***Laws and Rules affecting the practice of:***

**Clinical Social Work**

**Marriage and Family Therapy**

**Mental Health Counseling**

The Entirely of Florida Statute Chapter 491:

Clinical, Counseling, and Psychotherapy Services

<http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0400-0499/0491/0491.html>

The Entirety of Florida Administrative Code Division Department of Health 64B4:

Board of Clinical Social Work, Marriage and Family Therapy

and Mental Health Counseling

<https://www.flrules.org/gateway/Division.asp?DivID=327>

Sections of Florida Statutes that identify or define 491 licensees as providers:

[Chapter 120:](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0100-0199/0120/0120ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%20120) Administrative Procedure Act  
[Chapter 39:](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0000-0099/0039/0039ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%2039) Proceedings Related to Children  
[Chapter 90:](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0000-0099/0090/0090ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%2090) Evidence Code  
[Chapter 394:](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0300-0399/0394/0394ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%20394) Mental Health (Baker Act)  
[Chapter 397:](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0300-0399/0397/0397ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%20397) Substance Abuse Services (Marchman Act)  
[Chapter 415:](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0400-0499/0415/0415ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%20415) Adult Protective Services

You can read the most current versions online at any time.

Go to the website for the Board of Clinical Social Work, Marriage & Family Therapy, and Mental Health Counseling. <https://floridasmentalhealthprofessions.gov/>

Select Resources from the top menu bar.

Select Florida Statutes & Administrative Codes.

Notice all of the Statutes and Codes that govern our practice!

Also, Look toward the bottom of the website for Latest News section for updates, and

For more information about decisions discussed and made by the board, select Meetings and scroll down to Past Meetings to read Board Meeting Minutes.

*Compiled 11/2018 by Alicia M. Homrich*

**The 2018 Florida Statutes**

[**Title XXXII**](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Index&Title_Request=XXXII#TitleXXXII) **REGULATION OF PROFESSIONS AND OCCUPATIONS**

[**Chapter 491**](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0400-0499/0491/0491ContentsIndex.html)**CLINICAL, COUNSELING, AND PSYCHOTHERAPY SERVICES**

491.002  Intent.

491.003  Definitions.

491.004  Board of Clinical Social Work, Marriage and Family Therapy, and Mental Health Counseling.

491.0045  Intern registration; requirements.

491.0046  Provisional license; requirements.

491.005  Licensure by examination.

491.0057  Dual licensure as a marriage and family therapist.

491.006  Licensure or certification by endorsement.

491.0065  Requirement for instruction on HIV and AIDS.

491.007  Renewal of license, registration, or certificate.

491.008  Inactive status; reactivation of licenses; fees.

491.0085  Continuing education and laws and rules courses; approval of providers, programs, and courses; proof of completion.

491.009  Discipline.

491.0111  Sexual misconduct.

491.0112  Sexual misconduct by a psychotherapist; penalties.

491.012  Violations; penalty; injunction.

491.014  Exemptions.

491.0141  Practice of hypnosis.

491.0143  Practice of sex therapy.

491.0144  The practice of juvenile sexual offender therapy.

491.0145  Certified master social worker.

491.0147  Confidentiality and privileged communications.

491.0148  Records.

491.0149  Display of license; use of professional title on promotional materials.

491.015  Duties of the department as to certified master social workers.

491.016  Social work; use of title.

**491.002 Intent.**—The Legislature finds that as society becomes increasingly complex, emotional survival is equal in importance to physical survival. Therefore, in order to preserve the health, safety, and welfare of the public, the Legislature must provide privileged communication for members of the public or those acting on their behalf to encourage needed or desired counseling, clinical and psychotherapy services, or certain other services of a psychological nature to be sought out. The Legislature further finds that, since such services assist the public primarily with emotional survival, which in turn affects physical and psychophysical survival, the practice of clinical social work, marriage and family therapy, and mental health counseling by persons not qualified to practice such professions presents a danger to public health, safety, and welfare. The Legislature finds that, to further secure the health, safety, and welfare of the public and also to encourage professional cooperation among all qualified professionals, the Legislature must assist the public in making informed choices of such services by establishing minimum qualifications for entering into and remaining in the respective professions.

History.—ss. 15, 19, ch. 87-252; ss. 19, 20, ch. 90-263; s. 4, ch. 91-429.

**491.003 Definitions.—As used in this chapter:**

(1) “Board” means the Board of Clinical Social Work, Marriage and Family Therapy, and Mental Health Counseling.

(2) “Clinical social worker” means a person licensed under this chapter to practice clinical social work.

(3) “Clinical social work experience” is defined as a period during which the applicant provides clinical social work services, including assessment, diagnosis, treatment, and evaluation of clients; provided that at least 50 percent of the hours worked consist of providing psychotherapy and counseling services directly to clients.

(4) “Department” means the Department of Health.

(5) “Marriage and family therapist” means a person licensed under this chapter to practice marriage and family therapy.

(6) “Mental health counselor” means a person licensed under this chapter to practice mental health counseling.

(7) The “practice of clinical social work” is defined as the use of scientific and applied knowledge, theories, and methods for the purpose of describing, preventing, evaluating, and treating individual, couple, marital, family, or group behavior, based on the person-in-situation perspective of psychosocial development, normal and abnormal behavior, psychopathology, unconscious motivation, interpersonal relationships, environmental stress, differential assessment, differential planning, and data gathering. The purpose of such services is the prevention and treatment of undesired behavior and enhancement of mental health. The practice of clinical social work includes methods of a psychological nature used to evaluate, assess, diagnose, treat, and prevent emotional and mental disorders and dysfunctions (whether cognitive, affective, or behavioral), sexual dysfunction, behavioral disorders, alcoholism, and substance abuse. The practice of clinical social work includes, but is not limited to, psychotherapy, hypnotherapy, and sex therapy. The practice of clinical social work also includes counseling, behavior modification, consultation, client-centered advocacy, crisis intervention, and the provision of needed information and education to clients, when using methods of a psychological nature to evaluate, assess, diagnose, treat, and prevent emotional and mental disorders and dysfunctions (whether cognitive, affective, or behavioral), sexual dysfunction, behavioral disorders, alcoholism, or substance abuse. The practice of clinical social work may also include clinical research into more effective psychotherapeutic modalities for the treatment and prevention of such conditions.

(a) Clinical social work may be rendered to individuals, including individuals affected by the termination of marriage, and to marriages, couples, families, groups, organizations, and communities.

(b) The use of specific methods, techniques, or modalities within the practice of clinical social work is restricted to clinical social workers appropriately trained in the use of such methods, techniques, or modalities.

(c) The terms “diagnose” and “treat,” as used in this chapter, when considered in isolation or in conjunction with the rules of the board, may not be construed to permit the performance of any act which clinical social workers are not educated and trained to perform, including, but not limited to, admitting persons to hospitals for treatment of the foregoing conditions, treating persons in hospitals without medical supervision, prescribing medicinal drugs as defined in chapter 465, authorizing clinical laboratory procedures, or radiological procedures, or use of electroconvulsive therapy. In addition, this definition may not be construed to permit any person licensed, provisionally licensed, registered, or certified pursuant to this chapter to describe or label any test, report, or procedure as “psychological,” except to relate specifically to the definition of practice authorized in this subsection.

(d) The definition of “clinical social work” contained in this subsection includes all services offered directly to the general public or through organizations, whether public or private, and applies whether payment is requested or received for services rendered.

(8) The term “practice of marriage and family therapy” means the use of scientific and applied marriage and family theories, methods, and procedures for the purpose of describing, evaluating, and modifying marital, family, and individual behavior, within the context of marital and family systems, including the context of marital formation and dissolution, and is based on marriage and family systems theory, marriage and family development, human development, normal and abnormal behavior, psychopathology, human sexuality, psychotherapeutic and marriage and family therapy theories and techniques. The practice of marriage and family therapy includes methods of a psychological nature used to evaluate, assess, diagnose, treat, and prevent emotional and mental disorders or dysfunctions (whether cognitive, affective, or behavioral), sexual dysfunction, behavioral disorders, alcoholism, and substance abuse. The practice of marriage and family therapy includes, but is not limited to, marriage and family therapy, psychotherapy, including behavioral family therapy, hypnotherapy, and sex therapy. The practice of marriage and family therapy also includes counseling, behavior modification, consultation, client-centered advocacy, crisis intervention, and the provision of needed information and education to clients, when using methods of a psychological nature to evaluate, assess, diagnose, treat, and prevent emotional and mental disorders and dysfunctions (whether cognitive, affective, or behavioral), sexual dysfunction, behavioral disorders, alcoholism, or substance abuse. The practice of marriage and family therapy may also include clinical research into more effective psychotherapeutic modalities for the treatment and prevention of such conditions.

(a) Marriage and family therapy may be rendered to individuals, including individuals affected by termination of marriage, to couples, whether married or unmarried, to families, or to groups.

(b) The use of specific methods, techniques, or modalities within the practice of marriage and family therapy is restricted to marriage and family therapists appropriately trained in the use of such methods, techniques, or modalities.

(c) The terms “diagnose” and “treat,” as used in this chapter, when considered in isolation or in conjunction with the rules of the board, may not be construed to permit the performance of any act that marriage and family therapists are not educated and trained to perform, including, but not limited to, admitting persons to hospitals for treatment of the foregoing conditions, treating persons in hospitals without medical supervision, prescribing medicinal drugs as defined in chapter 465, authorizing clinical laboratory procedures or radiological procedures or the use of electroconvulsive therapy. In addition, this definition may not be construed to permit any person licensed, provisionally licensed, registered, or certified pursuant to this chapter to describe or label any test, report, or procedure as “psychological,” except to relate specifically to the definition of practice authorized in this subsection.

(d) The definition of “marriage and family therapy” contained in this subsection includes all services offered directly to the general public or through organizations, whether public or private, and applies whether payment is requested or received for services rendered.

(9) The term “practice of mental health counseling” means the use of scientific and applied behavioral science theories, methods, and techniques for the purpose of describing, preventing, and treating undesired behavior and enhancing mental health and human development and is based on the person-in-situation perspectives derived from research and theory in personality, family, group, and organizational dynamics and development, career planning, cultural diversity, human growth and development, human sexuality, normal and abnormal behavior, psychopathology, psychotherapy, and rehabilitation. The practice of mental health counseling includes methods of a psychological nature used to evaluate, assess, diagnose, and treat emotional and mental dysfunctions or disorders, whether cognitive, affective, or behavioral, interpersonal relationships, sexual dysfunction, alcoholism, and substance abuse. The practice of mental health counseling includes, but is not limited to, psychotherapy, hypnotherapy, and sex therapy. The practice of mental health counseling also includes counseling, behavior modification, consultation, client-centered advocacy, crisis intervention, and the provision of needed information and education to clients, when using methods of a psychological nature to evaluate, assess, diagnose, treat, and prevent emotional and mental disorders and dysfunctions (whether cognitive, affective, or behavioral), behavioral disorders, sexual dysfunction, alcoholism, or substance abuse. The practice of mental health counseling may also include clinical research into more effective psychotherapeutic modalities for the treatment and prevention of such conditions.

(a) Mental health counseling may be rendered to individuals, including individuals affected by the termination of marriage, and to couples, families, groups, organizations, and communities.

(b) The use of specific methods, techniques, or modalities within the practice of mental health counseling is restricted to mental health counselors appropriately trained in the use of such methods, techniques, or modalities.

(c) The terms “diagnose” and “treat,” as used in this chapter, when considered in isolation or in conjunction with any provision of the rules of the board, may not be construed to permit the performance of any act that mental health counselors are not educated and trained to perform, including, but not limited to, admitting persons to hospitals for treatment of the foregoing conditions, treating persons in hospitals without medical supervision, prescribing medicinal drugs as defined in chapter 465, authorizing clinical laboratory procedures or radiological procedures, or the use of electroconvulsive therapy. In addition, this definition may not be construed to permit any person licensed, provisionally licensed, registered, or certified pursuant to this chapter to describe or label any test, report, or procedure as “psychological,” except to relate specifically to the definition of practice authorized in this subsection.

(d) The definition of “mental health counseling” contained in this subsection includes all services offered directly to the general public or through organizations, whether public or private, and applies whether payment is requested or received for services rendered.

(10) “Provisional clinical social worker licensee” means a person provisionally licensed under this chapter to provide clinical social work services under supervision.

(11) “Provisional marriage and family therapist licensee” means a person provisionally licensed under this chapter to provide marriage and family therapy services under supervision.

(12) “Provisional mental health counselor licensee” means a person provisionally licensed under this chapter to provide mental health counseling services under supervision.

(13) “Psychotherapist” means a clinical social worker, marriage and family therapist, or mental health counselor licensed pursuant to this chapter.

(14) “Registered clinical social worker intern” means a person registered under this chapter who is completing the postgraduate clinical social work experience requirement specified in s. 491.005(1)(c).

(15) “Registered marriage and family therapist intern” means a person registered under this chapter who is completing the post-master’s clinical experience requirement specified in s. 491.005(3)(c).

(16) “Registered mental health counselor intern” means a person registered under this chapter who is completing the post-master’s clinical experience requirement specified in s. 491.005(4)(c).

(17) “Social worker” means a person who has a bachelor’s, master’s, or doctoral degree in social work.

History.—ss. 15, 19, ch. 87-252; s. 10, ch. 89-70; ss. 5, 19, 20, ch. 90-263; s. 4, ch. 91-429; s. 192, ch. 94-218; s. 9, ch. 97-198; s. 201, ch. 97-264; s. 2, ch. 2008-154; s. 103, ch. 2018-24.

**491.004 Board of Clinical Social Work, Marriage and Family Therapy, and Mental Health Counseling.—**

(1) There is created within the department the Board of Clinical Social Work, Marriage and Family Therapy, and Mental Health Counseling composed of nine members appointed by the Governor and confirmed by the Senate.

(2)(a) Six members of the board shall be persons licensed under this chapter as follows:

1. Two members shall be licensed practicing clinical social workers.

2. Two members shall be licensed practicing marriage and family therapists.

3. Two members shall be licensed practicing mental health counselors.

(b) Three members shall be citizens of the state who are not and have never been licensed in a mental health-related profession and who are in no way connected with the practice of any such profession.

(3) No later than January 1, 1988, the Governor shall appoint nine members of the board as follows:

(a) Three members for terms of 2 years each.

(b) Three members for terms of 3 years each.

(c) Three members for terms of 4 years each.

(4) As the terms of the initial members expire, the Governor shall appoint successors for terms of 4 years; and those members shall serve until their successors are appointed.

(5) The board shall adopt rules pursuant to ss. 120.536(1) and 120.54 to implement and enforce the provisions of this chapter.

(6) All applicable provisions of chapter 456 relating to activities of regulatory boards shall apply to the board.

(7) The board shall maintain its official headquarters in the City of Tallahassee.

History.—ss. 15, 19, ch. 87-252; ss. 19, 20, ch. 90-263; s. 4, ch. 91-429; s. 193, ch. 94-218; s. 152, ch. 98-166; s. 163, ch. 98-200; s. 212, ch. 2000-160.

**491.0045 Intern registration; requirements.—**

(1) An individual who has not satisfied the postgraduate or post-master’s level experience requirements, as specified in s. 491.005(1)(c), (3)(c), or (4)(c), must register as an intern in the profession for which he or she is seeking licensure before commencing the post-master’s experience requirement or an individual who intends to satisfy part of the required graduate-level practicum, internship, or field experience, outside the academic arena for any profession, and must register as an intern in the profession for which he or she is seeking licensure before commencing the practicum, internship, or field experience.

(2) The department shall register as a clinical social worker intern, marriage and family therapist intern, or mental health counselor intern each applicant who the board certifies has:

(a) Completed the application form and remitted a nonrefundable application fee not to exceed $200, as set by board rule;

(b)1. Completed the education requirements as specified in s. 491.005(1)(c), (3)(c), or (4)(c) for the profession for which he or she is applying for licensure, if needed; and

2. Submitted an acceptable supervision plan, as determined by the board, for meeting the practicum, internship, or field work required for licensure that was not satisfied in his or her graduate program.

(c) Identified a qualified supervisor.

(3) An individual registered under this section must remain under supervision while practicing under registered intern status.

(4) An individual who fails to comply with this section may not be granted a license under this chapter, and any time spent by the individual completing the experience requirement as specified in s. 491.005(1)(c), (3)(c), or (4)(c) before registering as an intern does not count toward completion of the requirement.

(5) An intern registration is valid for 5 years.

[1](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0400-0499/0491/0491.html#1)(6) A **registration** issued on or before March 31, 2017, expires March 31, 2022, and may not be renewed or reissued. Any registration issued after March 31, 2017, expires 60 months after the date it is issued. A subsequent intern registration may not be issued unless the candidate has passed the theory and practice examination described in s. 491.005(1)(d), (3)(d), and (4)(d).

(7) An individual who has held a provisional license issued by the board may not apply for an intern registration in the same profession.

History.—s. 10, ch. 97-198; s. 202, ch. 97-264; s. 165, ch. 99-397; s. 1, ch. 2016-80; s. 48, ch. 2016-241.

1Note.—As created by s. 48, ch. 2016-241. For a description of multiple acts in the same session affecting a statutory provision, see preface to the Florida Statutes, “Statutory Construction.” Subsection (6) was also created by s. 1, ch. 2016-80, and that version reads:

(6) An intern registration issued on or before April 1, 2017, expires March 31, 2022, and may not be renewed or reissued. A registration issued after April 1, 2017, expires 60 months after the date of issuance. No subsequent intern registration may be issued unless the candidate has passed the theory and practice examination described in s. 491.005(1)(d), (3)(d), and (4)(d).

**491.0046 Provisional license; requirements.—**

(1) An individual applying for licensure by examination who has satisfied the clinical experience requirements of s. 491.005 or an individual applying for licensure by endorsement pursuant to s. 491.006 intending to provide clinical social work, marriage and family therapy, or mental health counseling services in Florida while satisfying coursework or examination requirements for licensure must be provisionally licensed in the profession for which he or she is seeking licensure prior to beginning practice.

(2) The department shall issue a provisional clinical social worker license, provisional marriage and family therapist license, or provisional mental health counselor license to each applicant who the board certifies has:

(a) Completed the application form and remitted a nonrefundable application fee not to exceed $100, as set by board rule; and

(b) Earned a graduate degree in social work, a graduate degree with a major emphasis in marriage and family therapy or a closely related field, or a graduate degree in a major related to the practice of mental health counseling; and

(c) Has met the following minimum coursework requirements:

1. For clinical social work, a minimum of 15 semester hours or 22 quarter hours of the coursework required by s. 491.005(1)(b)2.b.

2. For marriage and family therapy, 10 of the courses required by s. 491.005(3)(b)1.a.-c., as determined by the board, and at least 6 semester hours or 9 quarter hours of the course credits must have been completed in the area of marriage and family systems, theories, or techniques.

3. For mental health counseling, a minimum of seven of the courses required under s. 491.005(4)(b)1.a.-c.

(3) A provisional licensee must work under the supervision of a licensed mental health professional, as defined by the board, until the provisional licensee is in receipt of a license or a letter from the department stating that he or she is licensed as a clinical social worker, marriage and family therapist, or mental health counselor.

(4) A provisional license expires 24 months after the date it is issued and may not be renewed or reissued.

History.—s. 11, ch. 97-198; s. 203, ch. 97-264; s. 166, ch. 99-397; s. 31, ch. 2017-3.

**491.005 Licensure by examination.—**

(1) CLINICAL SOCIAL WORK.—Upon verification of documentation and payment of a fee not to exceed $200, as set by board rule, plus the actual per applicant cost to the department for purchase of the examination from the American Association of State Social Worker’s Boards or a similar national organization, the department shall issue a license as a clinical social worker to an applicant who the board certifies:

(a) Has submitted an application and paid the appropriate fee.

(b)1. Has received a doctoral degree in social work from a graduate school of social work which at the time the applicant graduated was accredited by an accrediting agency recognized by the United States Department of Education or has received a master’s degree in social work from a graduate school of social work which at the time the applicant graduated:

a. Was accredited by the Council on Social Work Education;

b. Was accredited by the Canadian Association of Schools of Social Work; or

c. Has been determined to have been a program equivalent to programs approved by the Council on Social Work Education by the Foreign Equivalency Determination Service of the Council on Social Work Education. An applicant who graduated from a program at a university or college outside of the United States or Canada must present documentation of the equivalency determination from the council in order to qualify.

2. The applicant’s graduate program must have emphasized direct clinical patient or client health care services, including, but not limited to, coursework in clinical social work, psychiatric social work, medical social work, social casework, psychotherapy, or group therapy. The applicant’s graduate program must have included all of the following coursework:

a. A supervised field placement which was part of the applicant’s advanced concentration in direct practice, during which the applicant provided clinical services directly to clients.

b. Completion of 24 semester hours or 32 quarter hours in theory of human behavior and practice methods as courses in clinically oriented services, including a minimum of one course in psychopathology, and no more than one course in research, taken in a school of social work accredited or approved pursuant to subparagraph 1.

3. If the course title which appears on the applicant’s transcript does not clearly identify the content of the coursework, the applicant shall be required to provide additional documentation, including, but not limited to, a syllabus or catalog description published for the course.

(c) Has had at least 2 years of clinical social work experience, which took place subsequent to completion of a graduate degree in social work at an institution meeting the accreditation requirements of this section, under the supervision of a licensed clinical social worker or the equivalent who is a qualified supervisor as determined by the board. An individual who intends to practice in Florida to satisfy clinical experience requirements must register pursuant to s. 491.0045 before commencing practice. If the applicant’s graduate program was not a program which emphasized direct clinical patient or client health care services as described in subparagraph (b)2., the supervised experience requirement must take place after the applicant has completed a minimum of 15 semester hours or 22 quarter hours of the coursework required. A doctoral internship may be applied toward the clinical social work experience requirement. A licensed mental health professional must be on the premises when clinical services are provided by a registered intern in a private practice setting.

(d) Has passed a theory and practice examination provided by the department for this purpose.

(e) Has demonstrated, in a manner designated by rule of the board, knowledge of the laws and rules governing the practice of clinical social work, marriage and family therapy, and mental health counseling.

(2) CLINICAL SOCIAL WORK.—

(a) Notwithstanding the provisions of paragraph (1)(b), coursework which was taken at a baccalaureate level shall not be considered toward completion of education requirements for licensure unless an official of the graduate program certifies in writing on the graduate school’s stationery that a specific course, which students enrolled in the same graduate program were ordinarily required to complete at the graduate level, was waived or exempted based on completion of a similar course at the baccalaureate level. If this condition is met, the board shall apply the baccalaureate course named toward the education requirements.

(b) An applicant from a master’s or doctoral program in social work which did not emphasize direct patient or client services may complete the clinical curriculum content requirement by returning to a graduate program accredited by the Council on Social Work Education or the Canadian Association of Schools of Social Work, or to a clinical social work graduate program with comparable standards, in order to complete the education requirements for examination. However, a maximum of 6 semester or 9 quarter hours of the clinical curriculum content requirement may be completed by credit awarded for independent study coursework as defined by board rule.

(3) MARRIAGE AND FAMILY THERAPY.—Upon verification of documentation and payment of a fee not to exceed $200, as set by board rule, plus the actual cost to the department for the purchase of the examination from the Association of Marital and Family Therapy Regulatory Board, or similar national organization, the department shall issue a license as a marriage and family therapist to an applicant who the board certifies:

(a) Has submitted an application and paid the appropriate fee.

(b)1. Has a minimum of a master’s degree with major emphasis in marriage and family therapy, or a closely related field, and has completed all of the following requirements:

a. Thirty-six semester hours or 48 quarter hours of graduate coursework, which must include a minimum of 3 semester hours or 4 quarter hours of graduate-level course credits in each of the following nine areas: dynamics of marriage and family systems; marriage therapy and counseling theory and techniques; family therapy and counseling theory and techniques; individual human development theories throughout the life cycle; personality theory or general counseling theory and techniques; psychopathology; human sexuality theory and counseling techniques; psychosocial theory; and substance abuse theory and counseling techniques. Courses in research, evaluation, appraisal, assessment, or testing theories and procedures; thesis or dissertation work; or practicums, internships, or fieldwork may not be applied toward this requirement.

b. A minimum of one graduate-level course of 3 semester hours or 4 quarter hours in legal, ethical, and professional standards issues in the practice of marriage and family therapy or a course determined by the board to be equivalent.

c. A minimum of one graduate-level course of 3 semester hours or 4 quarter hours in diagnosis, appraisal, assessment, and testing for individual or interpersonal disorder or dysfunction; and a minimum of one 3-semester-hour or 4-quarter-hour graduate-level course in behavioral research which focuses on the interpretation and application of research data as it applies to clinical practice. Credit for thesis or dissertation work, practicums, internships, or fieldwork may not be applied toward this requirement.

d. A minimum of one supervised clinical practicum, internship, or field experience in a marriage and family counseling setting, during which the student provided 180 direct client contact hours of marriage and family therapy services under the supervision of an individual who met the requirements for supervision under paragraph (c). This requirement may be met by a supervised practice experience which took place outside the academic arena, but which is certified as equivalent to a graduate-level practicum or internship program which required a minimum of 180 direct client contact hours of marriage and family therapy services currently offered within an academic program of a college or university accredited by an accrediting agency approved by the United States Department of Education, or an institution which is publicly recognized as a member in good standing with the Association of Universities and Colleges of Canada or a training institution accredited by the Commission on Accreditation for Marriage and Family Therapy Education recognized by the United States Department of Education. Certification shall be required from an official of such college, university, or training institution.

2. If the course title which appears on the applicant’s transcript does not clearly identify the content of the coursework, the applicant shall be required to provide additional documentation, including, but not limited to, a syllabus or catalog description published for the course.

The required master’s degree must have been received in an institution of higher education which at the time the applicant graduated was: fully accredited by a regional accrediting body recognized by the Commission on Recognition of Postsecondary Accreditation; publicly recognized as a member in good standing with the Association of Universities and Colleges of Canada; or an institution of higher education located outside the United States and Canada, which at the time the applicant was enrolled and at the time the applicant graduated maintained a standard of training substantially equivalent to the standards of training of those institutions in the United States which are accredited by a regional accrediting body recognized by the Commission on Recognition of Postsecondary Accreditation. Such foreign education and training must have been received in an institution or program of higher education officially recognized by the government of the country in which it is located as an institution or program to train students to practice as professional marriage and family therapists or psychotherapists. The burden of establishing that the requirements of this provision have been met shall be upon the applicant, and the board shall require documentation, such as, but not limited to, an evaluation by a foreign equivalency determination service, as evidence that the applicant’s graduate degree program and education were equivalent to an accredited program in this country. An applicant with a master’s degree from a program which did not emphasize marriage and family therapy may complete the coursework requirement in a training institution fully accredited by the Commission on Accreditation for Marriage and Family Therapy Education recognized by the United States Department of Education.

(c) Has had at least 2 years of clinical experience during which 50 percent of the applicant’s clients were receiving marriage and family therapy services, which must be at the post-master’s level under the supervision of a licensed marriage and family therapist with at least 5 years of experience, or the equivalent, who is a qualified supervisor as determined by the board. An individual who intends to practice in Florida to satisfy the clinical experience requirements must register pursuant to s. 491.0045 before commencing practice. If a graduate has a master’s degree with a major emphasis in marriage and family therapy or a closely related field that did not include all the coursework required under sub-subparagraphs (b)1.a.-c., credit for the post-master’s level clinical experience shall not commence until the applicant has completed a minimum of 10 of the courses required under sub-subparagraphs (b)1.a.-c., as determined by the board, and at least 6 semester hours or 9 quarter hours of the course credits must have been completed in the area of marriage and family systems, theories, or techniques. Within the 3 years of required experience, the applicant shall provide direct individual, group, or family therapy and counseling, to include the following categories of cases: unmarried dyads, married couples, separating and divorcing couples, and family groups including children. A doctoral internship may be applied toward the clinical experience requirement. A licensed mental health professional must be on the premises when clinical services are provided by a registered intern in a private practice setting.

(d) Has passed a theory and practice examination provided by the department for this purpose.

(e) Has demonstrated, in a manner designated by rule of the board, knowledge of the laws and rules governing the practice of clinical social work, marriage and family therapy, and mental health counseling.

(f) For the purposes of dual licensure, the department shall license as a marriage and family therapist any person who meets the requirements of s. 491.0057. Fees for dual licensure shall not exceed those stated in this subsection.

(4) MENTAL HEALTH COUNSELING.—Upon verification of documentation and payment of a fee not to exceed $200, as set by board rule, plus the actual per applicant cost to the department for purchase of the examination from the Professional Examination Service for the National Academy of Certified Clinical Mental Health Counselors or a similar national organization, the department shall issue a license as a mental health counselor to an applicant who the board certifies:

(a) Has submitted an application and paid the appropriate fee.

