

**Readopt with amendments Mhp 301.01, effective 6-24-15 (Document #10857), to read as follows:**

Mhp 301.01 Definitions. The following terms shall have the meaning indicated when used in this chapter:

- (a) “Applicant” means a person who seeks licensure as a mental health practitioner in New Hampshire;
- (b) “Candidate for licensure” means a person, not licensed as a mental health practitioner, who is receiving post-graduate supervision in mental health practice in New Hampshire in order to meet the licensing requirements;
- (c) “Face-to-face” means being in the physical presence or synchronous “Health Insurance Portability and Accountability Act (HIPAA)” compliant virtual presence of individuals involved in the supervisory relationship during either individual or group supervision;
- (d) “Group supervision” means one supervisor in the physical presence of 2 or more supervisees at the same time;
- (e) “Independent solo” means practice which is not performed as an employee of an employer who assumes full financial responsibility for the actions of that employee and furnishes the employee with a W-2 form pursuant to US Internal Revenue Service’s regulations. This term also includes “solo private mental health practice”;
- (f) “Individual supervision” means one supervisor in the physical or synchronous virtual presence of one supervisee; and
- (g) “Mental health practitioner” means mental health practitioner as defined in RSA 330-A:2, VII.

**Readopt with amendments Mhp 302.01, effective 6-24-15 (Document #10857), as amended effective 4-19-16 (Document #11076), to read as follows:**

Mhp 302.01 Pre-Licensure Supervised Practice.

- (a) Student interns or residents practicing per RSA 330-A:34, I(b) in a mental health discipline regulated by the board shall submit a completed “Candidate for Licensure: Supervision Agreement” described in Mhp 302.01(c), to the board at least 30 days prior to the end of the internship or residency if they wish to complete their supervised practice in the same location as their internship.
- (b) Upon the board’s receipt of the student intern or resident’s completed “Candidate for Licensure: Supervision Agreement” the following shall apply until the board issues a license for supervised practice:
  - (1) The applicant waiting for a supervision agreement shall be permitted to practice under the supervision of an individual licensed by the board and in good standing;
  - (2) The applicant waiting for a supervision agreement shall not work more than the 60 days allotted to obtain licensure; and
  - (3) The licensee supervising the applicant shall adhere to all requirements described in Mhp 302.03.

(c) Prior to beginning supervised practice as required by RSA 330-A:22, all candidates for licensed supervised practice and each supervisor shall complete and submit the “Candidate for Licensure: Supervision Agreement” form requiring the following:

- (1) The candidate for supervision to complete part I of the application as follows:
  - a. Indicating which of the following types of supervision the candidate is applying for:
    1. Pastoral psychotherapist;
    2. Clinical social worker;
    3. Clinical mental health counselor; or
    4. Marriage and family therapist;
  - b. The candidate’s full legal name;
  - c. The candidate’s home physical address;
  - d. The candidate’s home mailing address if different from the physical address;
  - e. The candidate’s home or cell phone number;
  - f. The candidate’s e-mail address;
  - g. The candidate’s employer’s name;
  - h. The candidate’s employer’s address;
  - i. The candidate’s employer’s phone number;
  - j. The candidate’s title at their place of employment;
  - k. Supervisor’s name at the place of employment;
  - l. List the college(s) or university(s) attended, the degree awarded, and date(s) of graduation;
  - m. Answer yes or no to the following questions and if applicable attach the requested document:
    1. “Have you ever been denied a certification or license you applied for?” If yes attach a detailed description including the denying board(s), date of denial(s), and reason for denial(s);
    2. “Have you ever been convicted of a felony or misdemeanor that has not been annulled?” If yes attach a detailed description of the offense(s) including the name of the court(s), date of conviction(s), and sentence(s) imposed; and

3. “Do you suffer from any emotional disturbance, mental illness, organic illness, or addictive disorder which presently impairs your ability to serve as a mental health practitioner?” If yes attach a detailed description of how your ability to practice is impaired;

n. Answer yes or no to the question “Do you have a “Candidate for Licensure: Supervision Agreement” on file with the Board?; and

o. Answer yes or no the question “Are you changing supervisors?” If you answer yes attach a detailed explanation as to why you are changing supervisors;

(2) The candidate’s supervisor shall complete part II of the application as follows:

a. The supervisor’s full legal name;

b. The supervisor’s employer’s name;

c. The employer’s address;

d. Employer’s phone number;

e. Employer’s e-mail address;

f. Supervisor’s title at place of employment;

g. The physical address of where the supervision will take place;

h. Answer yes or no to the question “Is the location where the supervision is to take place confidential?”;

i. Answer yes or no to the question “Does the candidate have a W-2 work relationship with the employer? (Independent contractor relationship not permitted)”;

j. Check all that apply to “I hold a current, valid license in NH as:

i. Pastoral psychotherapist;

ii. Clinical social worker;

iii. Clinical mental health counselor; or

iv. Marriage and family therapist”;

k. List license numbers;

l. Answer yes or no to the question “Have you been licensed in New Hampshire for more than 2 years?”

