider name and address;
 - d) Provider number;
 - e) Date of course;
 - f) Number of hours of continuing education credit; and
 - g) Signature of course instructor, provider or provider designee.

8. Providers are responsible for keeping the following **records for at least four years**:
 - a) Syllabi for all courses;
 - b) Time and location of courses;
 - c) Course advertisements;
 - d) Instructors' vitae/resumes;
 - e) Attendance rosters with the names and license numbers of licensees who attended the course;
 - f) Sign-in sheets; and
 - g) Records of course completion issued to licensees who attended the course.
9. Providers are **audited** on a random basis to ensure compliance with the BBS criteria. They are required to submit the above records to the BBS only when they are audited. All records must be saved for four (4) years.

Procedure:

1. To request continuing education units for training, workshops, conferences, etc., within the Division of Behavioral Health Services, or in partnership with other county and/or community programs and agencies, the following information needs to be submitted in writing to Quality Management Services at least 30 days prior to the event:
 - a) Course description and content;
 - b) Syllabi for all courses;
 - c) Submit any previous flyers/programs/brochures from past courses;
 - d) Time and location of courses;
 - e) Copy of course advertising;
 - f) Number of CE hours being requested;
 - g) Description of instructor(s) eligibility criteria; and
 - h) Projected number of attendees requiring CE verification.
2. The requestor of CE's will need to **provide the following original documents** to Quality Management Services for record keeping upon the completion of the training, workshop, or conference:
 - a) Sign-in sheets for those requesting CE verification;
 - b) Evaluation forms for those requesting CE verification.
3. The requestor of CE's will need to **provide one or more staff members** who will work in conjunction with Quality Management staff to insure all requirements of the CE process are completed. The staff person(s) will be responsible for the sign-in and tracking of the CE participants, and will distribute the course completion documentation at the conclusion of the training event. Additionally, this staff person will be responsible for submitting all required documentation for record keeping (i.e., attendance verification) to Quality Management Services immediately following the event.
4. Quality Management Services can provide the record of course completion (e.g., letter of verification of attendance, certificates, grade slips, and transcripts) as agreed to with the requestor.

REFERENCE(S)/ATTACHMENTS:

- N/A

RELATED POLICIES:

- Staff Registration

DISTRIBUTION:

Enter X	DL Name	Enter X	DL Name
X	Mental Health Staff		
	Mental Health Treatment Center		
	Adult Contract Providers		
	Children's Contract Providers		
	Alcohol and Drug Services		

CONTACT INFORMATION:

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