(b)1. Has a minimum of an earned master’s degree from a mental health counseling program accredited by the Council for the Accreditation of Counseling and Related Educational Programs that consists of at least 60 semester hours or 80 quarter hours of clinical and didactic instruction, including a course in human sexuality and a course in substance abuse. If the master’s degree is earned from a program related to the practice of mental health counseling that is not accredited by the Council for the Accreditation of Counseling and Related Educational Programs, then the coursework and practicum, internship, or fieldwork must consist of at least 60 semester hours or 80 quarter hours and meet the following requirements:

a. Thirty-three semester hours or 44 quarter hours of graduate coursework, which must include a minimum of 3 semester hours or 4 quarter hours of graduate-level coursework in each of the following 11 content areas: counseling theories and practice; human growth and development; diagnosis and treatment of psychopathology; human sexuality; group theories and practice; individual evaluation and assessment; career and lifestyle assessment; research and program evaluation; social and cultural foundations; counseling in community settings; and substance abuse. Courses in research, thesis or dissertation work, practicums, internships, or fieldwork may not be applied toward this requirement.

b. A minimum of 3 semester hours or 4 quarter hours of graduate-level coursework in legal, ethical, and professional standards issues in the practice of mental health counseling, which includes goals, objectives, and practices of professional counseling organizations, codes of ethics, legal considerations, standards of preparation, certifications and licensing, and the role identity and professional obligations of mental health counselors. Courses in research, thesis or dissertation work, practicums, internships, or fieldwork may not be applied toward this requirement.

c. The equivalent, as determined by the board, of at least 1,000 hours of university-sponsored supervised clinical practicum, internship, or field experience as required in the accrediting standards of the Council for Accreditation of Counseling and Related Educational Programs for mental health counseling programs. This experience may not be used to satisfy the post-master’s clinical experience requirement.

2. If the course title which appears on the applicant’s transcript does not clearly identify the content of the coursework, the applicant shall be required to provide additional documentation, including, but not limited to, a syllabus or catalog description published for the course.

Education and training in mental health counseling must have been received in an institution of higher education which at the time the applicant graduated was: fully accredited by a regional accrediting body recognized by the Commission on Recognition of Postsecondary Accreditation; publicly recognized as a member in good standing with the Association of Universities and Colleges of Canada; or an institution of higher education located outside the United States and Canada, which at the time the applicant was enrolled and at the time the applicant graduated maintained a standard of training substantially equivalent to the standards of training of those institutions in the United States which are accredited by a regional accrediting body recognized by the Commission on Recognition of Postsecondary Accreditation. Such foreign education and training must have been received in an institution or program of higher education officially recognized by the government of the country in which it is located as an institution or program to train students to practice as mental health counselors. The burden of establishing that the requirements of this provision have been met shall be upon the applicant, and the board shall require documentation, such as, but not limited to, an evaluation by a foreign equivalency determination service, as evidence that the applicant’s graduate degree program and education were equivalent to an accredited program in this country.

(c) Has had at least 2 years of clinical experience in mental health counseling, which must be at the post-master’s level under the supervision of a licensed mental health counselor or the equivalent who is a qualified supervisor as determined by the board. An individual who intends to practice in Florida to satisfy the clinical experience requirements must register pursuant to s. 491.0045 before commencing practice. If a graduate has a master’s degree with a major related to the practice of mental health counseling that did not include all the coursework required under sub-subparagraphs (b)1.a.-b., credit for the post-master’s level clinical experience shall not commence until the applicant has completed a minimum of seven of the courses required under sub-subparagraphs (b)1.a.-b., as determined by the board, one of which must be a course in psychopathology or abnormal psychology. A doctoral internship may be applied toward the clinical experience requirement. A licensed mental health professional must be on the premises when clinical services are provided by a registered intern in a private practice setting.

(d) Has passed a theory and practice examination provided by the department for this purpose.

(e) Has demonstrated, in a manner designated by rule of the board, knowledge of the laws and rules governing the practice of clinical social work, marriage and family therapy, and mental health counseling.

(5) RULES.—The board may adopt rules necessary to implement any education or experience requirement of this section for licensure as a clinical social worker, marriage and family therapist, or mental health counselor.

History.—ss. 15, 19, ch. 87-252; s. 37, ch. 88-205; s. 29, ch. 88-392; ss. 6, 19, 20, ch. 90-263; s. 4, ch. 91-429; s. 11, ch. 93-260; s. 31, ch. 94-310; s. 10, ch. 95-279; ss. 12, 13, ch. 97-198; ss. 204, 205, ch. 97-264; ss. 167, 168, ch. 99-397; s. 2, ch. 2016-80.

**491.0057 Dual licensure as a marriage and family therapist**.—The department shall license as a marriage and family therapist any person who demonstrates to the board that he or she:

(1) Holds a valid, active license as a psychologist under chapter 490 or as a clinical social worker or mental health counselor under this chapter, or is licensed under s. 464.012 as an advanced practice registered nurse who has been determined by the Board of Nursing as a specialist in psychiatric mental health.

(2) Has held a valid, active license for at least 3 years.

(3) Has passed the examination provided by the department for marriage and family therapy.

History.—s. 14, ch. 97-198; s. 206, ch. 97-264; s. 69, ch. 2018-106.

**491.006 Licensure or certification by endorsement.—**

(1) The department shall license or grant a certificate to a person in a profession regulated by this chapter who, upon applying to the department and remitting the appropriate fee, demonstrates to the board that he or she:

(a) Has demonstrated, in a manner designated by rule of the board, knowledge of the laws and rules governing the practice of clinical social work, marriage and family therapy, and mental health counseling.

(b)1. Holds an active valid license to practice and has actively practiced the profession for which licensure is applied in another state for 3 of the last 5 years immediately preceding licensure.

2. Meets the education requirements of this chapter for the profession for which licensure is applied.

3. Has passed a substantially equivalent licensing examination in another state or has passed the licensure examination in this state in the profession for which the applicant seeks licensure.

4. Holds a license in good standing, is not under investigation for an act that would constitute a violation of this chapter, and has not been found to have committed any act that would constitute a violation of this chapter. The fees paid by any applicant for certification as a master social worker under this section are nonrefundable.

(2) The department shall not issue a license or certificate by endorsement to any applicant who is under investigation in this or another jurisdiction for an act which would constitute a violation of this chapter until such time as the investigation is complete, at which time the provisions of s. 491.009 shall apply.

History.—ss. 15, 19, ch. 87-252; ss. 7, 19, 20, ch. 90-263; s. 4, ch. 91-429; s. 21, ch. 95-145; s. 12, ch. 95-279; s. 509, ch. 97-103; s. 169, ch. 99-397; s. 32, ch. 2000-242.

**491.0065 Requirement for instruction on HIV and AIDS.—**The board shall require, as a condition of granting a license under this chapter, that an applicant making initial application for licensure complete an education course acceptable to the board on human immunodeficiency virus and acquired immune deficiency syndrome. An applicant who has not taken a course at the time of licensure shall, upon submission of an affidavit showing good cause, be allowed 6 months to complete this requirement.

History.—s. 13, ch. 95-279.

**491.007 Renewal of license, registration, or certificate.—**

(1) The board or department shall prescribe by rule a method for the biennial renewal of licenses or certificates at a fee set by rule, not to exceed $250.

(2) Each applicant for renewal shall present satisfactory evidence that, in the period since the license or certificate was issued, the applicant has completed continuing education requirements set by rule of the board or department. Not more than 25 classroom hours of continuing education per year shall be required. A certified master social worker is exempt from the continuing education requirements for the first renewal of the certificate.

(3) The board or department shall prescribe by rule a method for the biennial renewal of an intern registration at a fee set by rule, not to exceed $100.

History.—ss. 15, 19, ch. 87-252; ss. 19, 20, ch. 90-263; s. 4, ch. 91-429; s. 288, ch. 94-119; s. 15, ch. 97-198; s. 207, ch. 97-264; s. 9, ch. 98-130.

**491.008 Inactive status; reactivation of licenses; fees.—**

(1) Inactive status is the licensure status that results when a licensee has applied to be placed on inactive status and has paid a $50 fee to the department.

(a) An inactive license may be renewed biennially for $50 per biennium.

(b) An inactive license may be reactivated by submitting an application to the department, completing the continuing education requirements, complying with any background investigation required, complying with other requirements prescribed by the board, and paying a $50 reactivation fee plus the current biennial renewal fee at the time of reactivation.

(2) The board may adopt rules relating to inactive licenses and the reactivation of licenses.

History.—ss. 15, 19, ch. 87-252; ss. 8, 19, 20, ch. 90-263; s. 4, ch. 91-429; s. 289, ch. 94-119.

**491.0085 Continuing education and laws and rules courses; approval of providers, programs, and courses; proof of completion.—**

(1) Continuing education providers, programs, and courses and laws and rules courses and their providers and programs shall be approved by the department or the board.

(2) The department or the board has the authority to set a fee not to exceed $200 for each applicant who applies for or renews provider status. Such fees shall be deposited into the Medical Quality Assurance Trust Fund.

(3) Proof of completion of the required number of hours of continuing education and completion of the laws and rules course shall be submitted to the department or the board in the manner and time specified by rule and on forms provided by the department or the board.

(4) The department or the board shall adopt rules and guidelines to administer and enforce the provisions of this section.

History.—ss. 15, 19, ch. 87-252; ss. 19, 20, ch. 90-263; s. 4, ch. 91-429; s. 14, ch. 95-279; s. 170, ch. 99-397.

**491.009 Discipline.—**

(1) The following acts constitute grounds for denial of a license or disciplinary action, as specified in s. 456.072(2):

(a) Attempting to obtain, obtaining, or renewing a license, registration, or certificate under this chapter by bribery or fraudulent misrepresentation or through an error of the board or the department.

(b) Having a license, registration, or certificate to practice a comparable profession revoked, suspended, or otherwise acted against, including the denial of certification or licensure by another state, territory, or country.

(c) Being convicted or found guilty of, regardless of adjudication, or having entered a plea of nolo contendere to, a crime in any jurisdiction which directly relates to the practice of his or her profession or the ability to practice his or her profession. However, in the case of a plea of nolo contendere, the board shall allow the person who is the subject of the disciplinary proceeding to present evidence in mitigation relevant to the underlying charges and circumstances surrounding the plea.

(d) False, deceptive, or misleading advertising or obtaining a fee or other thing of value on the representation that beneficial results from any treatment will be guaranteed.

(e) Advertising, practicing, or attempting to practice under a name other than one’s own.

(f) Maintaining a professional association with any person who the applicant, licensee, registered intern, or certificateholder knows, or has reason to believe, is in violation of this chapter or of a rule of the department or the board.

(g) Knowingly aiding, assisting, procuring, or advising any nonlicensed, nonregistered, or noncertified person to hold himself or herself out as licensed, registered, or certified under this chapter.

(h) Failing to perform any statutory or legal obligation placed upon a person licensed, registered, or certified under this chapter.

(i) Willfully making or filing a false report or record; failing to file a report or record required by state or federal law; willfully impeding or obstructing the filing of a report or record; or inducing another person to make or file a false report or record or to impede or obstruct the filing of a report or record. Such report or record includes only a report or record which requires the signature of a person licensed, registered, or certified under this chapter.

(j) Paying a kickback, rebate, bonus, or other remuneration for receiving a patient or client, or receiving a kickback, rebate, bonus, or other remuneration for referring a patient or client to another provider of mental health care services or to a provider of health care services or goods; referring a patient or client to oneself for services on a fee-paid basis when those services are already being paid for by some other public or private entity; or entering into a reciprocal referral agreement.

(k) Committing any act upon a patient or client which would constitute sexual battery or which would constitute sexual misconduct as defined pursuant to s. 491.0111.

(l) Making misleading, deceptive, untrue, or fraudulent representations in the practice of any profession licensed, registered, or certified under this chapter.

(m) Soliciting patients or clients personally, or through an agent, through the use of fraud, intimidation, undue influence, or a form of overreaching or vexatious conduct.

(n) Failing to make available to a patient or client, upon written request, copies of tests, reports, or documents in the possession or under the control of the licensee, registered intern, or certificateholder which have been prepared for and paid for by the patient or client.

(o) Failing to respond within 30 days to a written communication from the department or the board concerning any investigation by the department or the board, or failing to make available any relevant records with respect to any investigation about the licensee’s, registered intern’s, or certificateholder’s conduct or background.

(p) Being unable to practice the profession for which he or she is licensed, registered, or certified under this chapter with reasonable skill or competence as a result of any mental or physical condition or by reason of illness; drunkenness; or excessive use of drugs, narcotics, chemicals, or any other substance. In enforcing this paragraph, upon a finding by the State Surgeon General, the State Surgeon General’s designee, or the board that probable cause exists to believe that the licensee, registered intern, or certificateholder is unable to practice the profession because of the reasons stated in this paragraph, the department shall have the authority to compel a licensee, registered intern, or certificateholder to submit to a mental or physical examination by psychologists, physicians, or other licensees under this chapter, designated by the department or board. If the licensee, registered intern, or certificateholder refuses to comply with such order, the department’s order directing the examination may be enforced by filing a petition for enforcement in the circuit court in the circuit in which the licensee, registered intern, or certificateholder resides or does business. The licensee, registered intern, or certificateholder against whom the petition is filed shall not be named or identified by initials in any public court records or documents, and the proceedings shall be closed to the public. The department shall be entitled to the summary procedure provided in s. 51.011. A licensee, registered intern, or certificateholder affected under this paragraph shall at reasonable intervals be afforded an opportunity to demonstrate that he or she can resume the competent practice for which he or she is licensed, registered, or certified with reasonable skill and safety to patients.

(q) Performing any treatment or prescribing any therapy which, by the prevailing standards of the mental health professions in the community, would constitute experimentation on human subjects, without first obtaining full, informed, and written consent.

(r) Failing to meet the minimum standards of performance in professional activities when measured against generally prevailing peer performance, including the undertaking of activities for which the licensee, registered intern, or certificateholder is not qualified by training or experience.

(s) Delegating professional responsibilities to a person whom the licensee, registered intern, or certificateholder knows or has reason to know is not qualified by training or experience to perform such responsibilities.

(t) Violating a rule relating to the regulation of the profession or a lawful order of the department or the board previously entered in a disciplinary hearing.

(u) Failure of the licensee, registered intern, or certificateholder to maintain in confidence a communication made by a patient or client in the context of such services, except as provided in s. 491.0147.

(v) Making public statements which are derived from test data, client contacts, or behavioral research and which identify or damage research subjects or clients.

(w) Violating any provision of this chapter or chapter 456, or any rules adopted pursuant thereto.

(2) The department, or, in the case of [1](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0400-0499/0491/0491.html#1)psychologists, the board, may enter an order denying licensure or imposing any of the penalties in s. 456.072(2) against any applicant for licensure or licensee who is found guilty of violating any provision of subsection (1) of this section or who is found guilty of violating any provision of s. 456.072(1).

History.—ss. 15, 19, ch. 87-252; ss. 9, 19, 20, ch. 90-263; s. 4, ch. 91-429; s. 229, ch. 96-410; s. 1136, ch. 97-103; s. 16, ch. 97-198; s. 208, ch. 97-264; s. 154, ch. 98-166; s. 214, ch. 2000-160; s. 53, ch. 2001-277; s. 28, ch. 2005-240; s. 103, ch. 2008-6.

1Note.—Psychologists are regulated by the Board of Psychology under chapter 490. Section 490.015 provides for regulation of school psychologists by the department.

**491.0111 Sexual misconduct.—**Sexual misconduct by any person licensed or certified under this chapter, in the practice of her or his profession, is prohibited. Sexual misconduct shall be defined by rule.

History.—ss. 15, 19, ch. 87-252; ss. 19, 20, ch. 90-263; s. 4, ch. 91-429; s. 510, ch. 97-103.

**491.0112 Sexual misconduct by a psychotherapist; penalties.—**

(1) Any psychotherapist who commits sexual misconduct with a client, or former client when the professional relationship was terminated primarily for the purpose of engaging in sexual contact, commits a felony of the third degree, punishable as provided in s. 775.082 or s. 775.083; however, a second or subsequent offense is a felony of the second degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.

(2) Any psychotherapist who violates subsection (1) by means of therapeutic deception commits a felony of the second degree punishable as provided in s. 775.082, s. 775.083, or s. 775.084.

(3) The giving of consent by the client to any such act shall not be a defense to these offenses.

(4) For the purposes of this section:

(a) The term “psychotherapist” means any person licensed pursuant to chapter 458, chapter 459, part I of chapter 464, chapter 490, or chapter 491, or any other person who provides or purports to provide treatment, diagnosis, assessment, evaluation, or counseling of mental or emotional illness, symptom, or condition.

(b) “Therapeutic deception” means a representation to the client that sexual contact by the psychotherapist is consistent with or part of the treatment of the client.

(c) “Sexual misconduct” means the oral, anal, or vaginal penetration of another by, or contact with, the sexual organ of another or the anal or vaginal penetration of another by any object.

(d) “Client” means a person to whom the services of a psychotherapist are provided.

History.—s. 1, ch. 90-70; s. 13, ch. 91-201; s. 4, ch. 91-429; s. 137, ch. 2000-318.

**491.012 Violations; penalty; injunction.—**

(1) It is unlawful and a violation of this chapter for any person to:

(a) Use the following titles or any combination thereof, unless she or he holds a valid, active license as a clinical social worker issued pursuant to this chapter:

1. “Licensed clinical social worker.”

2. “Clinical social worker.”

3. “Licensed social worker.”

4. “Psychiatric social worker.”

5. “Psychosocial worker.”

(b) Use the following **titles** or any combination thereof, unless she or he holds a valid, active license as a marriage and family therapist issued pursuant to this chapter:

1. “Licensed marriage and family therapist.”

2. “Marriage and family therapist.”

3. “Marriage counselor.”

4. “Marriage consultant.”

5. “Family therapist.”

6. “Family counselor.”

7. “Family consultant.”

(c) Use the following titles or any combination thereof, unless she or he holds a valid, active license as a mental health counselor issued pursuant to this chapter:

1. “Licensed mental health counselor.”

2. “Mental health counselor.”

3. “Mental health therapist.”

4. “Mental health consultant.”

(d) Use the terms psychotherapist, sex therapist, or juvenile sexual offender therapist unless such person is licensed pursuant to this chapter or chapter 490, or is licensed under s. 464.012 as an advanced practice registered nurse who has been determined by the Board of Nursing as a specialist in psychiatric mental health and the use of such terms is within the scope of her or his practice based on education, training, and licensure.

(e) Present as her or his own the clinical social work, marriage and family therapy, or mental health counseling license of another.

(f) Give false or forged evidence to the board or a member thereof for the purpose of obtaining a license.

(g) Use or attempt to use a license issued pursuant to this chapter which has been revoked or is under suspension.

(h) Knowingly conceal information relative to violations of this chapter.

(i) Practice clinical social work in this state for compensation, unless the person holds a valid, active license to practice clinical social work issued pursuant to this chapter or is an intern registered pursuant to s. 491.0045.

(j) Practice marriage and family therapy in this state for compensation, unless the person holds a valid, active license to practice marriage and family therapy issued pursuant to this chapter or is an intern registered pursuant to s. 491.0045.

(k) Practice mental health counseling in this state for compensation, unless the person holds a valid, active license to practice mental health counseling issued pursuant to this chapter or is an intern registered pursuant to s. 491.0045.

(l) Use the following titles or any combination thereof, unless he or she holds a valid registration as an intern issued pursuant to this chapter:

1. “Registered clinical social worker intern.”

2. “Registered marriage and family therapist intern.”

3. “Registered mental health counselor intern.”

(m) Use the following titles or any combination thereof, unless he or she holds a valid provisional license issued pursuant to this chapter:

1. “Provisional clinical social worker licensee.”

2. “Provisional marriage and family therapist licensee.”

3. “Provisional mental health counselor licensee.”

(n) Effective October 1, 2000, practice juvenile sexual offender therapy in this state, as the practice is defined in s. 491.0144, for compensation, unless the person holds an active license issued under this chapter and meets the requirements to practice juvenile sexual offender therapy. An unlicensed person may be employed by a program operated by or under contract with the Department of Juvenile Justice or the Department of Children and Families if the program employs a professional who is licensed under chapter 458, chapter 459, s. 490.0145, or s. 491.0144 who manages or supervises the treatment services.

(2) It is unlawful and a violation of this chapter for any person to describe her or his services using the following terms or any derivative thereof, unless such person holds a valid, active license under this chapter or chapter 490, or is licensed under s. 464.012 as an advanced practice registered nurse who has been determined by the Board of Nursing as a specialist in psychiatric mental health and the use of such terms is within the scope of her or his practice based on education, training, and licensure:

(a) “Psychotherapy.”

(b) “Sex therapy.”

(c) “Sex counseling.”

(d) “Clinical social work.”

(e) “Psychiatric social work.”

(f) “Marriage and family therapy.”

(g) “Marriage and family counseling.”

(h) “Marriage counseling.”

(i) “Family counseling.”

(j) “Mental health counseling.”

(3) Any person who violates any provision of subsection (1) or subsection (2) commits a misdemeanor of the first degree, punishable as provided in s. 775.082 or s. 775.083.

(4) The department may institute appropriate judicial proceedings to enjoin violation of this section.

History.—ss. 15, 19, ch. 87-252; s. 30, ch. 88-392; ss. 11, 19, 20, ch. 90-263; s. 4, ch. 91-429; s. 118, ch. 92-149; s. 511, ch. 97-103; s. 17, ch. 97-198; s. 209, ch. 97-264; s. 4, ch. 98-158; s. 127, ch. 2001-277511, ch. 97-103; s. 17, ch. 97-198; s. 209, ch. 97-264; s. 4, ch. 98-158; s. 127, ch. 2001-277; s. 274, ch. 2014-19; s. 70, ch. 2018-106.

**491.014 Exemptions.—**

(1) No provision of this chapter shall be construed to limit the practice of physicians licensed pursuant to chapter 458 or chapter 459, or psychologists licensed pursuant to chapter 490, so long as they do not unlawfully hold themselves out to the public as possessing a license, provisional license, registration, or certificate issued pursuant to this chapter or use a professional title protected by this chapter.

(2) No provision of this chapter shall be construed to limit the practice of nursing, school psychology, or psychology, or to prevent qualified members of other professions from doing work of a nature consistent with their training and licensure, so long as they do not hold themselves out to the public as possessing a license, provisional license, registration, or certificate issued pursuant to this chapter or use a title protected by this chapter.

(3) No provision of this chapter shall be construed to limit the performance of activities of a rabbi, priest, minister, or member of the clergy of any religious denomination or sect, or use of the terms “Christian counselor” or “Christian clinical counselor” when the activities are within the scope of the performance of his or her regular or specialized ministerial duties and no compensation is received by him or her, or when such activities are performed, with or without compensation, by a person for or under the auspices or sponsorship, individually or in conjunction with others, of an established and legally cognizable church, denomination, or sect, and when the person rendering service remains accountable to the established authority thereof.

(4) No person shall be required to be licensed, provisionally licensed, registered, or certified under this chapter who:

(a) Is a salaried employee of a government agency; a developmental disability facility or program; a mental health, alcohol, or drug abuse facility operating under chapter 393, chapter 394, or chapter 397; the statewide child care resource and referral network operating under s. 1002.92; a child-placing or child-caring agency licensed pursuant to chapter 409; a domestic violence center certified pursuant to chapter 39; an accredited academic institution; or a research institution, if such employee is performing duties for which he or she was trained and hired solely within the confines of such agency, facility, or institution, so long as the employee is not held out to the public as a clinical social worker, mental health counselor, or marriage and family therapist.

(b) Is a salaried employee of a private, nonprofit organization providing counseling services to children, youth, and families, if such services are provided for no charge, if such employee is performing duties for which he or she was trained and hired, so long as the employee is not held out to the public as a clinical social worker, mental health counselor, or marriage and family therapist.

(c) Is a student providing services regulated under this chapter who is pursuing a course of study which leads to a degree in a profession regulated by this chapter, is providing services in a training setting, provided such services and associated activities constitute part of a supervised course of study, and is designated by the title “student intern.”

(d) Is not a resident of this state but offers services in this state, provided:

1. Such services are performed for no more than 15 days in any calendar year; and

2. Such nonresident is licensed or certified to practice the services provided by a state or territory of the United States or by a foreign country or province.

(5) No provision of this chapter shall be construed to limit the practice of any individual who solely engages in behavior analysis so long as he or she does not hold himself or herself out to the public as possessing a license issued pursuant to this chapter or use a title protected by this chapter.

(6) Nothing in subsections (2)-(4) shall exempt any person from the provisions of s. 491.012(1)(a)-(c), (l), and (m).

(7) Except as stipulated by the board, the exemptions contained in this section do not apply to any person licensed under this chapter whose license has been suspended or revoked by the board or another jurisdiction.

(8) Nothing in this section shall be construed to exempt a person from meeting the minimum standards of performance in professional activities when measured against generally prevailing peer performance, including the undertaking of activities for which the person is not qualified by training or experience.

History.—ss. 15, 19, ch. 87-252; ss. 12, 19, 20, ch. 90-263; s. 4, ch. 91-429; s. 120, ch. 92-149; s. 34, ch. 93-39; s. 15, ch. 95-279; s. 512, ch. 97-103; s. 18, ch. 97-198; s. 210, ch. 97-264; s. 157, ch. 98-403; s. 171, ch. 99-397; s. 128, ch. 2001-277; s. 63, ch. 2006-227; s. 25, ch. 2010-210; s. 27, ch. 2013-252.

**491.0141 Practice of hypnosis**.—A person licensed under this chapter who is qualified as determined by the board may practice hypnosis as defined in s. 485.003(1). The provisions of this chapter may not be interpreted to limit or affect the right of any person qualified pursuant to chapter 485 to practice hypnosis pursuant to that chapter or to practice hypnosis for nontherapeutic purposes, so long as such person does not hold herself or himself out to the public as possessing a license issued pursuant to this chapter or use a title protected by this chapter.

History.—ss. 15, 19, ch. 87-252; ss. 19, 20, ch. 90-263; s. 4, ch. 91-429; ss. 121, 127, ch. 92-149; s. 2, ch. 95-279; s. 513, ch. 97-103; s. 215, ch. 2000-160.

**491.0143 Practice of sex therapy.—**Only a person licensed by this chapter who meets the qualifications set by the board may hold herself or himself out as a sex therapist. The board shall define these qualifications by rule. In establishing these qualifications, the board may refer to the sexual disorder and sexual dysfunction sections of the most current edition of the Diagnostic and Statistical Manual of the American Psychiatric Association or other relevant publications.

History.—ss. 15, 19, ch. 87-252; ss. 19, 20, ch. 90-263; s. 4, ch. 91-429; s. 514, ch. 97-103.

**491.0144 The practice of juvenile sexual offender therapy.—**Only a person licensed by this chapter who meets the qualifications set by the board may hold himself or herself out as a juvenile sexual offender therapist, except as provided in s. 490.0145. These qualifications shall be determined by the board. The board shall require training and coursework in the specific areas of juvenile sexual offender behaviors, treatments, and related issues. In establishing these qualifications, the board may refer to the sexual disorder and dysfunction sections of the most current edition of the Diagnostic and Statistical Manual of the American Psychiatric Association, Association for the Treatment of Sexual Abusers Practitioner’s Handbook, or other relevant publications.

History.—s. 5, ch. 98-158.

**491.0145 Certified master social worker.—**The department may certify an applicant for a designation as a certified master social worker upon the following conditions:

(1) The applicant completes an application to be provided by the department and pays a nonrefundable fee not to exceed $250 to be established by rule of the department. The completed application must be received by the department at least 60 days before the date of the examination in order for the applicant to qualify to take the scheduled exam.

(2) The applicant submits proof satisfactory to the department that the applicant has received a doctoral degree in social work, or a master’s degree with a major emphasis or specialty in clinical practice or administration, including, but not limited to, agency administration and supervision, program planning and evaluation, staff development, research, community organization, community services, social planning, and human service advocacy. Doctoral degrees must have been received from a graduate school of social work which at the time the applicant was enrolled and graduated was accredited by an accrediting agency approved by the United States Department of Education. Master’s degrees must have been received from a graduate school of social work which at the time the applicant was enrolled and graduated was accredited by the Council on Social Work Education or the Canadian Association of Schools of Social Work or by one that meets comparable standards.

(3) The applicant has had at least 3 years’ experience, as defined by rule, including, but not limited to, clinical services or administrative activities as defined in subsection (2), 2 years of which must be at the post-master’s level under the supervision of a person who meets the education and experience requirements for certification as a certified master social worker, as defined by rule, or licensure as a clinical social worker under this chapter. A doctoral internship may be applied toward the supervision requirement.

(4) Any person who holds a master’s degree in social work from institutions outside the United States may apply to the department for certification if the academic training in social work has been evaluated as equivalent to a degree from a school accredited by the Council on Social Work Education. Any such person shall submit a copy of the academic training from the Foreign Equivalency Determination Service of the Council on Social Work Education.

(5) The applicant has passed an examination required by the department for this purpose. The nonrefundable fee for such examination may not exceed $250 as set by department rule.

(6) Nothing in this chapter shall be construed to authorize a certified master social worker to provide clinical social work services.

History.—ss. 15, 19, ch. 87-252; ss. 14, 19, 20, ch. 90-263; s. 4, ch. 91-429; s. 10, ch. 98-130; s. 33, ch. 2000-242.

**491.0147 Confidentiality and privileged communications**.—Any communication between any person licensed or certified under this chapter and her or his patient or client shall be confidential. This secrecy may be waived under the following conditions:

(1) When the person licensed or certified under this chapter is a party defendant to a civil, criminal, or disciplinary action arising from a complaint filed by the patient or client, in which case the waiver shall be limited to that action.