m. Answer yes or no to the following questions to ensure compliance with Mhp 302.01(c)(9):

1. Did the supervisor complete a “graduate level course in clinical supervision?”;
  2. Was the “clinical supervision approved by one of the following?
    - i. Association for clinical pastoral education;
    - ii. National Association of Social Workers;
    - iii. American Mental Health Counselors Association; or
    - iv. American Association for Marriage and Family Therapy”; and
  3. “Does the supervisor have twelve continuing education units (CEU’s) in clinical supervision through participation in a seminar or workshop was approved by a Category A sponsor listed in Mhp 402.02(a)(1).”;
- n. Attach documentation proving the yes answer checked in response to n. above;
- o. Answer yes or no to the question “Are you an employee of your supervisee’s clinical site?”;
- p. If you answer no to p. above attach a detailed statement which addresses the following:
1. Your relationship to the candidate’s employer or clinical site;
  2. Acknowledging that you will provide supervision at the candidate’s place of employment or the clinical site where the applicant delivers services, at a mutually convenient and ethically appropriate site, or using a virtual HIPAA compliant platform;
  3. That you have knowledge of candidate’s employer’s policies; and
  4. How any disagreements between the contracted supervisor and the agency supervisor will be resolved;
- q. Attach a copy of the written agreement with the candidate’s employer that allows you to review records, files, and any other documentation at the supervisee’s place of employment or clinical site. This agreement shall be signed and bear the date of the signature; and
- r. Certify the following statement by signing and dating the application:
- “I affirm that I have reviewed the candidate’s education record and it conforms with those outlined in Mhp 303, Mhp 304, Mhp 305, or Mhp 306, whichever refers to the appropriate candidate license type.
- Additionally, I have read and shall conform to the laws of New Hampshire and the Board of Mental Health Practice Administrative Rules Mhp 100-500.”
- (3) Under part III of the application the following shall be completed:

- a. Answer the question “What is the frequency of individual supervision? (One hour of supervision is 60 minutes)”;
- b. Answer the question “What is the length of individual supervision?”;
- c. The candidate and supervisor shall complete and attach a description of the goals of supervision that include at least the following:
  1. Ethics;
  2. Diagnosis and assessment;
  3. Theoretical applications;
  4. Community resources;
  5. Specific competence; and
  6. Cross cultural issues; and

(4) Under part IV of the application the following shall be competed:

- a. A candidate for licensure under this agreement shall certify by signing and dating the application under the preprinted statement:

“As a Candidate, I agree to provide my supervisor with all pertinent information concerning all clients and their care in order to make informed, ethical, and efficacious decisions for client care. I will inform my supervisor if I engage in any clinical activities outside of this agreement. I understand that all my clinical activity must be authorized by my supervisor. I will resolve all ethical dilemmas and practice issues as directed by my supervisor to the best of my ability. This supervision agreement does not remove any legal or civil responsibilities that I have for my actions related to this role.”;

- b. The supervisor shall certify by signing and dating the application under the following statement:

“As the Supervisor, I agree to provide my Candidate with appropriate and efficacious training, guidance, and direction to assure a valuable training experience to meet standards for the Candidate’s licensure. I acknowledge that, at a minimum, under RSA 330-A:22, I will hold weekly, one-hour face-to-face meetings at the site where the Candidate works, I will assume professional and legal responsibility for the Candidate, and I will review and have access to the Candidate’s clinical records. If I cease to supervise the Candidate, if my license becomes invalid, restricted, or sanctioned in NH or any other jurisdiction, or if I wish to terminate my legal and professional responsibility for the Candidate’s acts or omissions, I am responsible to notify the Board and the Candidate in writing, and that until I do, I remain responsible.”;

- c. In addition to b. above the supervisor of a marriage and family therapist shall certify by signing and dating the application a second time under the following statement:

“I acknowledge that, at a minimum, under RSA 330-A:22, I will hold weekly, one-hour face-to-face meetings and that I will assume professional and legal responsibility for the Candidate. I will review and have access to the Candidate's clinical records. When providing outside Marriage and Family group supervision under Mhp 303.17 (e)(3), I will hold group face-to-face meetings with no more than six Candidates.”; and

d. All candidates and supervisors shall sign and date the application, in addition to any other signatures already affected to the application, certifying the following statement:

“All statements and information contained in this form are true and correct to the best of my knowledge and belief. I acknowledge that the provision of false information on this form is a basis for denial of this application.”

(d) In addition to any attachments required by (c) above the candidate for licensure shall submit with the first “Candidate for Licensure: Supervision Agreement” their graduate transcripts in an envelope sealed and signed by the issuing school.

(e) The “Candidate for Licensure: Supervision Agreement” form shall:

- (1) Be legible;
- (2) Have all sections complete or designated as not applicable to the applicant; and
- (3) Be signed by the applicant and the applicant’s supervisor.

