



Board of Behavioral Sciences
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**RESPONSIBILITY STATEMENT FOR SUPERVISORS
 OF A PROFESSIONAL CLINICAL COUNSELOR INTERN**

*Title 16, California Code of Regulations (16 CCR) Section 1821 requires any qualified licensed mental health professional who assumes responsibility for providing supervision to those working toward a Professional Clinical Counselor (PCC) license to complete and sign, under penalty of perjury, the following statement prior to the commencement of any counseling or supervision. **NOTE: All references to "Intern" are equivalent to "Associate."***

Name of PCC Intern:	Last	First	Middle
Name of Qualified Supervisor:		Qualified Supervisor's Daytime Telephone Number:	

As the supervisor:

- 1) I am licensed in California and have been so licensed for at least two years prior to commencing this supervision. (16 CCR § 1821)(b)(1) and Business and Professions Code (BPC) § 4999.12(h)(1))

A. The license I hold is:

Licensed Professional Clinical Counselor

_____	_____
<i>License #</i>	<i>Issue Date</i>

Marriage and Family Therapist

_____	_____
<i>License #</i>	<i>Issue Date</i>

Licensed Clinical Social Worker

_____	_____
<i>License #</i>	<i>Issue Date</i>

*Licensed Clinical Psychologist

_____	_____
<i>License #</i>	<i>Issue Date</i>

*Licensed Physician and Surgeon who is certified in psychiatry by the American Board of Psychiatry and Neurology

_____	_____
<i>License #</i>	<i>Issue Date</i>

- **B. I have had sufficient experience, training, and education in professional clinical counseling to competently practice professional clinical counseling in California. (16 CCR§ 1821(b)(2))

C. I will keep myself informed about developments in professional clinical counseling and in California law governing the practice of professional clinical counseling. (16 CCR § 1821(b)(3))

- 2) I have and maintain a current and valid license in good standing and will immediately notify any intern under my supervision of any disciplinary action taken against my license, including revocation or suspension, even if stayed, probation terms, inactive license status, or any lapse in licensure, that affects my ability or right to supervise. (16 CCR § 1821(b)(4))
- 3) I have practiced psychotherapy or provided direct supervision of trainees, interns, or associate clinical social workers who perform psychotherapy for at least two (2) years within the five (5) year period immediately preceding this supervision. (16 CCR § 1821(b)(5))
- 4) I have had sufficient experience, training, and education in the area of clinical supervision to competently supervise interns. (16 CCR § 1821(b)(6))
- 5) I have completed six (6) hours of supervision training or coursework within the two-year period immediately preceding this supervision, and must complete such coursework in each renewal period while supervising. If I have not completed such training or coursework, I will complete a minimum of six (6) hours of supervision training or coursework within sixty (60) days of the commencement of this supervision, and in each renewal period while providing supervision. (16 CCR § 1821(b)(6)(A) and (B))
- 6) I know and understand the laws and regulations pertaining to both the supervision of interns and the experience required for licensure as a licensed professional clinical counselor. (16 CCR § 1821(b)(7))

- 7) I shall ensure that the extent, kind, and quality of counseling performed is consistent with the education, training, and experience of the intern. (16 CCR § 1821(b)(8))
- 8) I shall monitor and evaluate the extent, kind, and quality of counseling performed by the intern by direct observation, review of audio or video tapes of therapy, review of progress and process notes and other treatment records, or by any other means deemed appropriate. (16 CCR § 1821(b)(9))
- 9) I shall address with the intern the manner in which emergencies will be handled. (16 CCR § 1821(b)(10))
- 10) I agree not to provide supervision to an intern unless the intern is a volunteer or employed in a setting that meets both of the following: (A) lawfully and regularly provides mental health counseling or psychotherapy; (B) provides oversight to ensure that the intern's work at the setting meets the experience and supervision requirements and is within the scope of practice for the profession as defined in BPC Section 4999.20. (BPC § 4999.44)
- 11) If I am to provide supervision on a voluntary basis in a setting which is not a private practice, a written agreement will be executed between myself and the organization in which the employer acknowledges that they are aware of the licensing requirements that must be met by the intern, they agree not to interfere with my legal and ethical obligations to ensure compliance with these requirements, and they agree to provide me with access to clinical records of the clients counseled by the intern. (16 CCR § 1820(e)(3))
- 12) I shall give at least (1) one week's prior written notice to an intern of my intent not to sign for any further hours of experience for such person. If I have not provided such notice, I shall sign for hours of experience obtained in good faith where I actually provided the required supervision. (16 CCR § 1821(d))
- 13) I shall obtain from each intern for whom supervision will be provided, the name, address, and telephone number of the intern's most recent supervisor and employer. (16 CCR § 1821(e))
- 14) In any setting that is not a private practice, I shall evaluate the site(s) where an intern will be gaining hours of experience toward licensure and shall determine that: (1) the site(s) provides experience which is within the scope of practice of a licensed professional clinical counselor; and (2) the experience is in compliance with the requirements set forth in 16 CCR Section 1820 and 4999.44 of the Code. (16 CCR § 1821(f))
- 15) Upon written request of the Board, I shall provide to the board any documentation which verifies my compliance with the requirements set forth in 16 CCR Section 1821. (16 CCR § 1821(g))
- 16) I shall provide the intern with the original of this signed statement prior to the commencement of any counseling or supervision. (16 CCR § 1821(c))

I declare under penalty of perjury under the laws of the State of California that I have read and understand the foregoing and that I meet all criteria stated herein and that the information submitted on this form is true and correct.

Printed Name of Qualified Supervisor

Signature of Qualified Supervisor

Date

Mailing Address: Number and Street

City

State

Zip Code

The supervisor shall provide the intern being supervised with the original of this signed statement prior to the commencement of any counseling or supervision.

The intern shall submit this form to the board upon application for examination eligibility.

* Licensed Clinical Psychologists and Physicians certified in psychiatry are not required to comply with #5.

** Applies only to supervisors NOT licensed as a Licensed Professional Clinical Counselor.