(2) When the patient or client agrees to the waiver, in writing, or, when more than one person in a family is receiving therapy, when each family member agrees to the waiver, in writing.

(3) When, in the clinical judgment of the person licensed or certified under this chapter, there is a clear and immediate probability of physical harm to the patient or client, to other individuals, or to society and the person licensed or certified under this chapter communicates the information only to the potential victim, appropriate family member, or law enforcement or other appropriate authorities. There shall be no liability on the part of, and no cause of action of any nature shall arise against, a person licensed or certified under this chapter for the disclosure of otherwise confidential communications under this subsection.

History.—ss. 15, 19, ch. 87-252; ss. 19, 20, ch. 90-263; s. 4, ch. 91-429; s. 515, ch. 97-103; s. 1, ch. 2009-103.

**491.0148 Records**.—Each psychotherapist who provides services as defined in this chapter shall maintain records. The board may adopt rules defining the minimum requirements for records and reports, including content, length of time records shall be maintained, and transfer of either the records or a report of such records to a subsequent treating practitioner or other individual with written consent of the client or clients.

History.—ss. 13, 20, ch. 90-263; s. 4, ch. 91-429.

**491.0149 Display of license; use of professional title on promotional materials.—**

(1)(a) A person licensed under this chapter as a clinical social worker, marriage and family therapist, or mental health counselor, or certified as a master social worker shall conspicuously display the valid license issued by the department or a true copy thereof at each location at which the licensee practices his or her profession.

(b)1. A licensed clinical social worker shall include the words “licensed clinical social worker” or the letters “LCSW” on all promotional materials, including cards, brochures, stationery, advertisements, and signs, naming the licensee.

2. A licensed marriage and family therapist shall include the words “licensed marriage and family therapist” or the letters “LMFT” on all promotional materials, including cards, brochures, stationery, advertisements, and signs, naming the licensee.

3. A licensed mental health counselor shall include the words “licensed mental health counselor” or the letters “LMHC” on all promotional materials, including cards, brochures, stationery, advertisements, and signs, naming the licensee.

(2)(a) A person registered under this chapter as a clinical social worker intern, marriage and family therapist intern, or mental health counselor intern shall conspicuously display the valid registration issued by the department or a true copy thereof at each location at which the registered intern is completing the experience requirements.

(b) A registered clinical social worker intern shall include the words “registered clinical social worker intern,” a registered marriage and family therapist intern shall include the words “registered marriage and family therapist intern,” and a registered mental health counselor intern shall include the words “registered mental health counselor intern” on all promotional materials, including cards, brochures, stationery, advertisements, and signs, naming the registered intern.

(3)(a) A person provisionally licensed under this chapter as a provisional clinical social worker licensee, provisional marriage and family therapist licensee, or provisional mental health counselor licensee shall conspicuously display the valid provisional license issued by the department or a true copy thereof at each location at which the provisional licensee is providing services.

(b) A provisional clinical social worker licensee shall include the words “provisional clinical social worker licensee,” a provisional marriage and family therapist licensee shall include the words “provisional marriage and family therapist licensee,” and a provisional mental health counselor licensee shall include the words “provisional mental health counselor licensee” on all promotional materials, including cards, brochures, stationery, advertisements, and signs, naming the provisional licensee.

History.—ss. 15, 20, ch. 90-263; s. 4, ch. 91-429; s. 516, ch. 97-103; s. 19, ch. 97-198; s. 211, ch. 97-264.

**491.015 Duties of the department as to certified master social workers.—**

(1) All functions reserved to boards under chapter 456 shall be exercised by the department with respect to the regulation of certified master social workers and in a manner consistent with the exercise of its regulatory functions.

(2) The department shall adopt rules to implement and enforce provisions relating to certified master social workers.

History.—ss. 15, 19, ch. 87-252; ss. 16, 19, 20, ch. 90-263; s. 4, ch. 91-429; s. 155, ch. 98-166; s. 216, ch. 2000-160.

**491.016 Social work; use of title.—**

(1) A social worker is not authorized to conduct clinical social work without obtaining and possessing a license or certification issued pursuant to this chapter.

(2) It shall be a misdemeanor of the first degree, punishable as provided in s. 775.082 or s. 775.083, for a person, for or without compensation, to hold himself or herself out to the public as a social worker either directly or through a governmental or private organization, entity, or agency unless that person:

(a) Possesses at least a bachelor’s or master’s degree in social work from a social work program accredited by or from an institution that is an active candidate for accreditation as a social work program by the Council on Social Work Education; or

(b) Completes, at a university or college outside the United States or Canada, a social work program determined by the Foreign Equivalency Determination Service of the Council on Social Work Education to be equivalent to a bachelor’s or master’s degree in social work.

(3) This section does not apply to:

(a) A person who, prior to July 1, 2008, used the title “social worker” in his or her employment.

(b) Employees providing social work services under administrative supervision in long-term care facilities licensed by the Agency for Health Care Administration.

(4) The department shall adopt rules pursuant to ss. 120.536(1) and 120.54 to implement and enforce this section.

History.—s. 3, ch. 2008-154.

**Florida Administrative Code 64B4**

**Department of Health**

**Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling**

64b4-1 Organization

64b4-2 Definitions applicable to clinical social work, marriage and family therapy and mental health counseling

64b4-3 Licensure - clinical social work, marriage and family therapy and mental health counseling applicants

64b4-4 Fee schedule

64b4-5 Discipline

64b4-6 License renewal, continuing education credit

64b4-7 Standards of practice applicable to clinical social work, marriage and family therapy and mental health counseling

64b4-8 HIV and AIDS education

64b4-9 Client records

64b4-10 Sexual misconduct in the practice of marriage and family therapy, clinical social work and mental health counseling

64b4-11 Definitions applicable to social work

64b4-21 Definitions applicable to marriage and family therapy

64b4-22 Licensure by examination - marriage and family therapy

64b4-31 Definitions applicable to mental health counseling

**CHAPTER 64B4-1**

**ORGANIZATION**

**64B4-1.007 Other Business Involving the Board.**

For purposes of board member compensation under subsection (4), of Section 456.011, F.S., “other business involving the board” is defined to include:

(1) Board meetings;

(2) Meetings of committees of the Board;

(3) Meetings of a Board member with staff at the request of the Board or Department;

(4) Probable cause panel meetings;

(5) Attendance at legislative workshops or committee meetings at request of the Board or Department;

(6) Attendance at meetings of national associations as an authorized representative of the Board;

(7) Attendance at continuing education programs for the purpose of auditing a Board-approved provider when such attendance has been approved by the Board;

(8) Attendance at any function authorized by the Board or Department.

Rulemaking Authority 456.011(4), 491.004 FS. Law Implemented 286.0105, 456.011(3), (4) FS. History–New 4-10-88, Amended 4-8-90, Formerly 21CC-1.007, 61F4-1.007, 59P-1.007, Amended 12-11-97.

**64B4-1.0075 Attendance at Board Meetings.**

(1) Board members shall attend all regularly scheduled Board meetings unless prevented from doing so by reason of court order, subpoena, business with a court which has the sole prerogative of setting the date of such business, death of a family member, illness of the Board member, hospitalization of the member’s immediate family; or other extraordinary circumstances.

(2) No Board member may be absent from three consecutive regularly scheduled Board meetings unless the absence is excused for one of the reasons stated in subsection (1), of this rule. An absence for any reason other than the reasons stated in subsection (1), constitutes an unexcused absence for the purpose of declaring a vacancy on the Board. An otherwise excused absence is not excused if the Board member fails to notify the Board office of the impending absence prior to the regularly scheduled Board meeting at which the absence will occur or unless the failure to notify the Board office is the result of circumstances surrounding the reason for the absence which the Board itself excuses after the absence has occurred.

(3) “Family” consists of immediate family, aunts, uncles, nieces, nephews, cousins, and in-laws.

(4) “Immediate family” consists of spouse, child, parents, parents-in-law, siblings, grandchildren, and grandparents.

Rulemaking Authority 456.011, 491.004 FS. Law Implemented 456.011 FS. History–New 2-24-93, Formerly 21CC-1.0075, 61F4-1.0075, 59P-1.0075, Amended 12-11-97.

**64B4-1.015 Public Comment.**

The Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling invites and encourages all members of the public to provide comment on matters or propositions before the Board or a committee of the Board. The opportunity to provide comment shall be subject to the following:

(1) Members of the public will be given an opportunity to provide comment on subject matters before the Board after an agenda item is introduced at a properly noticed board meeting.

(2) Members of the public shall be limited to five (5) minutes to provide comment. This time shall not include time spent by the presenter responding to questions posed by Board members, staff or board counsel. The chair of the Board may extend the time to provide comment if time permits.

(3) A member of the public shall notify board staff in writing of his or her interest to be heard on a proposition or matter before the Board. The notification shall identify the person or entity, indicate the person or entity’s support, opposition, or neutrality, and identify who will speak on behalf of a group or faction of persons consisting of five (5) or more persons. If the person or entity does not wish to be identified, a pseudonym may be used.

Rulemaking Authority 286.0114 FS. Law Implemented 286.0114 FS. History‒New 3-12-14.

**CHAPTER 64B4-2**

**DEFINITIONS APPLICABLE TO CLINICAL SOCIAL WORK,**

**MARRIAGE AND FAMILY THERAPY AND MENTAL HEALTH COUNSELING**

**64B4-2.001 Definition of “Experience” for Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling.**

(1) Two year(s) of “clinical experience,” for clinical social work, marriage and family therapy or mental health counseling as used in Section 491.005, F.S.;

(a) Consists of at least 1500 hours of providing psychotherapy -face with clients as a registered intern for the profession for which licensure is sought; and,

(b) Shall be accrued in no less than 100 weeks.

(2) Credit for post-master’s clinical experience earned in another state shall be granted if it meets the requirements specified in Section 491.005(1)(c), (3)(c), or (4)(c), F.S.

Rulemaking Authority 491.004(5) FS. Law Implemented 491.005(1)(c), (3)(c), (4)(c) FS. History–New 7-6-88, Amended 12-29-91, Formerly 21CC-2.001, 61F4-2.001, 59P-2.001, Amended 11-13-97, 10-28-98.

**64B4-2.002 Definition of “Supervision” for Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling.**

Supervision is the relationship between the qualified supervisor and intern that promotes the development of responsibility, skills, knowledge, attitudes and adherence to ethical, legal and regulatory standards in the practice of clinical social work, marriage and family therapy and mental health counseling. Supervision is contact between an intern and a supervisor during which the intern apprises the supervisor of the diagnosis and treatment of each client, client cases are discussed, the supervisor provides the intern with oversight and guidance in diagnosing, treating and dealing with clients, and the supervisor evaluates the intern’s performance.

(1) An intern shall be credited for the time of supervision required by Section 491.005, F.S., if the intern:

(a) Received at least 100 hours of supervision in no less than 100 weeks; and,

(b) Provided at least 1500 hours of face-to-face psychotherapy with clients; and,

(c) Received at least 1 hour of supervision every two weeks.

(2) The supervision shall focus on the raw data from the intern’s face-to-face psychotherapy with clients. The intern shall make the raw data directly available to the supervisor through such means as written clinical materials, direct observation and video and audio recordings. Supervision is a process distinguishable from personal psychotherapy or didactic instruction.

(3) The supervisor and intern may utilize face-to-face electronic methods (not telephone only communication) to conduct the supervisory sessions; however, the supervisor and intern must have in-person face-to-face contact for at least 50% of all of the interactions required in subsection (1), above. Prior to utilizing any online or interactive methods for supervision, the supervisor and the intern shall have at least one in-person face-to-face meeting. The supervisor and the intern are responsible for maintaining the confidentiality of the clients during both in-person and online or interactive supervisory sessions.

(4) If an intern obtains group supervision, each hour of group supervision must alternate with an hour of individual supervision. Group supervision must be conducted with all participants present in-person. For the purpose of this section, individual supervision is defined as one qualified supervisor supervising no more than two (2) interns and group supervision is defined as one qualified supervisor supervising more than 2 but a maximum of 6 interns in the group.

Rulemaking Authority 491.004(5), 491.0045, 491.005(1)(c), (3)(c), (4)(c) FS. Law Implemented 491.005(1)(c), (3)(c), (4)(c) FS. History–New 7-6-88, Amended 3-21-90, Formerly 21CC-2.002, 61F4-2.002, Amended 1-7-96, 12-16-96, Formerly 59P-2.002, Amended 11-13-97, 10-28-98, 1-1-07, 3-14-07, 2-9.

**64B4-2.0025 Definition of “Qualified Supervisor”.**

(1) A “qualified supervisor” for clinical social work as specified in Section 491.005(1)(c), F.S., means a licensed clinical social worker or the equivalent who meets the qualifications specified in Rule 64B4-11.007, F.A.C.

(2) A “qualified supervisor” for marriage and family therapy as specified in Section 491.005(3)(c), F.S., means a licensed marriage and family therapist with at least five of experience or the equivalent who meets the qualifications specified in Rule 64B4-21.007, F.A.C.

(3) A “qualified supervisor” for mental health counseling as specified in Section 491.005(4)(c), F.S., means a licensed mental health counselor or the equivalent who meets the qualifications specified in Rule 64B4-31.007, F.A.C.

Rulemaking Authority 491.004(5), 491.005(1)(c), (3)(c), (4)(c) FS. Law Implemented 491.005(1)(c), (3)(c), (4)(c) FS. History–New 12-16-96, Formerly 59P-2.0025.

**64B4-2.003 Conflict of Interest in Supervision.**

Supervision provided by the applicant’s therapist, parents, spouse, former spouses, siblings, children, employees, or anyone sharing the same household, or any romantic, domestic or familial relationship shall not be acceptable toward fulfillment of licensure requirements. For the purposes of this section, a supervisor shall not be considered an employee of the applicant if the only compensation received by the supervisor consists of payment for actual supervisory hours.

Rulemaking Authority 491.004(5), 491.005(1)(c), (3)(c), (4)(c) FS. Law Implemented 491.005(1)(c), (3)(c), (4)(c) FS. History–New 1-4-90, Amended 2-13-91, 10-7-92, Formerly 21CC-2.003, 61F4-2.003, 59P-2.003.

**64B4-2.005 Place of Practice.**

For the purpose of notifying the Department of Health of the licensee’s place of practice, the term “place of practice” means the address of the physical location where the licensee practices clinical social work, marriage and family therapy or mental health counselling or where the licensee receives professional correspondence.

Rulemaking Authority 456.035, 491.004(5) FS. Law Implemented 456.035 FS. History–New 11-13-94, Formerly 59P-2.005.

**64B4-2.006 Definition of “Mental Health Professional”.**

“Mental health professional” as used in Sections 491.005(1)(c), (3)(c), (4)(c), and 491.0046(3), F.S., is defined as a psychotherapist licensed under Chapter 491, F.S., a psychologist licensed under Chapter 490, F.S., a psychiatrist licensed under Chapter 458 or 459, F.S., who is certified by the American Board of Psychiatry and Neurology; or an advanced registered nurse practitioner certified under Section 464.012, F.S., and who is certified by a board approved national certification organization pursuant to Rule 64B9-4.002, F.A.C.

Rulemaking Authority 491.004(5), 491.0046(3) FS. Law Implemented 491.0046(3), 491.005(1)(c), (3)(c), (4)(c) FS. History–New 2-11-98, Amended 4-24-00.

**CHAPTER 64B4-3**

**LICENSURE – CLINICAL SOCIAL WORK, MARRIAGE AND**

**FAMILY THERAPY AND MENTAL HEALTH COUNSELING APPLICANTS**

**64B4-3.001 Application for Licensure for Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling Applicants.**

Every applicant for licensure as a clinical social worker, marriage and family therapist or mental health counselor shall submit to the Board a completed application on Form DH-MQA 1174, Application for Licensure (revised 02/18), hereby adopted and incorporated by reference, which can be obtained from <http://www.flrules.org/Gateway/reference.asp?No=Ref-09649>, or the web at http://www.floridasmentalhealthprofessions.gov/resources. The application shall be accompanied with the application fee and the initial licensure fee.

(1) An application for licensure by examination shall be accompanied with the application fee and the initial active status license fee specified in rule 64B4-4.002, F.A.C.

(2) An application for licensure by endorsement shall be accompanied with the application fee specified in rule 64B4-4.003, F.A.C., and the initial active status license fee specified in rule 64B4-4.002, F.A.C.

Rulemaking Authority 491.004(5) FS. Law Implemented 456.013, 456.0635, 491.005, 491.006, 491.0065 FS. History–New 7-6-88, Amended 1-28-91, 11-3-92, Formerly 21CC-3.001, 61F4-3.001, Amended 11-13-96, Formerly 59P-3.001, Amended 6-8-09, 2-24-10, 4-4-13, 5-12-16, 9-1-16, 8-7-18.

**64B4-3.0015 Verification of Supervised Experience for Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling Applicants.**

(1) Every applicant for licensure by examination as a clinical social worker, marriage and family therapist or mental health counselor shall verify the required supervised experience on Form DH-MQA 1181, “Verification of Clinical Experience” (Revised 11/16), which is hereby adopted and incorporated by reference and is available from <http://www.flrules.org/Gateway/reference.asp?No=Ref-07835>, or the web at www.floridasmentalhealthprofessions.gov/forms/clinical-exp-verification.pdf. This form is to be completed and signed by the applicant’s supervisor.

(2) Applicants for licensure in Clinical Social Work, Marriage and Family Therapy or Mental Health Counseling who cannot provide verification by the methods above will be reviewed on an individual basis as to the sufficiency of alternative verification.

Rulemaking Authority 491.004(5) FS. Law Implemented 491.005(1)(c), (3)(c), (4)(c) FS. History–New 6-8-09, Amended 8-27-13, 2-1-17.

**64B4-3.002 Documentation of Course Content Completed in Independent Study.**

(1) For the purpose of this rule an “independent study” course will be defined as:

(a) Any course for which the institution which granted credit for the course did not publish an official course description of content; and/or

(b) Any course labeled by the institution as independent study, directed study, or directed research; and/or

(c) Any course in which learning was not completed in a classroom setting with a member of the faculty of the institution which granted credit and no other students matriculated in the same course were present during the learning experience.

(2) In order to document that a course or course content area required by section 491.005, F.S., has been completed by “independent study” an applicant shall submit an official transcript from the institution awarding credit for the independent study course.

Rulemaking Authority 491.004(5) FS. Law Implemented 491.005 FS. History–New 1-4-90, Formerly 21CC-3.002, 61F4-3.002, 59P-3.002, Amended 2-9-16.

**64B4-3.003 Examination for Licensure.**

(1) An applicant who has completed all requirements for the examination and has been certified eligible by the board will be admitted to the examination for licensure.

(2) Theory and practice.

(a) Clinical social workers. The theory and practice examination for clinical social workers shall be the Clinical Level objective multiple choice examination developed by the Association of Social Work Boards (ASWB). The minimum passing score is the recommended cut-off score provided by the national vendor established according to a standard-setting method.

(b) Mental health counselors. The National Clinical Mental Health Counseling Examination (NCMHCE) shall be a clinical simulation examination developed by the National Board for Certified Counselors (NBCC). All options are given a weight based upon the level of appropriateness for good client care. The minimum pass level shall be the recommended cut-off score provided by the NBCC and established according to a content-based modified Angoff procedure.

(c) Marriage and family therapists. The marital and family therapy examination shall be an objective multiple choice examination developed by the Examination Advisory Committee of the Association of Marital and Family Therapy Regulatory Board (AMFTRB). All items will be weighted equally in scoring the examination. The minimum passing score is the recommended cut-off score provided by the national vendor and established according to the Angoff procedure.

Rulemaking Authority 456.017, 491.004(5) FS. Law Implemented 456.017, 491.005 FS. History–New 3-21-90, Amended 7-31-91, 3-10-92, 6-1-92, 1-27-93, Formerly 21CC-3.003, Amended 3-14-94, 7-20-94, Formerly 61F4-3.003, Amended 12-22-94, 9-18-95, 11-13-96, 6-1-97, Formerly 59P-3.003, Amended 8-8-99, 1-11-00, 7-2-00, 8-24-00, 10-15-02, 7-8-03, 6-7-10, 8-30-15.

**64B4-3.0035 Demonstrating Knowledge of Laws and Rules for Licensure.**

An applicant for licensure in Clinical Social Work, Marriage and Family Therapy or Mental Health Counseling shall demonstrate knowledge of the laws and rules for licensure in the following manner:

(1) An applicant shall complete an approved course consisting of a minimum of eight (8) hours which shall include the following subject areas:

(a) Chapter 456, part II, F.S., (Regulation of Professions and Occupations, General Provisions)

(b) Chapter 90.503, F.S., (Psychotherapist-Patient Privilege)

(c) Chapter 394, F.S., (Part I Florida Mental Health Act)

(d) Chapter 397, F.S.

(e) Chapters 415 and 39, F.S., (Protection from Abuse, Neglect and Exploitation)

(f) Chapter 491, F.S., (Clinical, Counseling and Psychotherapy Services)

(g) Division 64B4, F.A.C., (Rules of the Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling)

(2) The laws and rules course must provide integration of the above subject areas into the competencies required for clinical practice and must include interactive discussion of clinical case examples applying the laws and rules that govern the appropriate clinical practice.

(3) An approved laws and rules course must include a testing mechanism on which a passing score of 80 percent must be obtained by the attendee prior to issuing credit. Upon successful completion of the course, the applicant shall receive a certificate of completion and submit a copy of the certificate of completion to the Board.

(4) A laws and rules course offered by a Board approved laws and rules course provider shall qualify for continuing education credit even if the provider is not an approved continuing education provider pursuant to rule 64B4-6.004, F.A.C.

(5) For purposes of this rule, an hour is defined as a 60-minute clock hour in which there is no less than 50 minutes of uninterrupted instruction.

(6) Laws and rules courses may be offered and conducted on-line but must comply with all aspects of this rule. Such courses must include real time (contemporaneous) interactive discussions as required by subsection (2) of this rule.

Rulemaking Authority 491.004(5) FS. Law Implemented 491.005(1)(e) FS. History–New 12-28-99, Amended 8-9-00, 10-16-03, 10-7-12, 6-30-15.

**64B4-3.005 Course Content Documentation.**

In the event the course titles which appear on the applicant’s transcript do not clearly identify the content of the coursework, the applicant shall be required to provide additional documentation in the form of:

(1) A course syllabus, or

(2) A catalog description published for the course during the term the course was taken.

(3) If neither subsection (1) or (2), above, is deemed adequate by the Board or its designee, the applicant must furnish an official statement on university letterhead from the college or university dean or the academic department chairperson verifying the course contents.

Rulemaking Authority 491.004(5), 491.005 FS. Law Implemented 491.005 FS. History–New 3-10-92, Formerly 21CC-3.005, 61F4-3.005, 59P-3.005, Amended 8-8-99.

**64B4-3.0051 Documentation of Substantially Equivalent Licensing Examination.**

In order for the Board to determine whether an applicant by endorsement has passed a substantially equivalent licensing examination in another state, the endorsement applicant shall provide the Board with documentation which demonstrates that the exam taken in another state is substantially equal in essential materials and elements to the licensure examinations required in rule 64B4-3.003, F.A.C. Essential and material elements shall include but are not limited to:

(1) Name and publisher of the exam;

(2) Time allotted for taking the exam;

(3) Subject content domains covered by the exam;

(4) Conditions under which the exam was taken;

(5) Grading criteria;

(6) Raw score and scaled passing score;

(7) Exam administration date;

(8) Exam format (multiple choice/essay); and,

(9) Exam security procedures.

Rulemaking Authority 491.004, 491.006 FS. Law Implemented 491.006 FS. History–New 4-24-00.

**64B4-3.006 Security and Monitoring Procedures for Licensure Examination.**

Rulemaking Authority 456.017, 491.004(5) FS. Law Implemented 456.017 FS. History–New 8-18-93, Formerly 61F4-3.006, 59P-3.006, Repealed 4-27-10.

**64B4-3.0075 Provisional Licensure.**

(1) An applicant for licensure by examination or endorsement who intends to practice in Florida while satisfying coursework or examination requirements for licensure must be provisionally licensed in the profession for which he or she is seeking licensure prior to beginning practice.

(2) An applicant seeking a provisional license must submit a completed application to the Board on Form DH-MQA 1176, Provisional License Application (Revised 11/16), hereby adopted and incorporated by reference, which can be obtained from <http://www.flrules.org/Gateway/reference.asp?No=Ref-07852>, or the Board office at 4052 Bald Cypress Way, Bin C-08, Tallahassee, Florida 32399-3258. The application shall be accompanied by the application fee specified in rule 64B4-4.014, F.A.C., which is non-refundable.

(3) A provisional license shall be valid for a twenty-four (24) month period after the license is issued and may not be renewed or reissued.

Rulemaking Authority 456.013, 491.004(5), 491.0046 FS. Law Implemented 456.013, 456.0635, 491.0046 FS. History–New 6-8-09, Amended 2-13-17.

**64B4-3.008 Supervision Required Until Licensure.**

(1) An applicant who practices clinical social work, marriage and family therapy and/or mental health counseling must continue in “supervision” as defined in rule 64B4-2.002, F.A.C., and use the term “Registered Clinical Social Work Intern, Registered Marriage and Family Therapy Intern, or Registered Mental Health Counseling Intern” until he or she is in receipt of a license to practice the profession for which he or she has applied or a letter from the Department stating he or she is licensed, even if the two (2) year post-masters supervision requirement has been satisfied.

(2) All provisional licensees who practice clinical social work, marriage and family therapy and/or mental health counseling must continue in supervision, until he or she is in receipt of a license or a letter from the Department stating he or she is licensed as a clinical social worker, marriage and family therapist, or mental health counselor. Supervision is defined as contact between the provisional licensee and the qualified supervisor during which client cases are discussed and the supervisor provides the provisional licensee with oversight and guidance in diagnosing, treating and dealing with clients in conformance with Florida laws and rules. During the period of provisional licensure, the provisional licensee and the qualified supervisor shall meet face-to-face for at least one hour per month. For the purposes of this subparagraph, supervisor is defined as a Florida licensed clinical social worker, marriage and family therapist, or mental health counselor.

Rulemaking Authority 491.004(5), 491.014(4)(c), 491.005(6) FS. Law Implemented 491.012, 491.014(4)(c), 491.0046(3) FS. History–New 3-14-94, Formerly 61F4-3.008, 59P-3.008, Amended 10-28-98, 9-28-06, 10-17-10.

**64B4-3.0085 Intern Registration.**

(1) An individual who intends to practice in Florida to satisfy the post-master’s experience must register as an intern by submitting a completed application to the Board on Form DH-MQA 1175, Intern Registration Application (Revised 07/16), hereby adopted and incorporated by reference, which can be obtained from <http://www.flrules.org/Gateway/reference.asp?No=Ref-07407>, or the web at www.floridasmentalhealthprofessions.gov/resources. The application shall be accompanied by the application fee specified in rule 64B4-4.015, F.A.C., which is non-refundable.

(2) An intern is required to identify a qualified supervisor by requesting that the supervisor submit a letter to the Board with the applicant’s name, supervisor’s name, supervisor’s license number, and a statement that he or she has agreed to provide supervision while the applicant is a registered intern.

(3) Prior to changing or adding another qualified supervisor, the registered intern must:

(a) Request that the new supervisor submit a letter to the Board with the registered intern’s name, the intern’s license number, the supervisor’s name, the supervisor’s license number, and a statement that he or she has agreed to provide supervision to the registered intern; and,

(b) Receive a communication from the Board indicating its approval of the new supervisor.

(4) Experience obtained under the supervision of the new qualified supervisor will not count toward completion of the experience requirement until the registered intern has received board approval of their new qualified supervisor.

Rulemaking Authority 491.004(5) FS. Law Implemented 456.013, 456.0635, 491.0045 FS. History–New 6-8-09, Amended 2-24-10, 10-17-10, 4-4-13, 2-9, 6-7-16, 9-1-16.

**64B4-3.009 Limited Licenses.**

(1) Pursuant to section 456.015, F.S., this rule permits the practice by retired professionals in good standing to serve the indigent and critical need populations of this state.

(2) Any person desiring to obtain a limited license shall submit a completed application to the Board on Form DH-MQA 1178, Application for Limited Licensure (Revised 07/16), hereby adopted and incorporated by reference, which can be obtained from <http://www.flrules.org/Gateway/reference.asp?No=Ref-07408>, or the Board’s website at http://www.floridasmentalhealthprofessions.gov/resources. The application shall be accompanied by the documents required by section 456.015(2), F.S., and a fee of $25 unless the applicant provides a notarized statement from the employer stating that the applicant will not receive monetary compensation for service involving the practice of his profession.

(3) In addition to the restrictions on practice set forth in section 456.015(4), F.S., a recipient of a limited license may practice in a critical need area which are state mental institutions, state institutions for the mentally retarded, the Department of Corrections, and health manpower shortages areas established by the United States Department of Health and Human Services.

Rulemaking Authority 456.015 FS. Law Implemented 456.013, 456.015, 456.0635 FS. History–New 11-13-96, Formerly 59P-3.009, Amended 6-8-09, 3-11-10, 5-12-16, 9-1-16.

**64B4-3.010 Marriage and Family Therapy Dual Licensure.**

Any psychologist licensed under chapter 490, F.S., clinical social worker or mental health counselor licensed under this chapter or any advanced registered nurse practitioner certified under section 464.012, F.S., and determined by the Board of Nursing to be a specialist in psychiatric mental health, desiring to obtain licensure as a marriage and family therapist shall submit a completed application to the Board on Form DH-MQA 1177, Marriage and Family Therapy Dual Licensure Application (Revised 07/16), hereby adopted and incorporated by reference, which can be obtained from <http://www.flrules.org/Gateway/reference.asp?No=Ref-07409>, or the Board’s website at http://www.floridasmentalhealthprofessions.gov/resources. The application shall be accompanied with the application fee and the initial active status license fee specified in rule 64B4-4.002, F.A.C.

Rulemaking Authority 491.004(5) FS. Law Implemented 456.013, 491.0057, 456.0635 FS. History–New 6-8-09, Amended 2-24-10, 5-12-16, 9-1-16.

**CHAPTER 64B4-4**

**FEE SCHEDULE**

**64B4-4.002 Application and Initial Active Status License Fee for Licensure.**

(1) The fees for application and initial active status licensure are:

$100 application fee and $75 initial licensure fee for a total of $175.

(2) The initial licensure fee is refundable only if the applicant is ruled ineligible for licensure and the applicant submits a written request to the Department for a refund.

Rulemaking Authority 491.004(5), 491.005 FS. Law Implemented 491.005 FS. History–New 4-3-89, Amended 4-19-92, Formerly 21CC-4.002, 61F4-4.002, Amended 12-22-94, 7-6-95, 1-7-96, 3-5-96, Formerly 59P-4.002, Amended 1-25-98, 10-18-99, 8-9-00, 10-9-00, 10-15-02, 2-5-09, 5-11-10, 8-7-18.

**64B4-4.003 Application Fee for Licensure by Endorsement.**

Rulemaking Authority 456.025(3), 491.004(5), 491.006(1) FS. Law Implemented 456.025(3), 491.006 FS. History–New 4-3-89, Formerly 21CC-4.003, 61F4-4.003, 59P-4.003, Amended 10-9-00, 4-4-13, Repealed 8-7-18.

**64B4-4.005 Biennial Licensure Fee.**

The biennial licensure fee for a clinical social worker license, marriage and family therapist license and mental health counselor license shall be $115 each.

Rulemaking Authority 456.025(1), 491.004(5), 491.007(1) FS. Law Implemented 456.025(1), 491.007(1) FS. History–New 4-3-89, Amended 2-25-90, 6-1-92, Formerly 21CC-4.005, Amended 1-9-94, Formerly 61F4-4.005, 59P-4.005, Amended 10-9-00, 9-6-04, 6-7-10, 8-7-18.

**64B4-4.0051 Reactivation Fee.**

The fee for reactivating an inactive status license shall be $50.

Rulemaking Authority 456.036, 491.004(5) FS. Law Implemented 456.036, 491.008 FS. History–New 12-22-94, Formerly 59P-4.0051.

**64B4-4.0052 Renewal of Inactive Status Fee.**

The fee for the biennial renewal of an inactive status is $50.

Rulemaking Authority 456.036, 491.004(5) FS. Law Implemented 456.036, 491.008 FS. History–New 12-22-94, Formerly 59P-4.0052.

**64B4-4.0053 Retired Status Fee.**

The fee for an active or inactive status licensee who chooses retired status is $50.

Rulemaking Authority 456.036(4)(b), 491.004(5) FS. Law Implemented 456.036(4)(b) FS. History–New 1-16-06.

**64B4-4.006 Change of Status Fee.**

The fee for processing a licensee’s request to change licensure status at any time other than at the beginning of a licensure cycle shall be $105.

Rulemaking Authority 456.036, 491.004(5) FS. Law Implemented 456.036 FS. History–New 11-13-94, Formerly 59P-4.006, Amended 10-9-00.

**64B4-4.007 Delinquency Fee.**

The fee for a delinquent status licensee applying for active or inactive status shall be $105.

Rulemaking Authority 456.036, 491.004(5) FS. Law Implemented 456.036 FS. History–New 11-13-94, Formerly 59P-4.007.

**64B4-4.009 Continuing Education Provider Application Fee.**

The nonrefundable application fee for Board approval of a continuing education provider shall be $200 for each licensure biennium for which the provider seeks approval.

Rulemaking Authority 491.004, 491.0085 FS. Law Implemented 491.0085(2) FS. History–New 4-3-89, Formerly 21CC-4.009, 61F4-4.009, 59P-4.009, Amended 12-21-97, 2-8-05.

**64B4-4.013 Initial Licensure Fee.**

Rulemaking Authority 456.013(2), 456.025(1), 491.004(5) FS. Law Implemented 456.013(2), 456.025(1), 491.005, 491.006(1) FS. History–New 6-1-92, Formerly 21CC-4.013, Amended 1-9-94, Formerly 61F4-4.013, 59P-4.013, Repealed 8-7-18.

**64B4-4.014 Provisional License Application Fee.**

The nonrefundable application fee for provisional licensure shall be $100 which is valid for a 24 month period after the license is issued and which is nonrenewable.

Rulemaking Authority 491.004(5), 491.0046(2)(a) FS. Law Implemented 491.0046(2)(a) FS. History–New 1-25-98, Amended 10-9-00.

**64B4-4.015 Registered Intern Registration Fee.**

The nonrefundable application fee for registered intern registration is $150.

Rulemaking Authority 491.004(5), 491.0045(2)(a) FS. Law Implemented 491.0045(2)(a), 491.005 FS. History–New 3-2-98, Amended 10-9-00, 10-15-02.

**64B4-4.016 Registered Intern Biennial Renewal Fee.**

Rulemaking Authority 491.004(5), 491.007(3) FS. Law Implemented 491.007(3) FS. History–New 12-21-97, Amended 10-9-00, Repealed 5-29-17.

**64B4-4.018 Registered Intern Delinquency Fee.**

Rulemaking Authority 456.36(7), 491.004 FS. Law Implemented 456.36(7), 491.007(3) FS. History–New 10-18-99, Repealed 5-29-17.

**64B4-4.019 Duplicate License Fee.**

The fee for a duplicate license shall be $25.

Rulemaking Authority 456.025(10), 491.004 FS. Law Implemented 456.025(10) FS. History–New 12-17-06.

**CHAPTER 64B4-5**

**DISCIPLINE**

**64B4-5.001 Disciplinary Guidelines.**

(1) When the Board finds an applicant, licensee, registered intern, provisional licensee, or certificate holder whom it regulates under Chapter 491, F.S., has committed any of the acts set forth in Section 456.072(1) or 491.009(1), F.S., it shall issue a final order imposing appropriate penalties as recommended in the following disciplinary guidelines.

(a) Attempting to obtain, obtaining, or renewing a license under Chapter 491, F.S., by bribery or fraudulent misrepresentation or through an error of the Board or the Department.

(Sections 456.072(1)(h) and 491.009(1)(a), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $500.00 fine and reprimand | Denial or $1,000.00 fine and permanent revocation |
| SECOND OFFENSE: | $1,000.00 fine and probation | Permanent denial and $1,000.00 fine and permanent revocation |
| THIRD OFFENSE: | $2,500.00 fine, 1 year suspension then probation | $2,500.00 fine and permanent revocation |
| FRAUD First Offense | $10,000.00 fine | $10,000.00 fine and/or reprimand; probation; suspension then probation; permanent revocation |
| FRAUD Second Offense | $10,000.00 fine | $10,000.00 fine and/or probation; suspension then probation; permanent revocation |
| FRAUD Third Offense | $10,000.00 fine | $10,000.00 fine and/or 1 year suspension then probation; permanent revocation |

(b) Having a license or certificate to practice a comparable profession or any regulated profession revoked, suspended, or otherwise acted against, including the denial of certification or licensure by another state, territory, or country.

(Sections 456.072(1)(f) and 491.009(1)(b), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $1,000.00 fine and reprimand | Denial or $1,000.00 fine and permanent revocation |
| SECOND OFFENSE: | $1,000.00 fine and probation | Permanent denial or $1,000.00 fine and permanent revocation |
| THIRD OFFENSE: | $1,000.00 fine, 1 year, suspension then probation | Permanent denial or $1,000.00 fine and permanent revocation |

(c) Being convicted or found guilty, regardless of adjudication, or having entered a plea of nolo contendere to, a crime in any jurisdiction which directly relates to the practice of the licensee’s profession or the licensee’s ability to practice that profession.

(Sections 456.072(1)(c) and 491.009(1)(c), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $1,000.00 fine and probation | Denial or $1,000.00 fine and permanent revocation |
| SECOND OFFENSE: | $1,000.00 fine and 1 year suspension then probation | Permanent denial or $1,000.00 fine and permanent revocation |
| THIRD OFFENSE: | $2,500.00 fine, 2 year suspension then probation | $2,500.00 fine and permanent revocation |

(d) False, deceptive, or misleading advertising or obtaining a fee or other thing of value on the representation that beneficial results from any treatment will be guaranteed.

(Section 491.009(1)(d), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $250.00 fine | $1,000.00 fine and reprimand |
| SECOND OFFENSE: | $500.00 fine | $1,000.00 fine and probation |
| THIRD OFFENSE: | $1,000.00 fine | $1,000.00 fine and 1 year suspension then probation |

(e) Advertising, practicing, or attempting to practice under a name other than one’s own.

(Section 491.009(1)(e), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $250.00 fine | $1,000.00 fine and reprimand |
| SECOND OFFENSE: | $500.00 fine | $1,000.00 fine and probation |
| THIRD OFFENSE: | $1,000.00 fine | $1,000.00 fine and 1 year suspension then probation |

(f) Maintaining a professional association with any person whom the applicant or licensee knows, or has reason to believe, is in violation of Chapter 491, F.S., or of a rule of the Department or this Board.

(Section 491.009(1)(f), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $250.00 fine | $1,000.00 fine and reprimand |
| SECOND OFFENSE: | $500.00 fine | $1,000.00 fine and probation |
| THIRD OFFENSE: | $1,000.00 fine | $1,000.00 fine and 1 year suspension then probation |

(g) Knowingly aiding, assisting, procuring, or advising a non‑licensed person to hold oneself out as licensed under Chapter 491, F.S.

(Sections 456.072(1)(j) and 491.009(1)(g), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $1,000.00 fine and reprimand | $1,000.00 fine and/or probation, 1 year suspension then probation; permanent revocation |
| SECOND OFFENSE: | $1,000.00 fine and probation | $1,000.00 fine and permanent revocation |
| THIRD OFFENSE: | $1,000.00 fine and 1 year suspension then probation | $1,000.00 fine and permanent revocation |

(h) Failing to perform any statutory or legal obligation placed upon a person licensed under Chapter 491, F.S.

(Sections 456.072(1)(k) and 491.009(1)(h), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | Reprimand | $1,000.00 fine and 1 year probation |
| SECOND OFFENSE: | $1,000.00 fine and reprimand | $1,000.00 fine and 6 month suspension then probation |
| THIRD OFFENSE: | $1,000.00 fine and probation | $1,000.00 fine and permanent revocation |

(i) Willfully making or filing a false report or record; failing to file a report or record required by state or federal law; willfully impeding or obstructing the filing of a report or record; or inducing another person to make or file a false report or record or to impede or obstruct the filing of a report or record.

(Sections 456.072(1)(l) and 491.009(1)(i), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $500.00 fine and reprimand | $1,000.00 fine and/or probation; 1 year suspension then probation; permanent revocation |
| SECOND OFFENSE: | $1,000.00 fine and probation | $1,000.00 fine and 1 year suspension followed by probation; denial or $1,000.00 fine and permanent revocation |
| THIRD OFFENSE: | $1,000.00 fine, 1 year suspension followed by probation | $10,000.00 fine and permanent revocation |

(j) Paying or receiving a kickback, rebate, bonus, or other remuneration for receiving a patient or client or referring a patient or client to another provider of mental health care services or to a provider of health care services or goods; referring a patient or client to oneself for services on a fee‑paid basis when those services are already being paid for by some other public or private entity; or entering into a reciprocal referral agreement.

(Section 491.009(1)(j), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $1,000.00 fine and reprimand | $1,000.00 fine and probation |
| SECOND OFFENSE: | $1,000.00 fine and probation | $1,000.00 fine and 1 year suspension then probation |
| THIRD OFFENSE: | $1,000.00 fine and 1 year suspension then probation | Denial or $1,000.00 fine and permanent revocation |

(k) Committing any act upon a patient or client, which would constitute sexual battery or which would constitute sexual misconduct.

(Sections 456.072(1)(v) and 491.009(1)(k), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $1,000.00 fine and 1 year suspension then probation | Denial or $1,000.00 fine and revocation |
| SECOND OFFENSE: | $1,000.00 fine and 2 year suspension then probation | Denial or $1,000.00 fine and permanent revocation |
| THIRD OFFENSE: | $5,000.00 fine, 2 year suspension then probation | $10,000.00 fine and/or permanent revocation |

(l) Making misleading, deceptive, untrue, or fraudulent misrepresentations in the practice of any profession licensed under Chapter 491, F.S., or employing a trick or scheme in or related to the practice of a profession.

(Sections 456.072(1)(m) and 491.009(1)(l), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $250.00 fine | $1,000.00 fine and reprimand |
| SECOND OFFENSE: | $500.00 fine | $1,000.00 fine and probation |
| THIRD OFFENSE: | $1,000.00 fine | $1,000.00 fine and 1 year suspension followed by probation |
| FRAUD First Offense | $10,000.00 fine | $10,000.00 fine and/or reprimand; probation; suspension then probation; permanent revocation |
| FRAUD Second Offense | $10,000.00 fine | $10.000.00 fine and/or probation; suspension then probation; permanent revocation |
| FRAUD Third Offense | $10,000.00 fine | $10,000.00 fine and/or 1 year suspension then probation; permanent revocation |

(m) Soliciting patients or clients personally, or through an agent, through the use of fraud, intimidation, undue influence, or a form of overreaching or vexatious conduct.

(Section 491.009(1)(m), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $500.00 fine and reprimand | $1,000.00 fine and/or 6 month suspension then probation, permanent revocation |
| SECOND OFFENSE: | $1,000.00 and reprimand | $1,000.00 fine and/or 1 year suspension then probation, permanent revocation |
| THIRD OFFENSE: | $1,000.00 fine and 1 year suspension then probation | $1,000.00 fine and/or permanent revocation |
| FRAUD First Offense | $10,000.00 fine and reprimand | $10,000.00 fine and/or 6 month suspension then probation; permanent revocation |
| FRAUD Second Offense | $10,000.00 fine and reprimand | $10,000.00 fine and/or 1 year suspension then probation; permanent revocation |
| FRAUD Third Offense | $10,000.00 fine and 1 year suspension then probation | $10,000.00 fine and/or permanent revocation |

(n) Failing to make available to a patient or client, upon written request, copies of tests, reports, or documents in the possession or under the control of the licensee which have been prepared for and paid for by the patient or client.

(Section 491.009(1)(n), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $500.00 fine and reprimand | $1,000.00 fine and probation |
| SECOND OFFENSE: | $1,000.00 fine and probation | $1,000.00 fine and 1 year suspension then probation |
| THIRD OFFENSE: | $2,500.00 fine, 1 year suspension then probation | $2,500.00 fine and/or permanent revocation |

(o) Failing to respond within thirty (30) days to a written communication from the Department or the Board concerning any investigation by the Department or the Board, or failing to make available any relevant records with respect to the investigation about the licensee’s conduct or background.

(Section 491.009(1)(o), F.S.)

|  |  |  |
| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $1,000.00 fine and reprimand | $1,000.00 fine and probation |
| SECOND OFFENSE: | $1,000.00 fine and probation | $1,000.00 fine and 1 year suspension then probation |
| THIRD OFFENSE: | $1,000.00 fine and 1 year suspension then probation | Denial or $1,000.00 fine and permanent revocation |

(p) Being unable to practice the profession for which one is licensed under Chapter 491, F.S., with reasonable skill and competence as a result of any mental or physical condition or by reason of illness; drunkenness; or excessive use of drugs, narcotics, chemicals, or any other substance.

(Sections 456.072(1)(z) and 491.009(1)(p), F.S.)

|  |  |  |
| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $1,000.00 fine and probation | $1,000.00 fine and suspension until the licensee is able to appear before the Board and demonstrate that he or she is able to practice with reasonable skill and competence, then probation |
| SECOND OFFENSE: | Suspension until the licensee is able to appear before the Board and demonstrate that his or her ability to practice with reasonable skill and competence, then probation | $1,000.00 fine and permanent revocation |
| THIRD OFFENSE: | Suspension until the licensee is able to appear before the Board and demonstrate his or her ability to practice with reasonable skill and competence, then probation | $2,500.00 fine and/or permanent revocation |

(q) Violating provisions of Chapter 491 or 456, F.S., or any rule adopted pursuant thereto.

(Sections 456.072(1)(dd) and 491.009(1)(w), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $250.00 fine and reprimand | $1,000.00 fine and/or probation; 1 year suspension then probation; permanent revocation |
| SECOND OFFENSE: | $1,000.00 fine and 1 year probation | Denial or $5,000.00 fine and 2 year suspension then probation; permanent revocation |
| THIRD OFFENSE: | $1,000.00 fine and 1 year suspension then probation | Denial or $5,000.00 fine and/or permanent revocation |

(r) Performing any treatment or prescribing any therapy which, by the prevailing standards of the mental health professions in the community would constitute experimentation on human subjects, without first obtaining full, informed, and written consent.

(Section 491.009(1)(q), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $500.00 fine and reprimand | $1,000.00 fine and probation |
| SECOND OFFENSE: | $1,000.00 fine and probation | $1,000.00 fine and 1 year suspension then probation |
| THIRD OFFENSE: | $1,000.00 fine and 1 year suspension then probation | Denial or $1,000.00 fine and permanent revocation |

(s) Failing to meet the MINIMUM standards of performance in professional activities when measured against generally prevailing peer performance, including the undertaking of activities for which the licensee is not qualified by training or experience.

(Section 491.009(1)(r), F.S.)

|  |  |  |
| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $250.00 fine and reprimand | $5,000.00 fine and/or probation, 1 year suspension then probation; permanent revocation |
| SECOND OFFENSE: | $1,000.00 fine and probation | $1,000.00 fine and/or 1 year suspension followed by probation, permanent revocation |
| THIRD OFFENSE: | $1,000.00 fine and 1 year suspension then probation | Denial or $1,000.00 fine and permanent revocation |

(t) Delegating professional responsibilities to a person whom the licensee knows or has reason to know is not qualified by training or experience to perform such responsibilities.

(Sections 456.072(1)(p) and 491.009(1)(s), F.S.)

|  |  |  |
| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $1,000.00 fine and reprimand | $1,000.00 fine and probation |
| SECOND OFFENSE: | $1,000.00 fine and probation | $1,000.00 fine and permanent revocation |
| THIRD OFFENSE: | $1,000.00 fine and 1 year suspension then probation | $1,000.00 fine and permanent revocation |

(u) Violating a rule relating to the regulation of the profession or a lawful order of the Department or the Board previously entered in a disciplinary hearing.

(Section 491.009(1)(t), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $250.00 fine and reprimand | $1,000.00 fine and/or 6 month suspension then probation, permanent revocation |
| SECOND OFFENSE: | $1,000.00 fine and 1 year suspension then probation | Denial or $1,000.00 fine and permanent revocation |
| THIRD OFFENSE: | $2,000.00 fine and 2 year suspension then probation | $2,000.00 fine and/or permanent revocation |

(v) Failure of a licensee to maintain in confidence any communication made by a patient or client in the context of services, except by written permission or in the face of clear and immediate probability of bodily harm to the patient or client or to others.

(Section 491.009(1)(u), F.S.)

|  |  |  |
| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $1,000.00 fine and reprimand | $1,000.00 fine and probation |
| SECOND OFFENSE: | $1,000.00 fine and probation | $1,000.00 fine and permanent revocation |
| THIRD OFFENSE: | $1,000.00 fine and 1 year suspension then probation | $1,000.00 fine and/or permanent revocation |

(w) Making public statements which are derived from test data, client contacts, or behavioral research and which identify or damage research subjects or clients.

(Section 491.009(1)(v), F.S.)

|  |  |  |
| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $1,000.00 fine and reprimand | $1,000.00 fine and probation |
| SECOND OFFENSE: | $1,000.00 fine and probation | $1,000.00 fine and permanent revocation |
| THIRD OFFENSE: | $2,000.00 fine 1 year suspension then probation | $2,000.00 fine and/or permanent revocation |

(x) Having been found liable in a civil proceeding for knowingly filing a false report or complaint with the department or the agency against another licensee.

(Section 456.072(1)(g), F.S.)

|  |  |  |
| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $500.00 fine and reprimand | $1,000.00 fine and probation |
| SECOND OFFENSE: | $1,000.00 fine and probation | $1,000.00 fine and 1 year suspension followed by probation |
| THIRD OFFENSE: | $1,000.00 fine and 1 year suspension then probation | Denial or $1,000.00 fine and permanent revocation |

(y) Except as provided in Section 465.016, F.S., failing to report to the department any person whom the licensee knows is in violation of Chapter 456, Part II, Chapter 491, F.S., or the rules of the Department or the Board.

(Section 456.072(1)(i), F.S.)

|  |  |  |
| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $250.00 fine | $1,000.00 fine and reprimand |
| SECOND OFFENSE: | $500.00 fine | $1,000.00 fine and probation |
| THIRD OFFENSE: | $1,000.00 fine | $1,000.00 fine and 1 year suspension then probation |

(z) Exercising influence on the client for the purpose of financial gain of the licensee or a third party.

(Section 456.072(1)(n), F.S.)

|  |  |  |
| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $1,000.00 fine and probation | Denial or $1,000.00 fine and revocation |
| SECOND OFFENSE: | $1,000.00 fine and 1 year suspension then by probation | Permanent denial or $1,000.00 fine and permanent revocation |
| THIRD OFFENSE: | $2,000.00 fine, 2 year suspension then probation | $2,000.00 fine and/or permanent revocation |

(aa) Improperly interfering with an investigation or inspection authorized by statute, or with any disciplinary proceeding.

(Section 456.072(1)(r), F.S.)

|  |  |  |
| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $1,000.00 fine and reprimand | $1,000.00 fine and 6 month suspension then probation |
| SECOND OFFENSE: | $1,000.00 fine and 1 year suspension then probation | Denial or $1,000 fine and permanent revocation |
| THIRD OFFENSE: | $2,000.00 fine, 2 year suspension then probation | $2,000.00 fine and/or permanent revocation |

(bb) Intentionally violating any rule adopted by the Board or the department, as appropriate.

(Section 456.072(1)(b), F.S.)

|  |  |  |
| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $1,000.00 fine and reprimand | $1,000.00 fine and/or 6 month suspension then probation, permanent revocation |
| SECOND OFFENSE: | $1,000.00 fine and 1 year suspension then probation | Denial or $1,000.00 fine and permanent revocation |
| THIRD OFFENSE: | $2,000.00 fine, 2 year suspension then probation | $2,000.00 fine and/or permanent revocation |

(cc) Practicing or offering to practice beyond the scope permitted by law or accepting and performing professional responsibilities the licensee knows, or has reason to know, the licensee is not competent to perform.

(Section 456.072(1)(o), F.S.)

|  |  |  |
| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $1,000.00 fine and reprimand | $1,000.00 fine and probation |
| SECOND OFFENSE: | $1,000.00 fine and probation | $1,000.00 fine and revocation |
| THIRD OFFENSE: | $1,000.00 fine and 1 year suspension then probation | $1,000.00 fine and permanent revocation |

(dd) Violating any provision of this part, the applicable professional practice act, a rule of the department or the board, or a lawful order of the department or the board, or failing to comply with a lawfully issued subpoena of the department.

(Sections 456.072(1)(q) and 491.009(1)(w), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $250.00 fine and reprimand | $1,000.00 fine and/or probation; 1 year suspension then probation; permanent revocation |
| SECOND OFFENSE: | $1,000.00 fine and probation | $1,000.00 fine and/or 1 year suspension then probation, or permanent revocation |
| THIRD OFFENSE: | $1,000.00 fine and 1 year suspension then probation | $1,000.00 fine and permanent revocation |

(ee) Failing to comply with the requirements for profiling and credentialing, including, but not limited to, failing to provide initial information, failing to timely provide updated information, or making misleading, untrue, deceptive, or fraudulent representations on a profile, credentialing, or initial or renewal licensure application.

(Section 456.072(1)(w), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | Denial, $500.00 fine and reprimand | $1,000.00 fine and/or reprimand; 1 year suspension then probation; permanent revocation |
| SECOND OFFENSE: | Denial, $1,000.00 fine and probation | $1,000.00 fine and/or 3 month suspension then probation, permanent revocation |
| THIRD OFFENSE: | Denial, $1,000.00 fine and 1 year suspension then probation | Denial or $1,000.00 fine and permanent revocation |
| FRAUD First Offense | Denial, $10,000.00 fine and reprimand | $10,000.00 fine and/or reprimand; 1 year suspension then probation; permanent revocation |
| FRAUD Second Offense | Denial, $10,000.00 fine and probation | $10,000.00 fine and/or 3 month suspension then probation; permanent revocation |
| FRAUD Third Offense | Denial, $10,000.00 fine and 1 year suspension then probation | $10,000.00 fine and/or permanent revocation |

(ff) Using information about people involved in motor vehicle accidents which has been derived from accident reports made by law enforcement officers for the solicitation of the people involved in the accidents.

(Section 456.072(1)(y), F.S.)

|  |  |  |
| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $500.00 fine and reprimand | $1,000.00 fine and 6 month suspension then probation |
| SECOND OFFENSE: | $1,000.00 and reprimand | $1,000.00 fine and 1 year suspension then probation |
| THIRD OFFENSE: | $1,000.00 fine 1 year suspension then probation | $1,000.00 fine and permanent revocation |

(gg) Failing to report to the Board within 30 days after the licensee has been convicted or found guilty of, or entered a plea of nolo contendere to, regardless of adjudication, a crime in any jurisdiction.

(Section 456.072(1)(x), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $500.00 fine | $1,000.00 fine and reprimand |
| SECOND OFFENSE: | $1,000.00 fine and probation | $1,000.00 fine and 6 month suspension then probation |
| THIRD OFFENSE: | $1,000.00 fine and 1 year suspension then probation | Denial or $1,000.00 fine and permanent revocation |

(hh) Testing positive for any drug on any confirmed preemployment or employer-ordered drug screening.

(Section 456.072(1)(aa), F.S.)

|  |  |  |
| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $500.00 fine and probation | $750.00 fine and substance abuse evaluation, suspension then probation |
| SECOND OFFENSE: | $750.00 fine suspension then probation | $1,000.00 fine and/or permanent revocation |
| THIRD OFFENSE: | $1,000.00 fine, 2 year suspension then probation | $1,000.00 fine and/or permanent revocation |

(ii) Failing to inform the department of any change of address of either the place of practice or current mailing address of any applicant or licensee.

(Section 456.035, F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $250.00 fine | $500.00 fine and reprimand |
| SECOND OFFENSE: | $1,000.00 fine and reprimand | $1,000.00 fine and 6 month suspension then probation |
| THIRD OFFENSE: | $1,000.00 fine and 1 year suspension then probation | $1,000.00 fine and permanent revocation |

(jj) Being terminated from a treatment program for impaired practitioners, which is overseen by an impaired practitioner consultant as described in Section 456.076, F.S., for failure to comply, without good cause, with the terms of the monitoring or treatment contract entered into by the licensee, or for not successfully completing any drug treatment or alcohol treatment program.

(Section 456.072(1)(hh), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | Suspension until compliant with contract | $10,000.00 fine and/or permanent revocation |

(kk) Being convicted of, or entering a plea of guilty or nolo contendre to, any misdemeanor or felony, regardless of adjudication, under 18 U.S.C. s. 669, ss. 285-287, s. 371, s. 1001, s. 1035, s. 1341, s. 1343, s. 1347, s. 1349, or s. 1518, or 42 U.S.C. ss. 1320a-7b, relating to the Medicaid program.

(Section 456.072(1)(ii), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $10,000.00 fine, permanent revocation | $10,000.00 fine and permanent revocation |

(ll) Failing to remit the sum owed to the state for any overpayment from the Medicaid program pursuant to a final order, judgment, or stipulation or settlement.

(Section 456.072(1)(jj), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $500.00 fine and Letter of concern | $5,000.00 fine and/or suspension |
| SECOND OFFENSE: | $10,000.00 fine and reprimand | $10,000.00 fine and/or permanent revocation |
| THIRD OFFENSE: | Permanent Revocation |  |

(mm) Being terminated from the state Medicaid program pursuant to Section 409.913, F.S., any other state Medicaid program, or the federal Medicare program, unless eligibility to practicipate in the program from which the practitioner was terminated has been restored.

(Section 456.072(1)(kk), F.S.)

|  |  |  |
| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $1,000.00 fine, Letter of concern | $5,000.00 fine and/or suspension |
| SECOND OFFENSE: | $10,000.00 fine, reprimand | $10,000.00 fine and/or permanent revocation |
| THIRD OFFENSE: | Permanent Revocation |  |

(nn) Being convicted of, or entering a plea of guilty or nolo contendere to, any misdemeanor or felony, regardless of adjudication, a crime in any jurisdiction which relates to health care fraud.

(Section 456.072(1)(ll), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $10,000.00 fine and permanent revocation | $10,000.00 fine and permanent revocation |

(oo) Willfully failing to comply with Section 627.64194 or 641.513, F.S., with such frequency as to indicate a general business practice – regarding emergency services and insurance billing.

(Section 456.072(1)(oo), F.S.)

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| --- | --- | --- |
|  | MINIMUM | MAXIMUM |
| FIRST OFFENSE: | $250.00 fine, reprimand | $500.00 fine, reprimand |
| SECOND OFFENSE: | $500.00 fine and probation | $500.00 fine, suspension then probation |
| THIRD OFFENSE: | $750.00 fine, suspension then probation | $1,000.00 fine and/or permanent revocation |

(2) In instances when a registrant or applicant is found guilty of any of the above offenses involving fraud or making a false or fraudulent representation, the Board shall impose a fine of $10,000.00 per count or offense.

(3) Aggravating and Mitigating Circumstances. Based upon consideration of aggravating and mitigating factors present in an individual case, the Board may deviate from the penalties recommended above. The Board shall consider as aggravating or mitigating factors the following:

(a) The danger to the public;

(b) The length of time since the date of the violation(s);

(c) Prior discipline imposed upon the licensee;

(d) The length of time the licensee has practiced;

(e) The actual damage, physical or otherwise, to the patient;

(f) The deterrent effect of the penalty imposed;

(g) The effect of the penalty upon the licensee’s livelihood;

(h) Any efforts for rehabilitation;

(i) The actual knowledge of the licensee pertaining to the violation;

(j) Attempts by the licensee to correct or stop violations or failure of the licensee to correct or stop violations;

(k) Related violations against the licensee in another state, including findings of guilt or innocence, penalties imposed and penalties served;

(l) Any other mitigating or aggravating circumstances.

(4) The provisions of subsections (1) through (2), above, shall not be constructed so as to prohibit civil action or criminal prosecution as provided in Section 456.072 or 491.012, F.S., and the provisions of subsections (1) and (2), above, shall not be construed so as to limit the ability of the Board to enter into binding stipulations with accused parties as per Section 120.57(4), F.S.

Rulemaking Authority 456.079, 491.004(5) FS. Law Implemented 456.079, 491.009 FS. History–New 3-5-89, Amended 1-3-91, 6-1-92, Formerly 21CC-5.001, Amended 1-9-94, Formerly 61F4-5.001, Amended 12-22-94, Formerly 59P-5.001, Amended 12-11-97, 10-1-00, 2-5-01, 10-15-02, 3-27-05, 1-16-06, 4-6-10, 5-22-12, 12-7-17.

**64B4-5.005 Minor Violations, Notice of Noncompliance.**

(1) In accordance with Section 456.073(3), F.S., when a complaint is received, the Department may provide a licensee with a notice of noncompliance for an initial offense of a minor violation. Failure of a licensee to take action in correcting the violation within the 15 days after notice shall result in the institution of regular disciplinary proceedings.

(2) “Minor violations” as used in Section 456.073(3), F.S., are defined as follows for clinical social workers, marriage and family therapists, and mental health counselors:

(a) Failure to make available to a patient or client upon written request, reports, copies of test results, or documents in the possession or under the control of the licensee or certificateholder which have been prepared for and paid for by the patient or client.

(b) Failure to obtain an education course on human immunodeficiency virus and acquired immune deficiency syndrome within six (6) months of licensure as required by Section 491.0065, F.S.

(c) Practicing on an inactive license for three (3) months or less as prohibited by Section 456.036(1), F.S.

(d) Practicing on a delinquent license for three (3) months or less as prohibited by Section 456.036(1), F.S.

(e) Failure to conspicuously display the valid license as required by Section 491.0149(1)(a), F.S.

(f) Failure of a licensed clinical social worker to include the words “licensed clinical social worker” or the letters “LCSW” on all promotional materials, including cards, brochures, stationery, advertisements, and signs, naming the licensee as required by Section 491.0149(1)(b)1., F.S.

(g) Failure of a licensed marriage and family therapist to include the words “licensed marriage and family therapist” or the letters “LMFT” on all promotional materials, including cards, brochures, stationery, advertisements, and signs, naming the licensee as required by Section 491.0149(1)(b)2., F.S.

(h) Failure of a licensed mental health counselor to include the words “licensed mental health counselor” or the letters “LMHC” on all promotional materials, including cards, brochures, stationery, advertisements, and signs, naming the licensee as required by Section 491.0149(1)(b)3., F.S.

(i) Failure of a registered intern to use the words “registered intern” on all promotional materials, including cards, brochures, stationery, advertisements, and signs, naming the licensee as required by Section 491.0149(2)(b), F.S.

(j) Failure of a provisional licensee to use the words “provisional licensee” on all promotional materials, including cards, brochures, stationery, advertisements, and signs, naming the licensee as required by Section 491.0149(3)(b), F.S.

(k) Failure to include the statement required by Section 456.062, F.S., in any advertisement for a free, discounted fee, or reduced fee service or treatment.

(l) Practicing on a retired license for three (3) months or less as prohibited by Section 456.036(1), F.S.

(m) Failure to identify through written notice or orally to a patient the type of licensure under which the practitioner is practicing as required by Section 456.072(1)(t), F.S.

(3) In accordance with Section 120.695, F.S., the Department shall issue a notice of noncompliance as a first enforcement action against a licensee for a minor violation of a rule. Pursuant to Section 120.695(2)(b), F.S., the Board designates a violation of subsection 64B4-6.003(2), F.A.C., as a minor violation of a rule for which a notice of noncompliance is issued.

Rulemaking Authority 120.695, 456.073(3), 491.004(5) FS. Law Implemented 120.695, 456.073(3), 491.009(1)(n), 491.0149 FS. History–New 1-4-90, Amended 1-7-92, Formerly 21CC-5.005, 61F4-5.005, Amended 1-7-96, Formerly 59P-5.005, Amended 12-11-97, 2-9-99, 1-16-06, 11-7-16, 8-10-17.

**64B4-5.006 Probable Cause Panel.**

(1) The determination as to whether probable cause exists to believe that a violation of the provisions of Chapter 456, Part II, or 491, F.S., or of the rules promulgated thereunder has occurred, shall be made by a majority vote of a probable cause panel; except as provided in subsection (2), below.

(2) In the event panel members disagree as to a finding of probable cause, the Secretary of the Department of Health shall determine whether probable cause exists to believe that a violation has occurred.

(3) The probable cause panel shall consist of at least two professional members and one consumer member if one is available and willing to serve. Any of the appointments may be a past Board member, but at least one must be a current member of the Board.

(4) The probable cause panel members shall be assigned by the Chairman of the Board and each panel shall meet as necessary.

Rulemaking Authority 456.073, 491.004(5) FS. Law Implemented 456.073 FS. History–New 1-3-91, Amended 2-24-93, Formerly 21CC-5.006, 61F4-5.006, 59P-5.006, Amended 8-9-00, 8-13-08.

**64B4-5.007 Citations.**

(1) Definitions. As used in this rule:

(a) “Citation” means an instrument which meets the requirements set forth in Section 456.077, F.S., and which is served upon a subject for the purpose of assessing a penalty in an amount established by this rule;

(b) “Subject” means the licensee, registered intern, provisional licensee, applicant, person, partnership, corporation, or other entity alleged to have committed a violation designated in this rule.

(2) In lieu of the disciplinary procedures contained in Section 456.073, F.S., the Department is hereby authorized to dispose of any violation designated herein by issuing a citation to the subject within six months after the filing of the complaint which is the basis for the citation.

(3) The Board hereby designates as offenses for citations and the appropriate penalties the following:

(a) Failure to make available to a patient or client upon written request, reports, copies of test results, or documents in the possession or under the control of the licensee, registered intern, provisional licensee, or certificateholder which have been prepared for and paid for by the patient or client – $500.

(b) Failure of any subject to inform the Department within 30 days of any change of address of either a place of practice or current mailing address – $500.

Rulemaking Authority 456.077, 491.004(5) FS. Law Implemented 456.077 FS. History–New 1-7-92, Formerly 21CC-5.007, 61F4-5.007, 59P-5.007, Amended 12-11-97, 2-9-99, 10-18-99, 3-27-05, 8-10-17.

**64B4-5.008 Terms of Probation.**

Any licensee determined to have violated the provisions of Chapter 491, F.S., may be ordered to serve probationary terms including any or all of the following:

(1) Probationer’s license is suspended for a period of time set by the Board, said suspension to be stayed so long as the licensee complies with the terms of probation set forth below.

(2) The licensee is hereby placed on probation for a period of time set by the Board. Any deviation from the requirements of the probation without prior written consent of the Board shall constitute a violation of this probation. Upon a finding of probable cause that a violation of this probation has occurred, the licensee’s license to practice shall be subject to immediate and automatic suspension upon the recommendation of the Probable Cause Panel pending the Licensee’s appearance before the next Board meeting. The licensee will be given notice of the hearing and an opportunity to defend. The probationary period shall automatically terminate at the end of a prescribed time, but only if all terms and conditions have been met. Otherwise, the probation shall be terminated only by order of the Board upon proper petition of the licensee, supported by evidence of compliance with this Final Order.

(3) The licensee’s probation shall be subject to the following terms and conditions:

(a) Probationer shall comply with all state statutes and rules pertaining to the practice of Clinical Social Work, Marriage and Family Therapy, and Mental Health Counseling in Chapters 456, and 491, F.S., and Rule Chapter 64B4, F.A.C.

(b) Probationer shall appear before the Board at the first meeting after said probation commences, at the last meeting of the Board preceding termination of probation, and at such other times as requested by the Board.

(c) In the event Probationer leaves the State of Florida for a period of thirty days or more, or otherwise does not engage in practice in Florida, Probationer’s probation shall be tolled and shall remain in a tolled status until Probationer returns to active practice in the State of Florida, at which time the probationary status shall resume. Probationer must keep current residence and business addresses on file with the Board. Probationer shall notify the Board within ten (10) days of any changes of said addresses.

(d) Probationer shall practice only under the supervision of a psychotherapist fully licensed under Chapter 491, F.S., to be approved by the Board or its designee. Probationer shall have the supervising psychotherapist with the Probationer at the Probationer’s first probation appearance before the Board. Prior to approval of the supervising psychotherapist by the Board or its designee, the Probationer shall provide to the supervising psychotherapist a copy of the administrative complaint filed in this case. A failure of the Probationer or the supervising psychotherapist to appear at the scheduled Board meeting shall constitute a violation of the Board’s Final Order. Prior to the approval of the supervising psychotherapist by the Board or its designee, Probationer shall submit to the Board or its designee a current curriculum vitae and description of the current practice from the proposed supervising psychotherapist. Said materials shall be received in the Board office no later than fourteen (14) days before Probationer’s first scheduled probation appearance. Probationer shall be responsible for ensuring that the supervising psychotherapist submits the required reports. The responsibilities of the supervising psychotherapist shall include:

1. Submit quarterly reports, which shall include:

a. Brief statement of why Probationer is on probation.

b. Description of Probationer’s practice.

c. Brief statement of Probationer’s compliance with terms of probation.

d. Brief statement of Probationer’s relationship with supervising psychotherapist.

e. Detail any problems which may have arisen with Probationer.

2. Review a percentage of Probationer’s patient records selected on a random basis at least once every two (2) weeks.

3. Review all patient records treated for/with certain conditions.

4. Consult with Probationer on all cases involving specified conditions.

5. Review Probationer’s use of pharmaceutical agents.

6. Report to the Board any violations by the Probationer of Chapters 456, and 491, F.S., and the rules promulgated pursuant thereto.

(e) Probationer shall submit quarterly reports to the Board. The reports shall include:

1. Brief statement of why Probationer is on probation.

2. Practice location.

3. Description of current practice stating type and composition.

4. Brief statement of compliance with probationary terms.

5. Description of relationship with the supervising psychotherapist.

6. Description of any problems.

7. Notarized copies of a number of patient records of patients examined or treated by the Probationer within the previous sixty (60) days with all identification of patient suitably obliterated.

(f) Probationer shall obtain a number of continuing education credits in specific areas, within a number of months/year(s), in addition to those hours required for renewal of licensure.

(g) Probationer shall see a psychiatrist, psychologist or psychotherapist approved by the Board or its designee at least the specified number of visits for evaluations and treatment.

(h) Probationer shall not consume, inject or ingest any controlled substances unless prescribed or administered by a practitioner authorized by law to prescribe or dispense controlled substances. However, the drugs shall only be consumed, injected or ingested for a medically justifiable purpose.

(i) Probationer shall not consume alcohol.

(j) Probationer shall attend AA or NA meetings on a frequency of at least one meeting per week.

(k) Probationer shall submit to random blood and/or urine testing for the purpose of ascertaining Probationer’s compliance with probation.

(l) Probationer shall pay all reasonable costs of obtaining random urine and/or blood screens.

(m) During a specified number of months, the Probationer shall perform a number of hours of community service at a specified location or organization. Community service shall consist of psychotherapy without fee or cost to the patient for the good of the people of the State of Florida. Affidavits detailing the community service performed shall be filed with the Board.

(4) Probationer shall pay an administrative fine in the amount set by the Board, said fine to be paid to the Board within a certain number of days of the effective date of the Final Order.

Rulemaking Authority 456.079, 491.004(5) FS. Law Implemented 456.079, 491.009 FS. History–New 6-1-92, Formerly 21CC-5.008, 61F4-5.008, 59P-5.008.

**64B4-5.009 Supervision by Disciplined Practitioner.**

Any licensee who is disciplined by a final order of a Board shall not serve as a “qualified supervisor” until the licensee has complied with all of the obligations imposed by the final order. Within 15 days after the filing of an administrative complaint against a “qualified supervisor” license, the “qualified supervisor” shall provide written notice of the administrative complaint to all his or her supervisees. Within one (1) day of the filing of a final order against a “qualified supervisor’s” license, the “qualified supervisor” shall provide written notice of the final order and shall terminate all supervisory relationships.

Rulemaking Authority 456.079, 491.004(5) FS. Law Implemented 456.079, 491.009 FS. History–New 1-7-92, Formerly 21CC-5.009, 61F4-5.009, 59P-5.009, Amended 10-23-06, 9-1-16.

**64B4-5.010 Mediation Offenses.**

The Board designates a violation of its practice act as being appropriate for mediation as provided in Section 456.079, F.S., as it is economic in nature or can be remedied by the licensee, the failure to timely pay any assessed administrative fines or costs.

Rulemaking Authority 456.079, 491.004(5) FS. Law Implemented 456.079 FS. History–New 11-13-94, Formerly 59P-5.010.

**CHAPTER 64B4-6**

**LICENSE RENEWAL, CONTINUING EDUCATION CREDIT**

**64B4-6.001 Renewal of Active License.**

(1) The Department of Health shall renew an active license upon receipt of the biennial license fee, as established by Rule 64B4-4.005, F.A.C. By remitting the correct fee to the Department, the licensee is affirming that all requirements for license renewal have been met. Each biennial renewal period shall begin on the date established by the Department.

(2) A licensee shall not be required to complete continuing education for the first renewal of licensure. For each subsequent renewal:

(a) A licensee must complete 30 hours of approved continuing education credit including: two hours on the prevention of medical errors; three hours relating to professional ethics and boundary issues during the two-year period ending on the last day of the biennial renewal period.

(b) A maximum of six (6) of the required thirty (30) hours of continuing education may be accrued for credit during one biennium by attending programs designed for the purpose of enhancing the licensee’s administrative, office management, or other non-clinical skills.

(3) Within six (6) months of initial licensure and every third renewal thereafter, a licensee must complete a 2 hour continuing education course on domestic violence.

(4) Every third biennum after initial licensure, a licensee must complete 3 hour laws and rules continuing education units.

(5) Every third biennium, a qualified supervisor shall obtain 4 hours of supervisory training continuing education that meets the requirements in subsection 64B4-6.0025(4), F.A.C.

(6) Continuing education hours earned by a licensee to satisfy any disciplinary action shall be in addition to those required for renewal for each biennium.

Rulemaking Authority 491.004(5), 491.007(1), (2) FS. Law Implemented 456.031(1)(a), 491.007(1), (2) FS. History–New 4-4-89, Amended 12-4-90, Formerly 21CC-6.001, Amended 1-9-94, Formerly 61F4-6.001, Amended 1-7-96, 12-29-96, Formerly 59P-6.001, Amended 2-9-99, 2-5-01, 2-7-05, 7-16-06, 12-17-06, 6-13-07, 9-13-07, 12-3-09, 2-17-13, 11-7-16.

**64B4-6.0011 Inactive Status.**

(1) Any licensee may elect at the time of license renewal to place the license into inactive status by filing with the board a complete application for inactive status and paying the inactive status fee of $50. For the purpose of this section, a complete application shall be a renewal form provided by the Department of Health on which the licensee affirmatively elects inactive status.

(2) An inactive status licensee whose license has been in inactive status for less than two consecutive biennial licensure cycles may change to active status at any time provided the licensee.

(a) Submits an application of form entitled Application for license (form DPR/MQA CSW, MFT and MHC/007/REV. 11/91); and,

(b) Meets the continuing education requirements of Rules 64B4-6.001 and 64B4-6.002, F.A.C., for each biennium the licensee was in inactive status and pays the reactivation fee of $50, the current biennial renewal fee at the time of reactivation and, if applicable, the change of status fee as defined by Rule 64B4-4.006, F.A.C.

(3) An inactive status licensee whose license has been in inactive status for more than two consecutive biennial licensure cycles may change to active status at any time provided the licensee.

(a) Submits an application on form entitled Application for license (form DPR/MQA CSW, MFT and MHC/007/REV. 11/91); and,

(b) Meets the continuing education requirements of Rules 64B4-6.001 and 64B4-6.002, F.A.C., for each biennium the licensee was in inactive status and pays the reactivation fee of $50, the current biennial renewal fee at the time of reactivation and, if applicable, the change of status fee as defined by Rule 64B4-4.006, F.A.C.

(4) Any inactive status licensee who elects active status is not eligible to elect to return to inactive status until the next licensure renewal period.

Rulemaking Authority 456.036, 491.004(5) FS. Law Implemented 456.036, 491.007, 491.008 FS. History–New 10-16-90, Formerly 21CC-6.0011, 61F4-6.0011, Amended 12-22-94, Formerly 59P-6.0011.

**64B4-6.0012 Delinquent Status License.**

(1) The failure of any licensee to elect active or inactive status before the license expires shall cause the license to become delinquent.

(2) The delinquent status licensee must affirmatively apply for active or inactive status during the biennium in which the license becomes delinquent. The failure by the delinquent status licensee to cause the license to become active or inactive before the expiration of the biennium in which the license became delinquent shall render the license null and void without further action by the board or the Department of Health.

(3) The delinquent status licensee who applies for active or inactive license status shall:

(a) File with the board the complete application for either active status or inactive status as defined in Rule 64B4-6.0011, F.A.C.;

(b) Pay to the board either the active status or inactive status license fee, the delinquent status license fee and, if applicable, the change of status fee of Rule 64B4-4.006, F.A.C.; and,

(c) Demonstrate compliance with the continuing education requirements of Rules 64B4-6.001 and 64B4-6.003, F.A.C.

Rulemaking Authority 456.036, 491.004(5) FS. Law Implemented 456.036, 491.007, 491.008 FS. History–New 12-22-94, Formerly 59P-6.0012.

**64B4-6.0013 Exemption of Spouse of Member of Armed Forces from License Renewal Requirements.**

A licensee who is the spouse of a member of the Armed Forces of the United States and was caused to be absent from the State of Florida because of the spouse’s duties with the armed forces and who at the time the absence became necessary was in good standing with the Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling and entitled to practice as an Clinical Social Worker, Marriage and Family Therapist or Mental Health Counselor in Florida shall be exempt from all licensure renewal provisions. The licensee must document the absence and the spouse’s military status to the Board.

Rulemaking Authority 456.024(2), 491.004 FS. Law Implemented 456.024 FS. History–New 10-18-99.

**64B4-6.0014 Retired Status License.**

(1) Any licensee may elect at the time of licensure renewal to place the license on retired status by paying the retired status fee of $50.00.

(2) A retired status licensee may change to active status provided:

(a) If the license has been in retired status for less than 10 years, the licensee must meet the continuing education requirements of Rules 64B4-6.001 and 64B4-6.002, F.A.C., for each biennium the licensee was in retired status and pay all past renewal fees;

(b) If the license has been in retired status for more than 10 years, the licensee must retake and pass the applicable examination for the licensee’s profession set forth in Rule 64B4-3.003, F.A.C., and retake an approved laws and rules course as set forth in Rule 64B4-6.0045, F.A.C.

Rulemaking Authority 456.036(10), 491.004(5) FS. Law Implemented 456.036(10) FS. History–New 2-9-06.

**64B4-6.002 Approved Courses for Continuing Education.**

(1) For purposes of renewing or reactivating a license, credit is approved for the following:

(a) Completion of graduate level courses provided by an institution of higher education fully accredited by a regional accrediting body recognized by the Commission on Recognition of Postsecondary Accreditation or its successor or an institution which is publicly recognized as a member in good standing with the Association of Universities and Colleges of Canada, provided such courses are offered by a graduate program in psychology, counselor education, rehabilitation counseling, guidance or personnel counseling, marriage and family therapy, agency counseling, community mental health counseling or a school or program offering doctoral training in social work.

(b) Completion of graduate level courses in theory of human behavior and practice methods as courses in clinically-oriented services provided by programs of social work accredited by the Council on Social Work, Education Commission on Accreditation by the Canadian Association of Schools of Social Work.

(c) Completion of graduate level courses provided by marriage and family therapy training institutions accredited by the Commission on Accreditation of Marriage and Family Therapy Education (COAMFTE).

(d) Programs offered by providers approved by the Board under Rule 64B4-6.004, F.A.C.

1. Credit for hypnosis training will be given only for a program that clearly advertised it met the requirements of Rule 64B4-7.002, F.A.C., and was offered by an approved provider for hypnosis training as determined by Rule 64B4-6.006, F.A.C.

2. Credit for sex therapy training will be given only for a program that clearly advertised it met the requirements of Rule 64B4-7.004, F.A.C., and was offered by an approved provider for sex therapy training as determined by Rule 64B4-6.005, F.A.C.

(e) Continuing education programs offered and approved by the following entities as long as such entities impose requirements similar to or more stringent than those imposed by the Board in subparagraphs 64B4-6.004(2)(a)1.-5., F.A.C.:

1. National Board of Certified Counselors (NBCC),

2. American Association of Sex Educators Counselors and Therapists (AASECT),

3. American Society of Clinical Hypnosis (ASCH),

4. National Association of Social Work (NASW),

5. American Psychological Association (APA),

6. Clinical Social Work Federation (CSWF),

7. Association of Social Work Boards (ASWB),

8. American Board of Professional Psychology (ABPP),

9. American Psychiatric Association,

10. International Association of Marriage and Family Therapy Counselors (AMFC),

11. American Association of State Counseling Boards (AASCB),

12. American Counseling Association (ACA),

13. American Mental Health Counseling Association (AMHCA),

14. American Association for Marriage and Family Therapy (AAMFT); and,

15. Association of Marital and Family Therapy Regulatory Boards (AMFTRB).

(2) Presenters/moderators of approved continuing education activities shall receive credit on a one-time basis for programs where they are actually in attendance for the complete program, provided they receive a certificate of attendance in compliance with this rule. A maximum of 10 hours of credit per biennium shall be received for presenting/moderating approved continuing education activities.

(3) Instructors of graduate level courses in the curricula of an institution as described in Section 491.005, F.S., shall receive continuing education credit on a one time basis at the rate of 5 hours of continuing education credit per semester hour of coursework taught.

(4) Three (3) hours of continuing education credit in risk management may be obtained once per biennium by attending one day of a Board meeting at which disciplinary hearings are conducted by the Board of Clinical Social Work, Marriage and Family Therapy, and Mental Health Counseling, in compliance with the following:

(a) The licensee must sign in with the Executive Director of the Board before the meeting day begins.

(b) The licensee must remain in continuous attendance.

(c) The licensee must sign out with the Executive Director of the Board at the end of the meeting day or at such other earlier time as affirmatively authorized by the Board. The licensee may only receive CE credit for attending the Board meeting for that purpose solely. The licensee may not receive credit for that purpose if they are required or are attending the Board meeting for any other purpose.

(5) For the purpose of this rule chapter, distance learning continuing education activities are home study, correspondence, computer interactive, tele-conferences, video cassette, and audio cassette courses. A distance learning continuing education activity offered by a provider approved under this rule chapter must meet the standards for approved courses outlined in this rule chapter and, furthermore, must include a testing mechanism on which a passing score must be attained by the licensee prior to the issuing of credit.

(6) Continuing education credit will not be received for the following:

(a) The licensee’s regular activities;

(b) Membership, office in, or participation on boards or committees, or at business meetings of professional organizations;

(c) Attendance at professional conventions or meetings, unless session meets the requirements of this rule;

(d) Independent, unstructured or self-structured learning;

(e) Personal psychotherapy or growth experience;

(f) Authorship or editing of books or articles;

(g) Obtaining supervision or consultation unless provided by a structured program meeting the requirements of this rule.

Rulemaking Authority 456.013(6), 491.004(5), 491.0085 FS. Law Implemented 456.013(6), 491.007(2), 491.0085(1) FS. History–New 4-4-89, Amended 10-16-90, 6-19-91, 9-2-91, 8-24-92, Formerly 21CC-6.002, Amended 1-9-94, Formerly 61F4-6.002, Amended 10-4-94, 12-22-94, 1-7-96, 12-29-96, Formerly 59P-6.002, Amended 12-11-97, 2-9-99, 8-9-00, 6-30-02, 7-8-03, 2-8-05, 5-14-06, 12-17-06, 8-13-08, 9-30-15.

**64B4-6.0025 Approved Continuing Education Course for Supervisory Training.**

The continuing education course required to meet the qualifications for a qualified supervisor pursuant to Section 491.005, F.S., and subparagraph 64B4-11.007(3)(b)2., paragraph 64B4-21.007(3)(b), and subparagraph 64B4-31.007(2)(b)2., F.A.C., must be offered by a Board approved provider of continuing education and consist of the following:

(1) It must meet all the requirements of subparagraphs 64B4-6.004(2)(a)1.-5., F.A.C.;

(2) It must be 12 clock hours of in person didactic and interactional instruction; and,

(3) Must contain content that satisfies the following learning objectives. The participant will:

(a) Become familiar with the major models of supervision for clinical social work, marriage and family therapy or mental health counseling;

(b) Gain skills to develop a personal model of supervision, drawn from existing models of supervision and from preferred styles of therapy;

(c) Understand the co-evolving dynamics of therapist-client and supervisor-therapist-client relationships;

(d) Explore distinctive issues that arise in supervision;

(e) Address the contextual variables in practice such as culture, gender, ethnicity, power and economics;

(f) Become familiar with the ethical, legal and regulatory issues of supervision;

(g) Review the Florida laws and the board rules governing interns and supervision; and,

(h) Understand the role of evaluation in supervision.

(4) Every third biennium, a qualified supervisor shall obtain 4 hours of supervisory training continuing education.

(a) These hours shall count toward satisfaction of the continuing education hours required for license renewal for the biennium in which the hours are taken.

(b) The course will:

1. Review changes to Florida laws and rules relating to Interns and Supervisors,

2. Discuss various electronic delivery systems for supervision and methods for ensuring confidentiality,

3. Discuss ethical, legal and regulatory issues of supervision, including documentation of the supervisory sessions,

4. Review research of effective supervision models,

5. Review challenges in supervision,

6. Address how cultural issues can affect the supervisory relationship,

7. Discuss accountability of both the supervisor and the intern in the supervisory relationship,

8. Discuss the business aspects of supervision.

Rulemaking Authority 491.004(5), 491.007, 491.0085 FS. Law Implemented 491.007, 491.0085 FS. History–New 12-29-96, Formerly 59P-6.0025, Amended 12-11-97, 8-13-08, 5-8-16, 11-7-16.

**64B4-6.003 Documentation of Continuing Education Credits.**

(1) During the license renewal period of each biennium, an application for renewal will be mailed to each licensee at the last address provided to the Board. Failure to receive any notification during this period does not relieve the licensee of the responsibility of meeting the continuing education requirements.

(2) The licensee shall maintain and make available upon request the documentation required by this rule for a period of two years following the renewal period to which the continuing education credits were applied.

(3) Within 21 days of a request from the Board or Department, the licensee must provide evidence of completion of the continuing education requirements by submission of one or more of the following:

(a) Certificates which meet the requirements of subparagraph 64B4-6.004(2)(f)2., F.A.C., verifying the licensee’s attendance at programs given by providers who had, a valid provider number at the time of attendance, or

(b) Certificates verifying the licensee’s attendance at programs given by providers who meet the requirements of paragraph 64B4-6.002(1)(e), F.A.C., or

(c) A letter from the instructor of a graduate level course in compliance with paragraph 64B4-6.002(1)(a) or (b), F.A.C., verifying the course was completed and listing the number of clock hours of attendance completed by the licensee. Such letter must be written on official stationery of the institution and contain an original signature, or

(d) A transcript verifying credit hours earned in compliance with Rule 64B4-6.002, paragraph (1)(a) or (b), F.A.C.

Rulemaking Authority 491.004(5), 491.0085 FS. Law Implemented 491.007, 491.0085 FS. History–New 4-4-89, Formerly 21CC-6.003, 61F4-6.003, Amended 1-7-96, Formerly 59P-6.003, Amended 10-15-02, 1-17-16.

**64B4-6.004 Approval of Continuing Education Providers.**

(1) Continuing education status shall be approved prior to presenting continuing education programs. When a provider number is necessary, any continuing education event(s) sponsored or provided prior to the date a provider number is issued under this rule shall not be granted continuing education credit.

(2) Continuing education provider status shall be granted to continuing education providers who satisfy the following requirements:

(a) Provide the Board with one sample continuing education program, including a detailed agenda specifying content and time frames for instruction, a copy of any power point or similar presentation materials, and a copy of the course materials, which has been designed or approved by the current continuing education director and meets all of the following criteria:

1. Is a graduate level course, seminar, workshop, or institute which is relevant to, and focuses on clinical social work, marriage and family therapy or mental health counseling practice, theory, or method.

2. Has stated learning objectives and is of sufficient duration to present a topic in depth and detail to accomplish these objectives.

3. Is appropriate for the purposes of furthering and maintaining the clinical skills or knowledge of licensed clinical social workers, mental health counselors, or marriage and family therapists.

4. The sample program must identify the number of continuing education hours that will be earned. One continuing education hour is defined as a 60-minute clock hour in which there is no less than 50 minutes of uninterrupted instruction.

5. Is instructed/presented by a person who meets at least one of the following criteria:

a. Is a faculty member or former faculty member of a graduate program meeting the requirements of paragraph 64B4-6.002(1)(a) or (b), F.A.C.

b. Has received specialized graduate or post-graduate level training in the subject taught in the program.

c. Has extensive experience to include no less than 2 years of practical application or research involving the subject taught in the program.

(b) Provide the Board a sample program evaluation form and a sample of the documentation of completion which meets the requirements of subparagraph (2)(f)2. of this rule.

(c) Provide the Board a summary of the organization structure for the administration of continuing education programs that reflects the chain of command within the organization by name and title and the position of the continuing education director within the organization.

(d) Provide the Board with the name, address and daytime telephone number of a person designated by the organization to act as the continuing education director.

(e) Remit the appropriate continuing education provider application fee pursuant to Rule 64B4-4.009, F.A.C. Such fee shall be required for each license biennium during which the provider seeks Board approval.

(f) The current continuing education director must sign and abide by a written agreement to:

1. Ensure that each program to be presented or approved by the provider for continuing education credit for clinical social workers, marriage and family therapists, and mental health counselors satisfies the requirements of this rule.

2. Provide each participant who completes a program with documentation verifying that the program has been completed. The documentation shall contain the participant’s name, provider’s name and number, title of program, date of program, and number of hours of continuing education credits earned. In addition, for hypnosis training the documentation must state it meets the requirements of Rule 64B4-7.002, F.A.C., and, for sex therapy training, the documentation must state it meets the requirements of Rule 64B4-7.004, F.A.C.

3. Notify the Board of changes relative to the maintenance of standards as set forth in these rules.

4. Notify the Board within ten days of any change in continuing education director, mailing address, or telephone number.

5. Ensure that all promotional material for each program intended for clinical social workers, marriage and family therapists and mental health counselors contains in a conspicuous place the complete provider number assigned by the Board, the specific program objectives, and speaker/presenter’s credentials.

6. Comply with all audit requests within 21 days of receipt of such requests from the Board.

7. Ensure that the provider complies with the Americans with Disabilities Act of 1990, 42 USC §§12101-12213.

(g) Provide a Statement about what steps would be taken if a course participant submitted a grievance about the course.

(3) Providers shall maintain records of each course offered for three (3) years following each licensure biennium during which the course was offered. Course records shall include a course outline which reflects its educational objectives, the presenter’s name, the presenter’s curriculum vitae, the date and location of the course, participants’ evaluations of the course, the hours of continuing education credit awarded to each participant and a roster of participants by name and license number.

(4) The Board shall deny continuing education provider status to any applicant who submits false, misleading or deceptive information or documentation to the Board.

(5) The Board retains the right and authority to audit and/or monitor programs and review records and course materials given by any provider approved pursuant to this rule.

(6) The Board shall rescind the provider status or reject individual programs given by a provider if the provider disseminated any false or misleading information in connection with the continuing education programs, or if the provider failed to conform to and abide by the written agreement and rules of the Board or if the provider or its faculty member(s) are in violation of any of the provisions of Chapter 456 or 491, F.S.

Rulemaking Authority 491.004(5), 491.0085(1), (3), (4) FS. Law Implemented 491.0085 FS. History–New 1-9-94, Formerly 61F4-6.004, Amended 10-2-94, 12-29-96, Formerly 59P-6.004, Amended 12-11-97, 2-9-99, 6-30-02, 8-13-08, 12-11-14.

**64B4-6.0045 Approval of Laws and Rules Course Providers.**

(1) Laws and rules course provider status shall be obtained prior to presenting laws and rules courses. Laws and rules course provider status shall be granted to those who satisfy the following requirements:

(a) Provide the Board with a sample laws and rule course containing a detailed agenda specifying content and time frames for instruction and meets all of the following criteria:

1. Is a post-graduate course which addresses the requirements outlined in subsections 64B4-3.0035(1) and (2), F.A.C.

2. Has stated learning objectives and is of sufficient duration to present this topic in depth and detail to accomplish these objectives.

3. Is appropriate for the purposes of establishing and maintaining knowledge of the laws and rules regulating the practice of clinical social work, marriage and family therapy, and mental health counseling.

4. Is a minimum of eight (8) hours in duration.

5. Is presented by a person who meets at least one of the following criteria:

a. Has received specialized graduate or post‑graduate level training in the subject taught in the program.

b. Has extensive experience to include no less than 2 years of practical application or research involving the subject taught in the program.

(b) Provide the Board a sample of the proposed certificate of completion that is to be given to those persons who successfully complete the course. The certificate shall include the participant’s name, the provider’s name and number, title of the program, and date(s) of the program.

(c) Submit an application fee in the amount of two hundred dollars ($200.00). Such fee shall be required for each license biennium during which the provider seeks Board approval. Applicants who are already approved continuing education providers pursuant to Rule 64B4-6.004, F.A.C., shall not be required to submit an application fee or renewal fee as long as the applicant maintains its continuing education provider status. Continuing education providers shall be required to comply with all other provisions of this rule.

(d) Provide the Board with a sample evaluation form that is to completed by all course participants. The form shall include the participant’s name, the provider’s name and number, title of the program, and date(s) of the program.

(2) Once laws and rules course provider status is obtained, the provider shall:

(a) Ensure that all promotional material for any laws and rules course offered by the provider shall contain in a conspicuous place the complete provider number assigned by the Board, the specific program objectives, and presenter’s credentials;

(b) Comply with all audit requests within 21 days of receipt of such requests from the Board;

(c) maintain records of each course offered for three (3) years following each licensure biennium during which the course was offered. Course records shall include a course outline, the presenter’s name, the presenter’s curriculum vitae, the date and location of the course, the duration of the course and a roster of participants by name and license number.

(3) The Board retains the right and authority to audit and/or monitor courses and review records and course materials given by any provider approved pursuant to this rule. The Board shall rescind the provider status if a provider disseminates any false or misleading information in connection with the laws and rules course offered or if the provider fails to conform to and abide by the written agreement and rules of the Board.

Rulemaking Authority 491.004, 491.0085(4) FS. Law Implemented 491.0085 FS. History–New 10-18-99, Amended 8-24-00.

**64B4-6.0046 Course Content Requirement of Continuing Education Courses for Renewal Laws and Rules Course.**

(1) The renewal laws and rules course shall be three (3) hours in duration.

(2) The course shall provide information about and review changes to the laws and rules contained in Chapters 456 and 491, F.S., and Rule Title 64B4, F.A.C.

(3) The renewal laws and rules course must be presented by a Board approved continuing education provider or a Board approved laws and rules course provider.

(4) Prior to presenting the initial program, the provider must provide the Board with a sample laws and rules course containing a detailed agenda specifying content and time frames for instruction that meets all of the following criteria:

(a) Is a graduate level course.

(b) Has stated learning objectives and is of sufficient duration to present the topic in depth and detail to accomplish these objectives.

(c) Is appropriate for the purposes of establishing and maintaining knowledge of the laws and rules regulating the practice of clinical social work, marriage and family therapy and mental health counseling.

(d) Is presented by a person who meets at least one of the following criteria:

1. Has received a specialized graduate or post-graduate level training in the subject area taught in the program, or holds an active license to practice law in the State of Florida.

2. Has extensive experience to include no less than 2 years of practical application or research involving the subject taught in the program.

3. Holds a Florida license to practice clinical social work, marriage and family therapy, or mental health counseling.

(5) The Board retains the right and authority to audit and/or monitor courses and review records and course materials given by any provider approved to provide a renewal laws and rules course. The Board shall rescind the provider status or reject any future renewal laws and rules courses given by a provider if the provider: disseminated any false or misleading information in connection with the continuing education program; failed to conform to laws and rules of the Board; and if any of the faculty are in violation of the rules of the Board.

Rulemaking Authority 456.013(9), 491.007(2), 491.0085 FS. Law Implemented 456.013, 491.007(2), 491.0085 FS. History‒New 1-2-14.

**64B4-6.005 Approval of Continuing Education Providers of Sex Therapy Training Programs.**

(1) Only those continuing education providers approved as sex therapy providers pursuant to this rule shall be able to provide programs that qualify for continuing education credit in sex therapy training. In addition, those continuing education providers who meet the requirement of paragraph 64B4-6.002(1)(e), F.A.C., and offer programs that provide sex therapy training as identified in subparagraphs 64B4-7.004(2)(a)1.-17., F.A.C., shall also be able to provide programs that qualify for continuing education credit in sex therapy training.

(2) Continuing education sex therapy provider status shall be approved when all the requirements of Rule 64B4-6.004, F.A.C., have been satisfied and the continuing education program required by paragraph 64B4-6.004(2)(a), F.A.C., provides education in sex therapy in any or all of the areas identified in subparagraphs 64B4-7.004(2)(a)1.-17., F.A.C.

(3) Board approved continuing education sex therapy providers shall receive a provider number indicating this specific provider status.

Rulemaking Authority 491.004(5), 491.0085 FS. Law Implemented 491.0085(1) FS. History–New 10-2-94, Amended 1-7-96, Formerly 59P-6.005.

**64B4-6.006 Approval of Continuing Education Providers of Hypnosis Training Programs.**

(1) Only those continuing education providers approved as hypnosis training providers pursuant to this rule shall be able to provide programs that qualify for continuing education credit in hypnosis. In addition, those continuing education providers who meet the requirements of paragraph 64B4-6.002(1)(e), F.A.C., and offer programs that provide hypnosis training as identified in subparagraphs 64B4-6.006(2)(a)1.-7., F.A.C., shall also be able to provide programs that qualify for continuing education credit in hypnosis training.

(2) Continuing education hypnosis training provider status shall be approved when all the requirements of Rule 64B4-6.004, F.A.C., have been satisfied and:

(a) The continuing education program required by paragraph 64B4-6.004(2)(a), F.A.C., provides education in hypnosis therapy in all of the following areas:

1. Concepts and misconceptions of hypnosis,

2. Basic relaxation techniques utilizing hypnosis,

3. Hypnotic induction techniques,

4. Contraindications to hypnosis,

5. Relationship of personality dynamics to hypnosis,

6. Relationship of pyschopathology to hypnosis,

7. Relationship of ethical issues to hypnosis, and

(b) The instructor(s)/presenter(s) of the program required by subparagraph 64B4-6.004(2)(a)5., F.A.C., satisfy the requirements of Rule 64B4-7.003, F.A.C.

(3) Board approved continuing education hypnosis training providers shall receive a provider number indicating this specific provider status.

Rulemaking Authority 491.004(5), 491.0085 FS. Law Implemented 491.0085(1) FS. History–New 10-2-94, Amended 1-7-96, Formerly 59P-6.006, Amended 5-11-10.

**64B4-6.007 Reapproval of Continuing Education Providers.**

(1) Approval of continuing education providership is for the biennium during which approval or reapproval was given. If reapproval is not sought and granted, the continuing education approved provider status automatically ends.

(2) It is the responsibility of the continuing education provider to request biennial reapproval of the provider status by supplying the Board in writing:

(a) Provider name and number,

(b) Current address and telephone number,

(c) Continuing education director’s name,

(d) Reapproval fee pursuant to Rule 64B4-4.009, F.A.C.,

(e) Proof of conducting at least one continuing education program during the previous biennium,

(3) The Board will not reapprove the continuing education provider status of any provider who fails to follow the Board’s rules regarding continuing education providers.

(4) Providers seeking reapproval may continue to offer programs to licensees of the Board for credit until such time as a final order denying reapproval of continuing education provider status is filed with the Department clerk.

Rulemaking Authority 491.004(5), 491.0085 FS. Law Implemented 491.0085(1) FS. History–New 12-22-94, Formerly 59P-6.007.

**64B4-6.008 Audit of Continuing Education Providers.**

(1) The Board retains the right and authority to audit and/or monitor programs and review records and course materials given by any provider approved pursuant to Rule Chapter 64B4-6, F.A.C.

(2) During each license renewal biennium a random sample of the current continuing education providers will be selected for audit.

(3) Each provider selected for audit is required to respond within 21 days and provide the Board with the original records maintained pursuant to subsection 64B4-6.004(3), F.A.C., for one continuing education program the provider offered during that biennium, that was no less than three (3) and no more than sixteen (16) hours in duration.

(4) The Board shall review the audited materials to ascertain compliance with the standards required by Rule Chapter 64B4-6, F.A.C.

(5) The Board shall notify those providers who are not in compliance with the standards required by Rule Chapter 64B4-6, F.A.C.

(6) Failure of a provider to show evidence to the Board within 30 days of such notification that appropriate action to be in compliance with these standards has been taken, will result in loss of provider status.

(7) Failure of a provider to respond to the audit request by the Board will result in the loss of provider status.

(8) Program presentations audited or monitored by a Board member shall be with or without advance notice.

Rulemaking Authority 491.004(5), 491.0085 FS. Law Implemented 491.0085(1) FS. History–New 10-2-94, Formerly 59P-6.008, Amended 3-24-09.

**64B4-6.009 Approval of Continuing Education Courses on Prevention of Medical Errors.**

All licensees must complete a two hour course on prevention of medical errors, which meets the criteria of Section 456.013(7), F.S., as part of the total hours of continuing education required for biennial renewal.

Rulemaking Authority 456.013(7), 491.004(5), 491.0085 FS. Law Implemented 456.013(7), 491.0085 FS. History–New 10-15-02, Amended 11-7-16.

**CHAPTER 64B4-7**

**STANDARDS OF PRACTICE APPLICABLE TO CLINICAL SOCIAL WORK,**

**MARRIAGE AND FAMILY THERAPY AND MENTAL HEALTH COUNSELING**

**64B4-7.002 Qualifications Necessary for Clinical Social Workers, Marriage and Family Therapists and Mental Health Counselors to Practice Hypnosis.**

(1) Before practicing hypnosis for any therapeutic purpose, a clinical social worker, marriage and family therapist, or mental health counselor shall have successfully completed at least 50 hours of instruction in concepts of and misconceptions of hypnosis induction techniques, contraindications to hypnosis, and the relationships of personality dynamics, psychopathology and ethical issues to hypnosis. Such instruction must have met the standards for approval of continuing education courses set forth in Rule 64B4-6.002, F.A.C., and in addition must have been taught by qualified teachers as defined in Rule 64B4-7.003, F.A.C.

(2) An intern may not practice hypnosis unless practicing under the supervision of a qualified supervisor who has met the requirements to practice hypnosis.

Rulemaking Authority 491.004(5), 491.0141 FS. Law Implemented 491.0141 FS. History–New 7-6-88, Amended 2-25-90, Formerly 21CC-7.002, 61F4-7.002, 59P-7.002, Amended 7-20-98, 12-7-11.

**64B4-7.003 Qualified Teachers of Hypnosis.**

In order to be a “qualified teacher” of hypnosis, a person must document completion of a minimum of 200 hours of graduate or postgraduate level hypnosis training and a minimum of three (3) years of practical experience in the use of hypnosis and be licensed under Chapters 490, 491, F.S., or be a practitioner of the healing arts as defined in Section 485.003(3), F.S., licensed in another state as a clinical social worker, marriage and family therapist, mental health counselor, psychologist, or practitioner of the healing arts as defined in Section 485.003(3), F.S., or was not required to hold a license but can document the completion of the academic requirements of licensure for one of the stated professions.

Rulemaking Authority 491.004(5) FS. Law Implemented 491.0141 FS. History–New 8-9-89, Amended 2-25-90, Formerly 21CC-7.003, Amended 3-14-94, Formerly 61F4-7.003, 59P-7.003, Amended 12-21-97.

**64B4-7.004 Use of the Title “Sex Therapist.”**

(1) Intent. Whereas the provision of clinical, counseling, and psychotherapy services may include sex therapy, it is the intent of the Board to assure that those clinical social workers, marriage and family therapists, and mental health counselors who hold themselves out to the public as sex therapists have completed a minimum level of training in the specific area of sex therapy and the general provision of clinical, counseling and psychotherapy services.

(2) Use of the Title Sex Therapist. Any licensed clinical social worker, marriage and family therapist, or mental health counselor who holds himself out as a sex therapist shall have completed:

(a) A minimum of 120 hours of approved education which meets the continuing education requirements of Rule Chapter 64B4-6, F.A.C., from twelve (12) of the following areas with a minimum of 10 hours in each area taken:

1. Sexual and reproductive anatomy and physiology,

2. Developmental sexuality,

3. Gender-identity issues,

4. Socio-cultural factors in sexual values and behavior,

5. Medical factors related to sexuality and sexual functioning,

6. Interaction between sexuality and dynamics of interpersonal and family relationships,

7. Sexual offender treatment,

8. Diagnosis of sexual dysfunctions, disorders, and deviancy,

9. Treatment of sexual dysfunctions, disorders, and deviancy,

10. Legal, ethical, and forensic issues in sex therapy,

11. Sexually transmitted diseases,

12. Risk assessment with sex offenders,

13. Psychopharmacological therapy with sexual dysfunctions, disorders and deviancy,

14. Research on sexual dysfunctions, disorders and deviancy,

15. Sexual abuse treatment,

16. Victimology/victim therapy,

17. Group therapy in treatment of sexual dysfunctions, disorders, and deviancy; and,

(b) As of January 1, 1997, in addition to the minimum hours in paragraph (2)(a), of this rule, the following shall apply:

1. A minimum of 40 client contact hours in the clinical practice of sex therapy during a minimum period of time of six months.

2. A minimum of 20 hours of supervision, where each supervisory session is no more than one and one-half hours in length, by a qualified supervisor as set forth in Rule 64B4-7.004, F.A.C., during a minimum period of time of six months.

3. For the purpose of this section, supervision is face-to-face contact between an intern or trainee and a supervisor during which the applicant apprises the supervisor of the diagnosis and treatment of each sex therapy client, client cases are discussed, the supervisor provides the applicant with oversight and guidance in diagnosing, treating and dealing with sex therapy clients, and the supervisor evaluates the applicant’s performance. Supervision must:

a. Focus on the raw data from the clinical sex therapy work, which is made directly available to the supervisor through such means as written clinical materials, direct observation and video and audio recordings:

b. Be a process which is distinguishable from personal psychotherapy, consulting or didactic instruction; and,

c. During the supervisory period, 50% of the required supervision may be group supervision. If group supervision is obtained, it must be combined with individual supervision. For the purpose of this section, individual supervision is defined as one supervisor supervising no more than two (2) supervisees and group supervision is defined as one supervisor supervising more than (2) but a maximum of six (6) supervisees in the group.

(3) Any licensed clinical social worker, marriage and family therapist or mental health counselor who was previously qualified to hold himself out as a sex therapist based on the education requirements existing between February 25, 1990 and December 31, 1996 may continue to use the title of sex therapist.

Rulemaking Authority 491.004(5), 491.0143 FS. Law Implemented 491.0143 FS. History–New 1-4-90, Formerly 21CC-7.004, 61F4-7.004, Amended 1-7-96, 11-13-96, Formerly 59P-7.004.

**64B4-7.005 Qualified Supervisor of a Sex Therapist.**

In order to be a “qualified” supervisor of licensees who are completing the requirements to hold themselves out as sex therapists, a person must:

(1) Be licensed as a clinical social worker, marriage and family therapist or mental health counselor pursuant to Chapter 491, F.S., a psychologist licensed pursuant to Chapter 490, F.S., a physician licensed pursuant to Chapter 458 or 459, F.S., a person licensed in a comparable field in another state or a person in such field who was not required to hold a license and meets the equivalency requirements of Rule 64B4-11.007, 64B4-21.007, or 64B4-31.007, F.A.C.;

(2) Have completed the education requirements of paragraph 64B4-7.004(2)(a), F.A.C., or have met the requirements of subsection 64B4-7.004(3), F.A.C.; and,

(3) Have a minimum of one hundred (100) hours of clinical experience in the provision of sex therapy services.

Rulemaking Authority 491.004(5), 491.0143 FS. Law Implemented 491.0143 FS. History–New 1-7-96, Formerly 59P-7.005.

**64B4-7.006 Requirements for Evaluations of Minors for the Purpose of Addressing Custody, Residence or Visitation Disputes.**

(1) To perform evaluations of minors for the purpose of making a recommendation regarding custody, residence or visitation, the licensee shall have:

(a) Competence in performing assessments of a psychological nature on children and families;

(b) Education and training in the areas of child and family development, child and family psychopathology, and the impact of divorce on children and families; and,

(c) Knowledge of the legal standards and procedures governing divorce and child custody.

(2) When providing such evaluation of a minor, the licensee shall:

(a) Be impartial, act in the best interest of the child, avoid conflicts of interest, and not have been the treating psychotherapist nor had a prior relationship with any of the parties to the evaluation; and,

(b) Use multiple avenues of data gathering, including testing and interviewing methods, and shall involve all persons central to the child in question, including, at a minimum, communication with the child, the parties seeking custody or visitation, any treating mental health professional, family physician, and relatives of the immediate families.

Rulemaking Authority 491.004(5) FS. Law Implemented 491.009(2)(s) FS. History–New 12-21-97.

**64B4-7.007 Requirement to Hold Oneself Out as Qualified to Practice Juvenile Sex Offender Therapy.**

Effective October 1, 2000, in order for a licensed clinical social worker, marriage and family therapist or mental health counselor to hold oneself out as one qualified to practice juvenile sex offender therapy the licensee must have:

(1) Completed education and training through course work which meets the standards for approval as set forth in Rule 64B4-6.002, F.A.C., in the following subject areas:

(a) Theories of child and adolescent development and psychopathology;

(b) Developmental sexuality, including sexual and reproductive anatomy and physiology, gender and sexual identity, and sexual diversity;

(c) Interaction between sexuality and the dynamics of interpersonal and family relationships;

(d) Sexual arousal patterns, including both typical and deviant fantasy patterns;

(e) Sexual dysfunctions, disorders, and deviancy, including sexual abuse patterns and the thinking errors that support the cycle of abuse;

(f) Victim empathy and victimology;

(g) Use and misuse of defense mechanisms;

(h) Dynamics of power and control;

(i) Compulsivity management, arousal control, anger regulation, and relapse prevention;

(j) Social resilience, competence and interpersonal effectiveness of juveniles;

(k) Group therapy and biomedical approaches in treating sexual dysfunctions, disorders and deviancy;

(l) Legal, ethical, and forensic issues in treating juvenile sex offenders.

(2) Complete 20 hours of continuing education credits each license renewal biennium in any of the above subject areas or subject areas stated in paragraph 64B4-7.004(2)(a), F.A.C.

Rulemaking Authority 491.004(5), 491.0144 FS. Law Implemented 491.0144 FS. History–New 2-9-99, Amended 4-24-00, 8-24-00, 3-27-05, 9-13-07.

**64B4-7.008 Requirements to Be a Qualified Practitioner for Completing Risk Assessments and Treatment of Sexual Offenders.**

Rulemaking Authority 491.004(5), 947.005(9), 948.001(6) FS. Law Implemented 947.005, 948.30 FS. History–New 8-2-06, Repealed 7-13-08.

**64B4-7.0081 Requirements to be a Qualified Practitioner for Completing Risk Assessments and Treatment of Sexual Offenders.**

(1) Licensees employed or contracted as Behavioral Specialists for the Florida Department of Corrections (DOC) and credentialed to conduct screenings and counseling for sexual disorders; or approved by the United States Probation Office to complete risk assessments and treat sexual offenders; or who were a clinical member of the Association for the Treatment of Sexual Abusers (ATSA) or the Florida Association for the Treatment of Sexual Abusers (FATSA), on or before June 30, 2010, shall be deemed to be qualified practitioners.

(2) In order to be a qualified practitioner for completing risk assessments and/or providing treatment for sexual offenders, one must hold an active license as a clinical social worker, marriage and family therapist, or mental health counselor under Chapter 491, F.S.

(3) A qualified practitioner under this rule shall possess 60 hours of post degree graduate coursework or post degree continuing education in all of the following core areas with a minimum of three (3) hours per area:

(a) Etiology of sexual deviance;

(b) Evaluation/risk assessment and treatment of adult and adolescent sexual offenders that have established scientific bases;

(c) Evaluation/risk assessment and treatment of specialized populations of sexual offenders;

(d) Physiological measures of sexual arousal;

(e) Sexual offender and current DSM diagnosis;

(f) Safety planning/Family Safety planning;

(g) Report writing;

(h) Legal and ethical issues in the evaluation and treatment of sexual offenders;

(i) Co-morbidity and substance abuse issues; and,

(j) Relapse prevention.

(4) Have documented 2,000 hours of post degree experience in the evaluation and treatment of sexual offenders.

(a) The post degree experience must be obtained after Chapter 491, F.S., intern registration or licensure by working under the supervision of a qualified practitioner as defined in this rule who is also a Board qualified supervisor.

(b) The initial fifty (50) of the 2,000 supervised experience hours must be obtained with the qualified practitioner/supervisor being physically present with the supervisee during the evaluation/risk assessment or treatment.

(5) A qualified practitioner under this rule must complete 20 hours of board approved biennial continuing education in the assessment, evaluation and treatment of sexual offenders; relapse prevention; experience and training in working with victims; and related legal and ethical issues.

Rulemaking Authority 491.004(5), 947.005(10), (11), 948.001(10) FS Law Implemented 947.1405(7)(a)5., 948.001(10), (11), 948.30(1)(e) FS. History–New 4-18-12, Amended 7-19-17.

**CHAPTER 64B4-8**

**HIV AND AIDS EDUCATION**

**64B4-8.002 Approved Courses.**

The following courses are approved by the Board:

(1) For the HIV/AIDS education required by Section 491.0065, F.S.:

(a) Courses which meet one of the requirements of subsection 64B4-6.002(1), F.A.C., and which provide a minimum of three hours of HIV/AIDS education, including education on protocols and procedures applicable to HIV counseling, testing, reporting and partner notification.

(b) Courses approved by the Department of Health pursuant to Section 381.0038, F.S.

(2) For the domestic violence education required by Section 456.031, F.S., courses which meet one of the requirements of subsection 64B4-6.002(1), F.A.C., contain the course content set forth in Section 456.031(1)(a), F.S., and provide two hours of education regarding domestic violence.

Rulemaking Authority 456.031, 491.004(5), 491.0065 FS. Law Implemented 456.031, 491.0065 FS. History–New 4-3-89, Formerly 21CC-8.002, 61F4-8.002, Amended 1-7-96, Formerly 59P-8.002, Amended 2-9-99, 12-17-06.

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Rulemaking Authority 456.031, 491.004(5), 491.0065 FS. Law Implemented 456.031, 491.0065 FS. History–New 4-3-89, Formerly 21CC-8.002, 61F4-8.002, Amended 1-7-96, Formerly 59P-8.002, Amended 2-9-99, 12-17-06.

**CHAPTER 64B4-9**

**CLIENT RECORDS**

**64B4-9.001 Requirements for Client Records.**

(1) A licensed clinical social worker, marriage and family therapist, or mental health counselor, including any registered intern or provisional licensee, shall maintain responsibility for all records relating to his clients as provided in Section 456.057, F.S. All such records shall remain confidential except as provided by law or as allowed pursuant to a written and signed authorization by the client specifically requesting or authorizing release or disclosure of records in his office or possession.

(2) A full record of services shall be maintained for 7 years after the date of the last contact with the client or user.

(3) When a clinical social worker, marriage and family therapist, or mental health counselor terminates practice or relocates and is no longer available to clients or users, the clients or users shall be notified of such termination or relocation and unavailability by the licensee’s causing to be published in the newspaper of greatest general circulation in the county in which the licensee practices or practiced, a notice which shall contain the date of termination or relocation and an address at which the licensee’s client or user records are available to the client, user, or to a licensed mental health professional designated by the client or user. The notice shall appear at least once a week for 4 consecutive weeks. The records shall be retained for 2 years after the termination or relocation of the practice.

(4) If the termination was due to the death of a licensee, records shall be maintained at least two years after the licensee’s death. At the conclusion of a 22 month period from the date of the licensee’s death, the executor, administrator, personal representative, or survivor shall cause to be published once during each week for 4 consecutive weeks, in the newspaper of greatest general circulation in each county in which the licensee practiced, a notice indicating to the clients or users of the deceased licensee that the licensee’s records will be disposed of or destroyed 4 weeks or later from the last day of the final week of publication of the notice.

Rulemaking Authority 456.058, 491.004(5), 491.0148 FS. Law Implemented 456.058, 491.0148 FS. History–New 5-8-90, Formerly 21CC-9.001, 61F4-9.001, 59P-9.001, Amended 2-11-98, 6-13-07.

**64B4-9.002 Definitions.**

Psychotherapy records are chronicles of a dynamic psychotherapeutic relationship and are to be accorded the dignity and respect due such a relationship. Psychotherapy is for the client and all records constructed shall respect the integrity and privacy of that relationship.

**(1) A psychotherapy report is a summary of information derived from the psychotherapy records which addresses a specific request as authorized by the client.**

(2) A psychotherapy record shall contain basic information about the client including name, address and telephone number, dates of therapy sessions, treatment plan and results achieved, diagnosis if applicable, and financial transactions between therapist and client including fees assessed and collected. A record shall also include notes or documentation of the client’s consent to all aspects of treatment, copies of all client authorizations for release of information, any legal forms pertaining to the client, and documentation of any contact the therapist has with other professionals regarding the client.

(3) Regardless of who pays for the services of the psychotherapist, a client is that individual who, by virtue of private consultation with the psychotherapist, has reason to expect that the individual’s communication with the psychotherapist during that private consultation will remain confidential.

Rulemaking Authority 491.004(5), 491.0148 FS. Law Implemented 491.009(2)(s), 491.0148 FS. History–New 12-11-91, Formerly 21CC-9.002, 61F4-9.002, 59P-9.002, Amended 2-11-98.

**CHAPTER 64B4-10**

**SEXUAL MISCONDUCT IN THE PRACTICE OF MARRIAGE AND**

**FAMILY THERAPY, CLINICAL SOCIAL WORK AND MENTAL HEALTH COUNSELING**

**64B4-10.001 Findings of the Board.**

Rulemaking Authority 491.004(5), 491.0111 FS. Law Implemented 491.0111 FS. History–New 3-4-90, Formerly 21CC-10.001, 61F4-10.001, 59P-10.001, Amended 5-21-98, Repealed 10-21-15.

**64B4-10.002 Definition of Sexual Misconduct.**

(1) It is sexual misconduct for a psychotherapist to engage, attempt to engage, or offer to engage a client in sexual behavior, or any behavior, whether verbal or physical, which is intended to be sexually arousing, including kissing; sexual intercourse, either genital or anal; cunnilingus; fellatio; or the touching by either the psychotherapist or the client of the other’s breasts, genital areas, buttocks, or thighs, whether clothed or unclothed.

(2) It is sexual misconduct for a psychotherapist to encourage the client to engage in sexual conduct with a third party unless:

(a) Such encouragement is consistent with the planned treatment of the client’s specifically diagnosed mental, social, or sexual dysfunctions or disorders; and,

(b) Treatment is provided in accordance with generally accepted professional standards for psychotherapy in this State.

Rulemaking Authority 491.004(5), 491.0111 FS. Law Implemented 491.0111 FS. History–New 3-4-90, Formerly 21CC-10.002, 61F4-10.002, 59P-10.002, Amended 4-28-98, 4-24-00.

**64B4-10.003 Psychotherapist-Client Relationship.**

A psychotherapist-client relationship is established between a psychotherapist and a person once a psychotherapist renders, or purports to render, clinical social work, marriage and family therapy or mental health services including, but not limited to, psychotherapy, counseling, assessment or treatment to that person. A formal contractual relationship, the scheduling of professional appointments, or payment of a fee for services are not necessary conditions for the establishment of a psychotherapist-client relationship, although each of these may be evidence that such a relationship exists.

(1) Sexual misconduct, as defined in Rule 64B4-10.002, F.A.C., with a client is prohibited.

(2) For purposes of determining the existence of sexual misconduct the psychotherapist-client relationship, once established, is deemed to continue for a minimum of 2 years after termination of psychotherapy or the date of the last professional contact with the client. However, beyond that 2 year time period, the mere passage of time since the client’s last visit with the psychotherapist is not the sole determinative of whether or not the psychotherapist-client relationship has been terminated. Some of the factors considered by the Board in determining whether the psychotherapist-client relationship has terminated include, but are not limited to, the following:

(a) Formal termination procedures;

(b) Transfer of the client’s case to another psychotherapist;

(c) The length of the professional relationship;

(d) The extent to which the client has confided personal or private information to the psychotherapist;

(e) The nature of the client’s problem; and,

(f) The degree of emotional dependence that the client has on the psychotherapist.

(3) The psychotherapist shall not engage in or request sexual contact with a former client at any time if engaging with that client would be exploitative, abusive or detrimental to that client’s welfare or if the sexual contact is a result of the exploitation of trust, knowledge, influence or emotions, derived from the professional relationship.

(4) A client’s consent to, initiation of, or participation in sexual behavior or involvement with a psychotherapist does not change the nature of the conduct nor lift the prohibition.

Rulemaking Authority 491.004(5), 491.0111 FS. Law Implemented 491.0111 FS. History–New 3-5-90, Formerly 21CC-10.003, 61F4-10.003, 59P-10.003, Amended 5-21-98, 8-13-08.

**64B4-10.004 Sexual Misconduct Not Involving Client Contact.**

(1) It is sexual misconduct for a supervisor to engage a supervisee in sexual behavior as defined in Rule 64B4-10.002, F.A.C., during the period a supervisory relationship exists.

(2) It is sexual misconduct for a psychotherapist to engage in sexual behavior as defined in Rule 64B4-10.002, F.A.C., with any immediate family member or guardian of a client during the period of time psychotherapeutic services are being provided to the client.

(3) “Immediate family” shall be defined as spouse, child, parents, parents-in-laws, siblings, grandchild, grandparents, and other household members.

Rulemaking Authority 491.004(5), 491.0111 FS. Law Implemented 491.0111 FS. History–New 11-17-98.

**CHAPTER 64B4-11**

**DEFINITIONS APPLICABLE TO SOCIAL WORK**

**64B4-11.007 Definition of “Licensed Clinical Social Worker, or the Equivalent, Who Is a Qualified Supervisor.”**

(1) “Licensed clinical social worker, or the equivalent, who is a qualified supervisor,” as used in Section 491.005(1)(c), F.S., is defined as an individual who, during the period for which the applicant claims supervised clinical experience, meets one of the following:

(a) Holds an active license as a clinical social worker in the State of Florida;

(b) Is licensed or certified as a social worker in a jurisdiction other than Florida in which the supervision took place, or resides in a jurisdiction other than Florida in which licensure was not required, provided that he or she meets the education and experience requirements for licensure as a clinical social worker under Section 491.005(1), F.S., or

(c) Is licensed as a marriage and family therapist, or mental health counselor in Florida or in the state in which the supervision took place and can demonstrate nine semester or twelve quarter hours of course work in social work theories and techniques. The concerned hours shall be chosen from an accredited graduate school of social work and relate to three (3) of the following six areas of content: human behavior and social environment I and/or II, social work practice theories, models of the social work practice, advanced social work practice, or ethical issues in contemporary social work practice.

(2) This rule applies to all supervisors providing clinical supervision to interns and trainees.

(3) A qualified supervisor who provides supervision in Florida for interns and trainees must meet equivalency standards of subsection (1); and,

(a) Have completed four (4) years of clinical social work experience, two (2) years of which can be earned during a post-masters clinical internship with the remaining two (2) years of experience earned post-licensure; and,

(b) Have completed, subsequent to licensure as a clinical social worker, training in supervision in one of the following:

1. A graduate level academic course in supervision which meets the requirements of Rule 64B4-6.0025, F.A.C., or

2. A continuing education course in supervisory training which meets the requirements of Rule 64B4-6.0025, F.A.C., or

3. A post-graduate training course for field instructors in clinical social work, or

4. Has been designated an Approved Supervisor by the AAMFT.

Rulemaking Authority 491.004(5) FS. Law Implemented 491.005(1)(c) FS. History–New 7-6-88, Amended 1-4-90, 12-19-90, Formerly 21CC-11.007, 61F4-11.007, Amended 1-7-96, 12-29-96, 6-16-97, Formerly 59P-11.007, Amended 12-11-97, 8-8-99, 6-14-05, 7-16-06, 8-28-07, 4-29-10.

**64B4-11.008 Definition of “a Clinical Social Work Graduate Program with Comparable Standards.”**

For purposes of Section 491.005(2)(b), F.S., a clinical social work graduate program with comparable standards is defined as:

(1) A doctoral program in social work at an institution which was accredited by an accrediting agency recognized by the United States Department of Education, or

(2) A masters degree program at a school of social work accredited or in candidacy status of accreditation by the Council on Social Work Education or the Canadian Association of Schools of Social Work, or

(3) A graduate level program meeting the requirements of Section 491.005(1)(b)1.c., F.S.

Rulemaking Authority 491.004(5) FS. Law Implemented 491.005(2)(b) FS. History–New 8-6-89, Amended 12-19-90, Formerly 21CC-11.008, 61F4-11.008, Amended 11-27-94, Formerly 59P-11.008.

**64B4-11.009 Treatment by a Clinical Social Worker.**

Rulemaking Authority 491.004(5) FS. Law Implemented 491.003(7) FS. History–New 5-15-94, Formerly 61F4-11.009, 59P-11.009, Repealed 10-21-15.

**CHAPTER 64B4-21**

**DEFINITIONS APPLICABLE TO MARRIAGE AND FAMILY THERAPY**

**64B4-21.007 Definition of “a Licensed Marriage and Family Therapist with at Least Five Years Experience or the Equivalent, Who Is a Qualified Supervisor.”**

(1) “A licensed marriage and family therapist, who is a qualified supervisor,” as used in Section 491.005(3)(c), F.S., is defined as an individual who, during the period for which the applicant claims supervision meets one of the following:

(a) Holds an active license as a marriage and family therapist in the state of Florida;

(b) Is licensed or certified as a marriage and family therapist in another state, or resides in a state in which licensure for marriage and family therapy is not required, and can document a minimum of six (6) semester or eight (8) quarter hours of graduate coursework in marriage and family systemic theories and techniques, and five (5) years of clinical experience as a marriage and family therapist, or

(c) Is designated an Approved Supervisor by the American Association for Marriage and Family Therapy;

(d) Is licensed as a clinical social worker or mental health counselor in Florida, or in the state in which the supervision took place, and can document a minimum of six (6) semester or eight (8) quarter hours of graduate coursework in marriage and family systemic theories and techniques, and five (5) years of clinical experience in marriage and family therapy, two (2) years of which can be earned during a post-masters clinical internship.

(2) This rule applies to all supervisors providing clinical supervision to interns and trainees.

(3) A qualified supervisor who provides supervision in Florida for interns and trainees must meet equivalency standards of paragraph (1)(a), (b), (c) or (d) and have:

(a) Completed five (5) years of clinical experience, two (2) years of which can be earned during a post-masters clinical internship with the remaining three (3) years of experience earned post-licensure; and,

(b) Completed, subsequent to licensure as a marriage and family therapist, training in supervision in one of the following:

1. A graduate level academic course in supervision which meets the requirements of Rule 64B4-6.0025, F.A.C., or

2. A continuing education course in supervisory training which meets the requirements of Rule 64B4-6.0025, F.A.C., or

3. Is designated an Approved Supervisor by the AAMFT.

Rulemaking Authority 491.005(6) FS. Law Implemented 491.005(3) FS. History–New 7-6-88, Formerly 21CC-21.007, Amended 1-9-94, Formerly 61F4-21.007, Amended 12-29-96, Formerly 59P-21.007, Amended 8-8-99, 6-14-05, 7-16-06, 8-28-07, 12-7-09.

**64B4-21.009 Treatment by a Marriage and Family Therapist.**

Rulemaking Authority 491.004(5) FS. Law Implemented 491.003(8) FS. History–New 5-15-94, Formerly 61F4-21.009, 59P-21.009, Repealed 10-21-15.

**CHAPTER 64B4-22**

**LICENSURE BY EXAMINATION ‒ MARRIAGE AND FAMILY THERAPY**

**64B4-22.110 Course Content.**

The course requirements set forth in Section 491.005(3), F.S., shall contain the following content:

(1) Dynamics of Marriage and Family Systems. This course introduces the student to systemic knowledge and thought, focusing on the development of marriage and family therapy (MFT) as a profession and on the interactive dynamics of the living social systems of marriage and family as explained by a number of the tenets of General Systems Theory.

(2)(a) Marriage Therapy and Counseling Theory and Techniques,

(b) Family Therapy and Counseling Theory and Techniques. Content in these two areas may be taught separately as stated or they may be taught as a course in theories and a course in techniques. A course in theories will compare and contrast the major theoretical models in systemic marriage and family therapy which seek to explain both normal and abnormal, or dysfunctional marriage and family functioning. A course in techniques will use the different theoretical understandings to develop interventive skills useful in the diagnosis and treatment of symptomatic families, couples and individuals.

(3) Individual Human Development Theories Throughout the Life Cycle. This course covers theories of human development in all stages of life both for the individual and for the systems in which the individual lives.

(4) Personality Theories. This course covers both historical and current theories of personality and human behavior from an individual, non-systemic perspective.

(5) Psychopathology. This course prepares the student in the evaluation and classification of abnormal human behavior and psychiatric disorders in individuals according to current diagnostic standards (DSM IVTR and ICD-9 or ICD-10).

(6) Human Sexuality Theory and Counseling Techniques. This course provides a broad understanding of human sexual development, both normal and abnormal sexual functioning and appropriate counseling techniques for sexual dysfunctions.

(7) General Counseling Theories and Counseling Techniques. This course content teaches those theories and fundamentals of counseling which are applicable to all counseling processes whether they are individually or systemically oriented.

(8) Psychosocial Theories. Course content in this area explores the interrelationship of psychology and sociology in understanding the growth and development of living human systems within their larger, social systems context. Courses in family sociology, gender, anthropology or culture and ethnicity in counseling offer psychosocial awareness.

(9) Legal, Ethical and Professional Standards. This course presents standards of law and ethics as it relates to the practice of all counseling professions. Particular issues of law and ethics which uniquely impact the practice of MFT should also be addressed.

(10) Diagnosis, Appraisal, Assessment and Testing. This course content teaches a working knowledge of inferential statistics and the use and application of tests and measurements used in the diagnosis and appraisal of intra- and inter-personal disorders and dysfunctions.

(11) Behavioral Research. This course content teaches the student to be an informed consumer of professional research. The focus is on interpretation of research data and their appropriate application to professional practice. Knowledge of inferential statistics is necessary in this interpretative process.

(12) A Minimum of One Supervised Clinical Practicum in a Marriage and Family Setting. It is important to emphasize that the student practicum must be supervised by a licensed MFT or equivalent as defined in Rule 64B4-21.007, F.A.C., must include 180 hours of direct client contact in systemic marriage and family therapy services and must be certified complete by an official of the college or university granting the degree.

(13) Substance Abuse. This course includes research and theories of substance use and abuse; principles and practices for the treatment of substance abuse and addiction; and the promotion of responsible behavior.

Rulemaking Authority 491.004(5) FS. Law Implemented 491.005(3) FS. History–New 8-20-92, Amended 1-27-93, Formerly 21CC-22.110, Amended 2-22-94, Formerly 61F4-22.110, 59P-22.110, Amended 10-15-02, 1-24-08.

**CHAPTER 64B4-31**

**DEFINITIONS APPLICABLE TO MENTAL HEALTH COUNSELING**

**64B4-31.007 Definition of a “Licensed Mental Health Counselor or the Equivalent, Who Is a Qualified Supervisor.”**

(1) A “licensed mental health counselor, or the equivalent, who is a qualified supervisor,” as used in Section 491.005(4)(c), F.S., is defined as an individual who, during the period for which the applicant claims supervision, meets one of the following:

(a) Holds an active license as a mental health counselor in the state of Florida;

(b) Is licensed or certified as a mental health counselor in another state, or resides in another state where licensure is not required, provided that he or she meets the education and experience requirements for licensure as a mental health counselor under Section 491.005(4), F.S.;

(c) Is licensed as a clinical social worker or marriage and family therapist in Florida or in the state in which the supervision took place and can demonstrate a three semester or four quarter hour graduate level course in three of the following six content areas: counseling theories, counseling practice, assessment, career counseling, substance abuse, or legal, ethical, and professional standards from a clinical counseling program in an institution fully accredited by an accrediting body recognized by the Council for Higher Education Accreditation and/or the U.S. Department of Education;

(d) Is licensed as a psychologist in Florida or in the state where the supervision took place and completed a minimum of three years of experience providing psychotherapy, consisting of a minimum of 750 hours of direct client contact per year;

(2) Qualified supervisors who provide supervision in Florida for interns and trainees must meet the equivalency standards of subsection (1), and have:

(a) Completed five (5) years of clinical experience, two (2) years of which can be earned during a post-masters clinical internship with the remaining three (3) years of experience earned post-licensure; and,

(b) Completed, subsequent to licensure as a mental health counselor, training in supervision in one of the following:

1. A graduate level academic course in supervision which meets the requirements of Rule 64B4-6.0025, F.A.C., or

2. A continuing education course in supervisory training which meets the requirements of Rule 64B4-6.0025, F.A.C., or

3. A post-graduate training course for field instructors in clinical social work, or

4. Is designated an Approved Clinical Supervisor (ACS) by The Center for Credentialing and Education, Inc. (CCE), or

5. Is designated an Approved Supervisor by the AAMFT.

Rulemaking Authority 491.004(5) FS. Law Implemented 491.005(4)(c) FS. History–New 8-14-88, Amended 1-3-91, Formerly 21CC-31.007, 61F4-31.007, Amended 12-29-96, Formerly 59P-31.007, Amended 8-8-99, 8-9-00, 6-14-05, 7-16-06, 1-8-07, 8-28-07, 12-7-09.

**64B4-31.008 Definition of “Research.”**

A course in “Research” as used in Section 491.005(4)(b)1.b., F.S., is defined as a course or courses which prepare the student to read, interpret and apply current research in mental health counseling, including presentation of statistical research design and methods, ethical considerations of research on human subjects, hypothesis testing, and interpretation of research results.

Rulemaking Authority 491.004(5) FS. Law Implemented 491.005 FS. History–New 8-6-89, Amended 1-3-91, Formerly 21CC-31.008, 61F4-31.008, 59P-31.008.

**64B4-31.009 Treatment by a Mental Health Counselor.**

Rulemaking Authority 491.004(5) FS. Law Implemented 491.003(9) FS. History–New 5-15-94, Formerly 61F4-31.009, 59P-31.009, Repealed 10-21-15.

**64B4-31.010 Course Content.**

The course requirements set forth in Section 491.005(4), F.S., shall contain the following content:

(1) **Counseling Theories and Practice:** Counseling and personality theories including both individual and systems perspectives as well as coverage of relevant research and factors considered in applications of these theories.

**(2) Human Growth and Development:** Theories of individual and family development and transitions across the life span (including theories of learning and personality development) and strategies for facilitating development over the life span.

**(3) Diagnosis and Treatment of Psychopathology:** General principles of etiology, diagnosis, treatment, and prevention of mental and emotional disorders and dysfunctional behavior, and general principles and practices for the promotion of optimal mental health.

**(4) Human Sexuality:** Research and theories of human sexual development (including research and theories of normal and abnormal sexual functioning) and general principles and practices for the treatment of sexual dysfunctions and the promotion of optimal sexual health.

**(5) Group Theories and Practice:** Principles of group dynamics, group counseling, and group leadership including group process components, developmental stage theories, and group member roles and behavior.

**(6) Individual Evaluation and Assessment:** Strategies for selecting, administering, interpreting, and using valid and reliable individual and group assessment and evaluation instruments and techniques in counseling and psychotherapy.

**(7) Career and Lifestyle Assessment:** Principles and practices of career lifestyle counseling (including career and lifestyle assessment instruments and techniques, career development theories, and career decision-making models) and career information dissemination (including computer based career development applications and strategies).

**(8) Research and Program Evaluation:** Principles, practices, and applications of basic types of research methods (including qualitative and quantitative research designs), needs assessment, and program evaluation, and ethical and legal considerations in research.

**(9) Social and Cultural Foundations:** Multicultural and pluralistic trends including characteristics and concerns of diverse groups based on such factors as age, race, religious preference, physical disability, sexual orientation, ethnicity and culture, family patterns, gender, socioeconomic status, and intellectual ability.

**(10) Counseling in Community Settings:** Principles, theories, and practices of community needs assessment and community intervention, including the design and utilization of programs and facilities for inpatient, outpatient, partial treatment, and aftercare, and the utilization of the health and human services public and private networks in local communities.

**(11) Substance Abuse:** Research and theories of substance use and abuse, and principles and practices for the treatment of substance abuse and dependency and the promotion of responsible behavior.

**(12) Legal, Ethical, and Professional Standards Issues:** Goals, objectives, and practices of professional counseling organizations, codes of ethics, legal considerations, standards of preparation, certifications, and licensing, and the role identity and professional obligations of mental health counselors.

Rulemaking Authority 491.005(6) FS. Law Implemented 491.005(4) FS. History–New 12-28-09.

**Florida Law applicable to the practice of Clinical Social Work, Marriage and Family Therapy, & Mental Health Counseling**

**Florida Statutes**

[Chapter 491:](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0400-0499/0491/0491ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%20491) Clinical, Counseling, and Psychotherapy Services  
[Chapter 456:](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0400-0499/0456/0456ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%20456) Health Professions and Occupations: General Provisions  
[Chapter 120:](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0100-0199/0120/0120ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%20120) Administrative Procedure Act  
[Chapter 39:](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0000-0099/0039/0039ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%2039) Proceedings Related to Children  
[Chapter 90:](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0000-0099/0090/0090ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%2090) Evidence Code  
[Chapter 394:](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0300-0399/0394/0394ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%20394) Mental Health (Baker Act)  
[Chapter 397:](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0300-0399/0397/0397ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%20397) Substance Abuse Services (Marchman Act)  
[Chapter 415:](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0400-0499/0415/0415ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%20415) Adult Protective Services

**Florida Administrative Code (F.A.C.)** *Provided the authority by Florida Statutes to promulgate Rules:*

[Rules: Chapter 64B4:](https://www.flrules.org/gateway/Division.asp?DivID=327) Board of Clinical Social Work, Marriage & Family Therapy & Mental Health Counseling  
[Chapter 64B25-28:](https://www.flrules.org/gateway/ChapterHome.asp?Chapter=64B25-28) Certified Master Social Workers

*Below is a partial listing of the sections of Florida Statutes (other than FS 491) that affect psychotherapy practice. These paragraphs are not inclusive of all the sections that govern the practice of CSW, MFT, or MHC. You are responsible for knowing the entirety of these Chapters, particularly 456, and to practice accordingly. It is highly recommended that you review each of these chapters in full.*

Remember:***Ignorantia juris non excusat:*** *Ignorance of the law excuses no one (you are still liable for an offense).*

[**Chapter 456:**](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0400-0499/0456/0456ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%20456)**Health Professions and Occupations: General Provisions**

*Chapter 456 is an “Omnibus” Statute that supersedes FS 491.*

**456.001 Definitions.**—As used in this chapter, the term:

(4) “Health care practitioner” means any person licensed under chapter 457; chapter 458; chapter 459; chapter 460; chapter 461; chapter 462; chapter 463; chapter 464; chapter 465; chapter 466; chapter 467; part I, part II, part III, part V, part X, part XIII, or part XIV of chapter 468; chapter 478; chapter 480; part II or part III of chapter 483; chapter 484; chapter 486; chapter 490; or chapter 491.

**456.013 Requirement for instruction on medical errors.**

**456.031 Requirement for instruction on domestic violence.**

**456.033 Requirement for instruction for certain licensees on HIV and AIDS.**

**456.057 Ownership and control of patient records; report or copies of records to be furnished; disclosure of information.**

(1) As used in this section, the term “records owner” means any health care practitioner who generates a medical record after making a physical or mental examination of, or administering treatment or dispensing legend drugs to, any person; any health care practitioner to whom records are transferred by a previous records owner; or any health care practitioner’s employer, including, but not limited to, group practices and staff-model health maintenance organizations, provided the employment contract or agreement between the employer and the health care practitioner designates the employer as the records owner.

***Section Continues…***

(6) Any health care practitioner licensed by the department or a board within the department who makes a physical or mental examination of, or administers treatment or dispenses legend drugs to, any person shall, upon request of such person or the person’s legal representative, furnish, in a timely manner, without delays for legal review, copies of all reports and records relating to such examination or treatment, including X rays and insurance information. However, when a patient’s psychiatric, chapter 490 psychological, or chapter 491 psychotherapeutic records are requested by the patient or the patient’s legal representative, the health care practitioner may provide a report of examination and treatment in lieu of copies of records. Upon a patient’s written request, complete copies of the patient’s psychiatric records shall be provided directly to a subsequent treating psychiatrist. The furnishing of such report or copies shall not be conditioned upon payment of a fee for services rendered.

(7)(a) Except as otherwise provided in this section and in s. 440.13(4)(c), such records may not be furnished to, and the medical condition of a patient may not be discussed with, any person other than the patient, the patient’s legal representative, or other health care practitioners and providers involved in the patient’s care or treatment, except upon written authorization from the patient. However, such records may be furnished without written authorization under the following circumstances:

1. To any person, firm, or corporation that has procured or furnished such care or treatment with the patient’s consent.

2. When compulsory physical examination is made pursuant to Rule 1.360, Florida Rules of Civil Procedure, in which case copies of the medical records shall be furnished to both the defendant and the plaintiff.

3. In any civil or criminal action, unless otherwise prohibited by law, upon the issuance of a subpoena from a court of competent jurisdiction and proper notice to the patient or the patient’s legal representative by the party seeking such records.

4. For statistical and scientific research, provided the information is abstracted in such a way as to protect the identity of the patient or provided written permission is received from the patient or the patient’s legal representative.

5. To a regional poison control center for purposes of treating a poison episode under evaluation, case management of poison cases, or compliance with data collection and reporting requirements of s. 395.1027 and the professional organization that certifies poison control centers in accordance with federal law.

6. To the Department of Children and Families, its agent, or its contracted entity, for the purpose of investigations of or services for cases of abuse, neglect, or exploitation of children or vulnerable adults.

(b) Absent a specific written release or authorization permitting utilization of patient information for solicitation or marketing the sale of goods or services, any use of that information for those purposes is prohibited.

(c) Information disclosed to a health care practitioner by a patient in the course of the care and treatment of such patient is confidential and may be disclosed only to other health care practitioners and providers involved in the care or treatment of the patient, if allowed by written authorization from the patient, or if compelled by subpoena at a deposition, evidentiary hearing, or trial for which proper notice has been given.

***Section Continues…***

(10) All records owners shall develop and implement policies, standards, and procedures to protect the confidentiality and security of the medical record. Employees of records owners shall be trained in these policies, standards, and procedures.

(11) Records owners are responsible for maintaining a record of all disclosures of information contained in the medical record to a third party, including the purpose of the disclosure request. The record of disclosure may be maintained in the medical record. The third party to whom information is disclosed is prohibited from further disclosing any information in the medical record without the expressed written consent of the patient or the patient’s legal representative.

(12) Notwithstanding the provisions of s. 456.058, records owners shall place an advertisement in the local newspaper or notify patients, in writing, when they are terminating practice, retiring, or relocating, and no longer available to patients, and offer patients the opportunity to obtain a copy of their medical record.

(13) Notwithstanding the provisions of s. 456.058, records owners shall notify the appropriate board office when they are terminating practice, retiring, or relocating, and no longer available to patients, specifying who the new records owner is and where medical records can be found.

***Section Continues…***

**456.058 Disposition of records of deceased practitioners or practitioners relocating or terminating practice.**—Each board created under the provisions of chapter 457, chapter 458, chapter 459, chapter 460, chapter 461, chapter 463, part I of chapter 464, chapter 465, chapter 466, part I of chapter 484, chapter 486, chapter 490, or chapter 491, and the department under the provisions of chapter 462, shall provide by rule for the disposition, under that chapter, of the medical records or records of a psychological nature of practitioners which are in existence at the time the practitioner dies, terminates practice, or relocates and is no longer available to patients and which records pertain to the practitioner’s patients. The rules shall provide that the records be retained for at least 2 years after the practitioner’s death, termination of practice, or relocation. In the case of the death of the practitioner, the rules shall provide for the disposition of such records by the estate of the practitioner.

History.—s. 85, ch. 97-261; s. 80, ch. 2000-160; s. 115, ch. 2000-318. Note.—Former s. 455.677.

**456.059 Communications confidential; exceptions.**—Communications between a patient and a psychiatrist, as defined in s. 394.455, shall be held confidential and shall not be disclosed except upon the request of the patient or the patient’s legal representative. Provision of psychiatric records and reports shall be governed by s. 456.057. Notwithstanding any other provision of this section or s. 90.503, where:

(1) A patient is engaged in a treatment relationship with a psychiatrist;

(2) Such patient has made an actual threat to physically harm an identifiable victim or victims; and

(3) The treating psychiatrist makes a clinical judgment that the patient has the apparent capability to commit such an act and that it is more likely than not that in the near future the patient will carry out that threat, the psychiatrist may disclose patient communications to the extent necessary to warn any potential victim or to communicate the threat to a law enforcement agency. No civil or criminal action shall be instituted, and there shall be no liability on account of disclosure of otherwise confidential communications by a psychiatrist in disclosing a threat pursuant to this section.

History.—s. 10, ch. 88-1; s. 33, ch. 92-149; s. 43, ch. 96-169; s. 83, ch. 97-261; s. 81, ch. 2000-160.

Note.—Former s. 455.2415; s. 455.671.

**456.061 Practitioner disclosure of confidential information; immunity from civil or criminal liability.**

(1) A practitioner regulated through the Division of Medical Quality Assurance of the department shall not be civilly or criminally liable for the disclosure of otherwise confidential information to a sexual partner or a needle-sharing partner under the following circumstances:

(a) If a patient of the practitioner who has tested positive for human immunodeficiency virus discloses to the practitioner the identity of a sexual partner or a needle-sharing partner;

(b) The practitioner recommends the patient notify the sexual partner or the needle-sharing partner of the positive test and refrain from engaging in sexual or drug activity in a manner likely to transmit the virus and the patient refuses, and the practitioner informs the patient of his or her intent to inform the sexual partner or needle-sharing partner; and

(c) If pursuant to a perceived civil duty or the ethical guidelines of the profession, the practitioner reasonably and in good faith advises the sexual partner or the needle-sharing partner of the patient of the positive test and facts concerning the transmission of the virus.

However, any notification of a sexual partner or a needle-sharing partner pursuant to this section shall be done in accordance with protocols developed pursuant to rule of the Department of Health.

(2) Notwithstanding the foregoing, a practitioner regulated through the Division of Medical Quality Assurance of the department shall not be civilly or criminally liable for failure to disclose information relating to a positive test result for human immunodeficiency virus of a patient to a sexual partner or a needle-sharing partner.

History.—s. 43, ch. 88-380; s. 12, ch. 89-350; s. 191, ch. 97-103; s. 84, ch. 97-261; s. 220, ch. 99-8; s. 82, ch. 2000-160.

Note.—Former s. 455.2416; s. 455.674.

**456.062 Advertisement by a health care practitioner of free or discounted services; required statement.**—In any advertisement for a free, discounted fee, or reduced fee service, examination, or treatment by a health care practitioner licensed under chapter 458, chapter 459, chapter 460, chapter 461, chapter 462, chapter 463, chapter 464, chapter 465, chapter 466, chapter 467, chapter 478, chapter 483, part I of chapter 484, chapter 486, chapter 490, or chapter 491, the following statement shall appear in capital letters clearly distinguishable from the rest of the text: THE PATIENT AND ANY OTHER PERSON RESPONSIBLE FOR PAYMENT HAS A RIGHT TO REFUSE TO PAY, CANCEL PAYMENT, OR BE REIMBURSED FOR PAYMENT FOR ANY OTHER SERVICE, EXAMINATION, OR TREATMENT THAT IS PERFORMED AS A RESULT OF AND WITHIN 72 HOURS OF RESPONDING TO THE ADVERTISEMENT FOR THE FREE, DISCOUNTED FEE, OR REDUCED FEE SERVICE, EXAMINATION, OR TREATMENT. However, the required statement shall not be necessary as an accompaniment to an advertisement of a licensed health care practitioner defined by this section if the advertisement appears in a classified directory the primary purpose of which is to provide products and services at free, reduced, or discounted prices to consumers and in which the statement prominently appears in at least one place.

History.—s. 81, ch. 97-261; s. 85, ch. 99-397; s. 82, ch. 2000-160; s. 1, ch. 2006-215. Note.—Former s. 455.664.

**456.072 Grounds for discipline; penalties; enforcement.**

(i) Except as provided in s. 465.016, failing to report to the department any person who the licensee knows is in violation of this chapter, the chapter regulating the alleged violator, or the rules of the department or the board. However, a person who the licensee knows is unable to practice with reasonable skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, chemicals, or any other type of material, or as a result of a mental or physical condition, may be reported to a consultant operating an impaired practitioner program as described in s. 456.076 rather than to the department.

(l) Making or filing a report which the licensee knows to be false, intentionally or negligently failing to file a report or record required by state or federal law, or willfully impeding or obstructing another person to do so. Such reports or records shall include only those that are signed in the capacity of a licensee.

(u) Failing to comply with the requirements of ss. 381.026 and 381.0261 to provide patients with information about their patient rights and how to file a patient complaint.

***NOTE: Statutes that govern our practice often cite other statutes that are worthy of looking up. For example, FS381.026 details the “Florida Patient’s Bill of Rights and Responsibilities” for which we are responsible as health care providers.***

[**Chapter 120:**](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0100-0199/0120/0120ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%20120)**Administrative Procedure Act.** *(governs rule making by the various licensing boards)*

***NOTE: This Florida Statute explains the details of evidence, procedures, and practices involved in disciplinary process. It also describes your rights in the event you are required to go through a disciplinary hearing.***

[**Chapter 39:**](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0000-0099/0039/0039ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%2039)**Proceedings Related to Children**

*491 practitioners are defined as a “Qualified Professional” under this statute and mandates reporting.*

**39.201 Mandatory reports of child abuse, abandonment, or neglect; mandatory reports of death; central abuse hotline.**

(1)(a) Any person who knows, or has reasonable cause to suspect, that a child is abused, abandoned, or neglected by a parent, legal custodian, caregiver, or other person responsible for the child’s welfare, as defined in this chapter, or that a child is in need of supervision and care and has no parent, legal custodian, or responsible adult relative immediately known and available to provide supervision and care shall report such knowledge or suspicion to the department in the manner prescribed in subsection (2).

(b) Any person who knows, or who has reasonable cause to suspect, that a child is abused by an adult other than a parent, legal custodian, caregiver, or other person responsible for the child’s welfare, as defined in this chapter, shall report such knowledge or suspicion to the department in the manner prescribed in subsection (2).

(c) Any person who knows, or has reasonable cause to suspect, that a child is the victim of childhood sexual abuse or the victim of a known or suspected juvenile sexual offender, as defined in this chapter, shall report such knowledge or suspicion to the department in the manner prescribed in subsection (2).

(d) Reporters in the following occupation categories are required to provide their names to the hotline staff:

1. Physician, osteopathic physician, medical examiner, chiropractic physician, nurse, or hospital personnel engaged in the admission, examination, care, or treatment of persons;

2. Health or mental health professional other than one listed in subparagraph 1.;

3. Practitioner who relies solely on spiritual means for healing;

4. School teacher or other school official or personnel;

5. Social worker, day care center worker, or other professional child care, foster care, residential, or institutional worker;

6. Law enforcement officer; or

7. Judge.

The names of reporters shall be entered into the record of the report, but shall be held confidential and exempt as provided in s. 39.202.

***Section Continues…***

**39.202 Confidentiality of reports and records in cases of child abuse or neglect.**—

(1) In order to protect the rights of the child and the child’s parents or other persons responsible for the child’s welfare, all records held by the department concerning reports of child abandonment, abuse, or neglect, including reports made to the central abuse hotline and all records generated as a result of such reports, shall be confidential and exempt from the provisions of s. 119.07(1) and shall not be disclosed except as specifically authorized by this chapter. Such exemption from s. 119.07(1) applies to information in the possession of those entities granted access as set forth in this section.

(2) Except as provided in subsection (4), access to such records, excluding the name of the reporter which shall be released only as provided in subsection (5), shall be granted only to the following persons, officials, and agencies:

***Section Continues…***

(s) A physician licensed under chapter 458 or chapter 459, a psychologist licensed under chapter 490, or a mental health professional licensed under chapter 491 engaged in the care or treatment of the child.

***Section Continues…***

**39.203 Immunity from liability in cases of child abuse, abandonment, or neglect.**

(1)(a) Any person, official, or institution participating in good faith in any act authorized or required by this chapter, or reporting in good faith any instance of child abuse, abandonment, or neglect to the department or any law enforcement agency, shall be immune from any civil or criminal liability which might otherwise result by reason of such action.

(b) Except as provided in this chapter, nothing contained in this section shall be deemed to grant immunity, civil or criminal, to any person suspected of having abused, abandoned, or neglected a child, or committed any illegal act upon or against a child.

(2)(a) No resident or employee of a facility serving children may be subjected to reprisal or discharge because of his or her actions in reporting abuse, abandonment, or neglect pursuant to the requirements of this section.

(b) Any person making a report under this section shall have a civil cause of action for appropriate compensatory and punitive damages against any person who causes detrimental changes in the employment status of such reporting party by reason of his or her making such report. Any detrimental change made in the residency or employment status of such person, including, but not limited to, discharge, termination, demotion, transfer, or reduction in pay or benefits or work privileges, or negative evaluations within a prescribed period of time shall establish a rebuttable presumption that such action was retaliatory.

**39.204 Abrogation of privileged communications in cases involving child abuse, abandonment, or neglect.**

The privileged quality of communication between husband and wife and between any professional person and his or her patient or client, and any other privileged communication except that between attorney and client or the privilege provided in s. 90.505, as such communication relates both to the competency of the witness and to the exclusion of confidential communications, shall not apply to any communication involving the perpetrator or alleged perpetrator in any situation involving known or suspected child abuse, abandonment, or neglect and shall not constitute grounds for failure to report as required by s. 39.201 regardless of the source of the information requiring the report, failure to cooperate with law enforcement or the department in its activities pursuant to this chapter, or failure to give evidence in any judicial proceeding relating to child abuse, abandonment, or neglect.

**39.205 Penalties relating to reporting of child abuse, abandonment, or neglect.—**

(1) A person who is required to report known or suspected child abuse, abandonment, or neglect and who knowingly and willfully fails to do so, or who knowingly and willfully prevents another person from doing so, commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084. A judge subject to discipline pursuant to s. 12, Art. V of the Florida Constitution shall not be subject to criminal prosecution when the information was received in the course of official duties.

***Section Continues…***

(9) A person who knowingly and willfully makes a false report of child abuse, abandonment, or neglect, or who advises another to make a false report, is guilty of a felony of the third degree, punishable as provided in s. 775.082 or s. 775.083. Anyone making a report who is acting in good faith is immune from any liability under this subsection.

***Section Continues…***

[**Chapter 90:**](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0000-0099/0090/0090ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%2090)**Evidence Code**

*NOTE: This statute makes therapeutic records more difficult to access in court without client permission.*

**90.503 Psychotherapist-patient privilege.**

(1) For purposes of this section:

(a) A “psychotherapist” is:

1. A person authorized to practice medicine in any state or nation, or reasonably believed by the patient so to be, who is engaged in the diagnosis or treatment of a mental or emotional condition, including alcoholism and other drug addiction;

2. A person licensed or certified as a psychologist under the laws of any state or nation, who is engaged primarily in the diagnosis or treatment of a mental or emotional condition, including alcoholism and other drug addiction;

3. A person licensed or certified as a clinical social worker, marriage and family therapist, or mental health counselor under the laws of this state, who is engaged primarily in the diagnosis or treatment of a mental or emotional condition, including alcoholism and other drug addiction;

4. Treatment personnel of facilities licensed by the state pursuant to chapter 394, chapter 395, or chapter 397, of facilities designated by the Department of Children and Families pursuant to chapter 394 as treatment facilities, or of facilities defined as community mental health centers pursuant to s. 394.907(1), who are engaged primarily in the diagnosis or treatment of a mental or emotional condition, including alcoholism and other drug addiction; or

5. An advanced practice registered nurse licensed under s. 464.012, whose primary scope of practice is the diagnosis or treatment of mental or emotional conditions, including chemical abuse, and limited only to actions performed in accordance with part I of chapter 464.

(b) A “patient” is a person who consults, or is interviewed by, a psychotherapist for purposes of diagnosis or treatment of a mental or emotional condition, including alcoholism and other drug addiction.

(c) A communication between psychotherapist and patient is “confidential” if it is not intended to be disclosed to third persons other than:

1. Those persons present to further the interest of the patient in the consultation, examination, or interview.

2. Those persons necessary for the transmission of the communication.

3. Those persons who are participating in the diagnosis and treatment under the direction of the psychotherapist.

(2) A patient has a privilege to refuse to disclose, and to prevent any other person from disclosing, confidential communications or records made for the purpose of diagnosis or treatment of the patient’s mental or emotional condition, including alcoholism and other drug addiction, between the patient and the psychotherapist, or persons who are participating in the diagnosis or treatment under the direction of the psychotherapist. This privilege includes any diagnosis made, and advice given, by the psychotherapist in the course of that relationship.

(3) The privilege may be claimed by:

(a) The patient or the patient’s attorney on the patient’s behalf.

(b) A guardian or conservator of the patient.

(c) The personal representative of a deceased patient.

(d) The psychotherapist, but only on behalf of the patient. The authority of a psychotherapist to claim the privilege is presumed in the absence of evidence to the contrary.

(4) There is no privilege under this section:

(a) For communications relevant to an issue in proceedings to compel hospitalization of a patient for mental illness, if the psychotherapist in the course of diagnosis or treatment has reasonable cause to believe the patient is in need of hospitalization.

(b) For communications made in the course of a court-ordered examination of the mental or emotional condition of the patient.

(c) For communications relevant to an issue of the mental or emotional condition of the patient in any proceeding in which the patient relies upon the condition as an element of his or her claim or defense or, after the patient’s death, in any proceeding in which any party relies upon the condition as an element of the party’s claim or defense.

**History.**—s. 1, ch. 76-237; s. 1, ch. 77-77; s. 22, ch. 78-361; s. 1, ch. 78-379; s. 40, ch. 90-347; s. 1, ch. 92-57; s. 19, ch. 93-39; s. 475, ch. 95-147; s. 28, ch. 99-2; s. 5, ch. 99-8; s. 1, ch. 2006-204; s. 30, ch. 2014-19; s. 7, ch. 2018-106.

[**Chapter 394:**](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0300-0399/0394/0394ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%20394)**Mental Health** *(aka Baker Act)*

*491 practitioners are defined as providers under this statute.*

**394.453 Legislative intent.**

(1) It is the intent of the Legislature:

(a) To authorize and direct the Department of Children and Families to evaluate, research, plan, and recommend to the Governor and the Legislature programs designed to reduce the occurrence, severity, duration, and disabling aspects of mental, emotional, and behavioral disorders.

(b) That treatment programs for such disorders include, but not be limited to, comprehensive health, social, educational, and rehabilitative services to persons requiring intensive short-term and continued treatment in order to encourage them to assume responsibility for their treatment and recovery. It is intended that:

1. Such persons be provided with emergency service and temporary detention for evaluation when required;

2. Such persons be admitted to treatment facilities on a voluntary basis when extended or continuing care is needed and unavailable in the community;

3. Involuntary placement be provided only when expert evaluation determines it is necessary;

4. Any involuntary treatment or examination be accomplished in a setting that is clinically appropriate and most likely to facilitate the person’s return to the community as soon as possible; and

5. Individual dignity and human rights be guaranteed to all persons who are admitted to mental health facilities or who are being held under s. [394.463](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0300-0399/0394/Sections/0394.463.html).

(c) That services provided to persons in this state use the coordination-of-care principles characteristic of recovery-oriented services and include social support services, such as housing support, life skills and vocational training, and employment assistance, necessary for persons with mental health disorders and co-occurring mental health and substance use disorders to live successfully in their communities.

(d) That licensed, qualified health professionals be authorized to practice to the fullest extent of their education and training in the performance of professional functions necessary to carry out the intent of this part.

(2) It is the policy of this state that the use of restraint and seclusion on clients is justified only as an emergency safety measure to be used in response to imminent danger to the client or others. It is, therefore, the intent of the Legislature to achieve an ongoing reduction in the use of restraint and seclusion in programs and facilities serving persons with mental illness.

(3) The Legislature further finds the need for additional psychiatrists to be of critical state concern and recommends the establishment of an additional psychiatry program to be offered by one of Florida’s schools of medicine currently not offering psychiatry. The program shall seek to integrate primary care and psychiatry and other evolving models of care for persons with mental health and substance use disorders. Additionally, the Legislature finds that the use of telemedicine for patient evaluation, case management, and ongoing care will improve management of patient care and reduce costs of transportation.

**History.**—s. 2, ch. 71-131; s. 198, ch. 77-147; s. 1, ch. 79-298; s. 4, ch. 82-212; s. 2, ch. 84-285; s. 10, ch. 85-54; s. 1, ch. 91-249; s. 1, ch. 96-169; s. 96, ch. 99-8; s. 36, ch. 2006-227; s. 77, ch. 2014-19; s. 1, ch. 2016-231; s. 4, ch. 2016-241.

**394.455 Definitions.**

(7) “Clinical social worker” means a person licensed as a clinical social worker under s. 491.005 or s. 491.006.

(25) “Marriage and family therapist” means a person licensed to practice marriage and family therapy under s. 491.005 or s. 491.006.

(26). “Mental health counselor” means a person licensed to practice mental health counseling under s. 491.005 or s. 491.006.

(28). “Mental illness” means an impairment of the mental or emotional processes that exercise conscious control of one’s actions or of the ability to perceive or understand reality, which impairment substantially interferes with the person’s ability to meet the ordinary demands of living. For the purposes of this part, the term does not include a developmental disability as defined in chapter 393, intoxication, or conditions manifested only by antisocial behavior or substance abuse.

***NOTE: Suggested sections of this statute to read:***

[394.459](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0300-0399/0394/Sections/0394.459.html) Rights of patients.

[394.461](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0300-0399/0394/Sections/0394.461.html) Designation of receiving and treatment facilities and receiving systems.

[394.4612](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0300-0399/0394/Sections/0394.4612.html) Integrated adult mental health crisis stabilization and addictions receiving facilities.

[394.4615](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0300-0399/0394/Sections/0394.4615.html) Clinical records; confidentiality.

[394.4625](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0300-0399/0394/Sections/0394.4625.html) Voluntary admissions.

[394.463](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0300-0399/0394/Sections/0394.463.html) Involuntary examination.

[394.4655](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0300-0399/0394/Sections/0394.4655.html) Involuntary outpatient services.

[394.467](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0300-0399/0394/Sections/0394.467.html) Involuntary inpatient placement.

[394.4784](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0300-0399/0394/Sections/0394.4784.html) Minors; access to outpatient crisis intervention services and treatment.

**394.4784 Minors; access to outpatient crisis intervention services and treatment.**—For the purposes of this section, the disability of nonage is removed for any minor age 13 years or older to access services under the following circumstances:

(1) OUTPATIENT DIAGNOSTIC AND EVALUATION SERVICES.—When any minor age 13 years or older experiences an emotional crisis to such degree that he or she perceives the need for professional assistance, he or she shall have the right to request, consent to, and receive mental health diagnostic and evaluative services provided by a licensed mental health professional, as defined by Florida Statutes, or in a mental health facility licensed by the state. The purpose of such services shall be to determine the severity of the problem and the potential for harm to the person or others if further professional services are not provided. Outpatient diagnostic and evaluative services shall not include medication and other somatic methods, aversive stimuli, or substantial deprivation. Such services shall not exceed two visits during any 1-week period in response to a crisis situation before parental consent is required for further services, and may include parental participation when determined to be appropriate by the mental health professional or facility.

(2) OUTPATIENT CRISIS INTERVENTION, THERAPY AND COUNSELING SERVICES.—When any minor age 13 years or older experiences an emotional crisis to such degree that he or she perceives the need for professional assistance, he or she shall have the right to request, consent to, and receive outpatient crisis intervention services including individual psychotherapy, group therapy, counseling, or other forms of verbal therapy provided by a licensed mental health professional, as defined by Florida Statutes, or in a mental health facility licensed by the state. Such services shall not include medication and other somatic treatments, aversive stimuli, or substantial deprivation. Such services shall not exceed two visits during any 1-week period in response to a crisis situation before parental consent is required for further services, and may include parental participation when determined to be appropriate by the mental health professional or facility.

(3) LIABILITY FOR PAYMENT.—The parent, parents, or legal guardian of a minor shall not be liable for payment for any such outpatient diagnostic and evaluation services or outpatient therapy and counseling services, as provided in this section, unless such parent, parents, or legal guardian participates in the outpatient diagnostic and evaluation services or outpatient therapy and counseling services and then only for the services rendered with such participation.

(4) PROVISION OF SERVICES.—No licensed mental health professional shall be obligated to provide services to minors accorded the right to receive services under this section. Provision of such services shall be on a voluntary basis.

***NOTE: Suggested sections of this statute to read:***

[394.491](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0300-0399/0394/Sections/0394.491.html) Guiding principles for the child and adolescent mental health treatment and support system.

[394.493](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0300-0399/0394/Sections/0394.493.html) Target populations for child and adolescent mental health services funded through the department.

[394.494](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0300-0399/0394/Sections/0394.494.html) General performance outcomes for the child and adolescent mental health treatment and support system.

[**Chapter 397:**](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0300-0399/0397/0397ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%20397)**Substance Abuse Services** *(aka Marchman Act)*

**397.305 Legislative findings, intent, and purpose.**

(2) It is the goal of the Legislature to discourage substance abuse by promoting healthy lifestyles; healthy families; and drug-free schools, workplaces, and communities.

(3) It is the purpose of this chapter to provide for a comprehensive continuum of accessible and quality substance abuse prevention, intervention, clinical treatment, and recovery support services in the least restrictive environment which promotes long-term recovery while protecting and respecting the rights of individuals, primarily through community-based private not-for-profit providers working with local governmental programs involving a wide range of agencies from both the public and private sectors.

(4) It is the intent of the Legislature that licensed, qualified health professionals be authorized to practice to the full extent of their education and training in the performance of professional functions necessary to carry out the intent of this chapter.

**397.311 Definitions.**

(32) “Private practitioner” means a physician or a physician assistant licensed under chapter 458 or chapter 459, a psychologist licensed under chapter 490, or a clinical social worker, marriage and family therapist, or mental health counselor licensed under chapter 491.

(34) “Qualified professional” means a physician or a physician assistant licensed under chapter 458 or chapter 459; a professional licensed under chapter 490 or chapter 491; …

**397.501 Rights of individuals.**

(7) RIGHT TO CONFIDENTIALITY OF INDIVIDUAL RECORDS.

(e)1. Since a minor acting alone has the legal capacity to voluntarily apply for and obtain substance abuse treatment, any written consent for disclosure may be given only by the minor. This restriction includes, but is not limited to, any disclosure of identifying information to the parent, legal guardian, or custodian of a minor for the purpose of obtaining financial reimbursement.

2. When the consent of a parent, legal guardian, or custodian is required under this chapter in order for a minor to obtain substance abuse treatment, any written consent for disclosure must be given by both the minor and the parent, legal guardian, or custodian.

**397.675 Criteria for involuntary admissions, including protective custody, emergency admission, and other involuntary assessment, involuntary treatment, and alternative involuntary assessment for minors, for purposes of assessment and stabilization, and for involuntary treatment.**—A person meets the criteria for involuntary admission if there is good faith reason to believe that the person is substance abuse impaired or has a co-occurring mental health disorder and, because of such impairment or disorder:

(1) Has lost the power of self-control with respect to substance abuse; and

(2)(a) Is in need of substance abuse services and, by reason of substance abuse impairment, his or her judgment has been so impaired that he or she is incapable of appreciating his or her need for such services and of making a rational decision in that regard, although mere refusal to receive such services does not constitute evidence of lack of judgment with respect to his or her need for such services; or

(b) Without care or treatment, is likely to suffer from neglect or refuse to care for himself or herself; that such neglect or refusal poses a real and present threat of substantial harm to his or her well-being; and that it is not apparent that such harm may be avoided through the help of willing family members or friends or the provision of other services, or there is substantial likelihood that the person has inflicted, or threatened to or attempted to inflict, or, unless admitted, is likely to inflict, physical harm on himself, herself, or another.

History.—s. 6, ch. 93-39; s. 737, ch. 95-148; s. 23, ch. 2016-241.

**397.679 Emergency admission; circumstances justifying.**—A person who meets the criteria for involuntary admission in s. 397.675 may be admitted to a hospital or to a licensed detoxification facility or addictions receiving facility for emergency assessment and stabilization, or to a less intensive component of a licensed service provider for assessment only, upon receipt by the facility of a certificate by a physician, an advanced practice registered nurse, a psychiatric nurse, a clinical psychologist, a clinical social worker, a marriage and family therapist, a mental health counselor, a physician assistant working under the scope of practice of the supervising physician, or a master’s-level-certified addictions professional for substance abuse services, if the certificate is specific to substance abuse impairment, and the completion of an application for emergency admission.

History.—s. 6, ch. 93-39; s. 26, ch. 2016-241; s. 27, ch. 2018-106.

**397.6791 Emergency admission; persons who may initiate.**—The following persons may request a certificate for emergency assessment or admission:

(1) In the case of an adult, any professional who may issue a professional certificate pursuant to s. 397.6793, the person’s spouse or legal guardian, any relative of the person, or any other responsible adult who has personal knowledge of the person’s substance abuse impairment.

(2) In the case of a minor, the minor’s parent, legal guardian, or legal custodian.

History.—s. 6, ch. 93-39; s. 27, ch. 2016-241.

[**Chapter 415:**](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0400-0499/0415/0415ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%20415)**Adult Protective Services**

**415.1034 Mandatory reporting of abuse, neglect, or exploitation of vulnerable adults; mandatory reports of death.**

(1) MANDATORY REPORTING.—

(a) Any person, including, but not limited to, any:

1. Physician, osteopathic physician, medical examiner, chiropractic physician, nurse, paramedic, emergency medical technician, or hospital personnel engaged in the admission, examination, care, or treatment of vulnerable adults;

2. Health professional or mental health professional other than one listed in subparagraph 1.;

3. Practitioner who relies solely on spiritual means for healing;

4. Nursing home staff; assisted living facility staff; adult day care center staff; adult family-care home staff; social worker; or other professional adult care, residential, or institutional staff;

5. State, county, or municipal criminal justice employee or law enforcement officer;

6. Employee of the Department of Business and Professional Regulation conducting inspections of public lodging establishments under s. 509.032;

7. Florida advocacy council or Disability Rights Florida member or a representative of the State Long-Term Care Ombudsman Program; or

8. Bank, savings and loan, or credit union officer, trustee, or employee,

who knows, or has reasonable cause to suspect, that a vulnerable adult has been or is being abused, neglected, or exploited shall immediately report such knowledge or suspicion to the central abuse hotline.

(b) To the extent possible, a report made pursuant to paragraph (a) must contain, but need not be limited to, the following information:

1. Name, age, race, sex, physical description, and location of each victim alleged to have been abused, neglected, or exploited.

2. Names, addresses, and telephone numbers of the victim’s family members.

3. Name, address, and telephone number of each alleged perpetrator.

4. Name, address, and telephone number of the caregiver of the victim, if different from the alleged perpetrator.

5. Name, address, and telephone number of the person reporting the alleged abuse, neglect, or exploitation.

6. Description of the physical or psychological injuries sustained.

7. Actions taken by the reporter, if any, such as notification of the criminal justice agency.

8. Any other information available to the reporting person which may establish the cause of abuse, neglect, or exploitation that occurred or is occurring.

(2) MANDATORY REPORTS OF DEATH.—Any person who is required to investigate reports of abuse, neglect, or exploitation and who has reasonable cause to suspect that a vulnerable adult died as a result of abuse, neglect, or exploitation shall immediately report the suspicion to the appropriate medical examiner, to the appropriate criminal justice agency, and to the department, notwithstanding the existence of a death certificate signed by a practicing physician. The medical examiner shall accept the report for investigation pursuant to s. 406.11 and shall report the findings of the investigation, in writing, to the appropriate local criminal justice agency, the appropriate state attorney, and the department. Autopsy reports maintained by the medical examiner are not subject to the confidentiality requirements provided for in s. 415.107.

History.—s. 96, ch. 95-418; s. 10, ch. 97-98; s. 42, ch. 97-264; s. 256, ch. 98-166; s. 21, ch. 2000-263; s. 2, ch. 2000-318; s. 28, ch. 2000-349; s. 29, ch. 2015-31.

**415.1036 Immunity.**

(1) Any person who participates in making a report under s. 415.1034 or participates in a judicial proceeding resulting therefrom is presumed to be acting in good faith and, unless lack of good faith is shown by clear and convincing evidence, is immune from any liability, civil or criminal, that otherwise might be incurred or imposed. This section does not grant immunity, civil or criminal, to any person who is suspected of having abused, neglected, or exploited, or committed any illegal act upon or against, a vulnerable adult. Further, a resident or employee of a facility that serves vulnerable adults may not be subjected to reprisal or discharge because of the resident’s or employee’s actions in reporting abuse, neglect, or exploitation pursuant to s. 415.1034.

(2) Any person who makes a report under s. 415.1034 has a civil cause of action for appropriate compensatory and punitive damages against any person who causes detrimental changes in the employment status of the reporting party by reason of the reporting party’s making the report. Any detrimental change made in the residency or employment status of such a person, such as, but not limited to, discharge, termination, demotion, transfer, or reduction in pay or benefits or work privileges, or negative evaluations, within 120 days after the report is made establishes a rebuttable presumption that the detrimental action was retaliatory.

History.—s. 98, ch. 95-418; s. 30, ch. 2000-349.