(f) Each “Candidate for Licensure: Supervision Agreement” shall be accompanied by:

- (1) The applicable fee as set forth in Plc 1002.29; and
- (2) A copy of the candidates transcripts described in Mhp 303 through Mhp 306.

(g) Any “Candidate for Licensure: Supervision Agreement” form shall be returned to the applicant as incomplete if:

- (1) Any portion of the form is illegible;
- (2) Any section of the form is incomplete;
- (3) The form is not signed where required by the applicant or supervisor who has completed that section; or
- (4) It is not accompanied by the documents described in Mhp 302.01(f).

(h) A “Candidate for Licensure: Supervision Agreement” shall be considered filed with the board as of the date the board has received:

- (1) A fully completed application form;
- (2) An official graduate school transcript in a signed, sealed envelope; and

(3) The candidate agreement review fee described in Plc 1002.29.

(i) Within 30 days of the date the “Candidate for Licensure: Supervision Agreement” is on file with the board, the board shall request the applicant to provide additional information or documentation determined to be needed to clarify the application or any materials related to the application.

(j) The board shall approve or deny the proposed “Candidate for Licensure: Supervision Agreement” within 60 days of receipt of the application and all supporting documents.

(k) The “Candidate for Licensure: Supervision Agreement” shall be denied if:

(1) The supervisor does not meet the requirements set forth in Mhp 302.01(c);

(2) The candidate does not meet the educational requirements of:

a. Mhp 303.01 for pastoral psychotherapists;

b. Mhp 304.01 for independent clinical social workers;

c. Mhp 305.01 and Mhp 305.02 for clinical mental health counselors; or

d. Mhp 306.01 for marriage and family therapists; or

(3) The candidate is a 1099 employee of an independent private practice.

(l) If the application is denied, the applicant shall be provided an opportunity to request a hearing for reconsideration pursuant to Mhp 208.16 on the deficiency issues identified by the board.

(m) Any such request for a hearing shall be submitted to the board within 30 days from the date of the board’s notification of denial or return from active military duty, failing which the denial shall be deemed final.

(n) Pursuant to RSA 330-A:22, IV, no hours of supervised practice shall be credited to the candidate until the “Candidate for Licensure: Supervision Agreement” has been approved by the board.

(o) The supervisor and the candidate for licensure shall notify the board, in writing, if any requirements contained in an approved “Candidate for Licensure: Supervision Agreement” cannot be met, and may request the board:

(1) To approve a new supervisor for the candidate, which shall be granted so long as the new proposed supervisor qualifies under the provision of this rule;

(2) To terminate the agreement, which shall require the candidate to reinstitute the process of pre-licensure supervised practice from the beginning; or

(3) Otherwise change a provision of the “Candidate for Licensure: Supervision Agreement”, which shall be granted so long as no proposed change results in a violation of RSA 330-A:22.

(p) A request to terminate or modify an approved “Candidate for Licensure: Supervision Agreement” shall be approved or denied within a reasonable time, not to exceed 60 days from the date the request has

been filed with the board. If denied, the candidate may seek reconsideration or appeal as in (l) and (m) above.

(q) Approval of a “Candidate for Licensure: Supervision Agreement” shall not guarantee licensure.

**Readopt with amendments Mhp 302.02, effective 6-24-15 (Document #10857), to read as follows:**

**Mhp 302.02 Character Qualifications of Applicant for Supervised Practice.**

(a) No application for licensure as a mental health practitioner shall be approved if the applicant is not of good professional character and reliability as set forth in RSA 330-A:10, VI.

(b) For the purpose of this subdivision a lack of good character shall be shown by one or more of the following:

(1) A finding by the board that the applicant, or someone acting on the applicant’s behalf, has submitted materially false information to the board in connection with the applicant;

(2) The presence of any complaints pending against a license or certificate issued by another licensing body or professional association, indicating that the applicant cannot be relied upon to practice competently, safely and honestly, or adhere to the ethical standards required by Mhp 501.02;

(3) Receipt of evidence of denial of a requested license or certificate by another licensing body or professional association or that the applicant is under active investigation by the board;

(4) Receipt of evidence that the applicant cannot be relied upon to practice competently, safely and honestly, or adhere to the ethical standards required by Mhp 501.02 due to:

a. Conviction of a felony or misdemeanor crime;

b. Any charge of felony or misdemeanor criminal conduct which has been filed with a court, but has not yet been finally resolved by a dismissal or judgment of “not guilty”;

c. Information from supervisors contained in the “Supervision Confirmation of Clinical Experience Form – Clinical Mental Health Counselors, Independent Clinical Social Workers, Pastoral Psychotherapist, or School Social Workers” as described in Mhp 302.05(b)(2)a. or the “Supervision Confirmation of Clinical Experience Form – Marriage and Family Therapists described in Mhp 302.05(b)(2)b.; or

d. Information provided by references as contained in the “Professional Reference Form” described in Mhp 302.05(c)(3) and required by Mhp 302.05(c)(3);

(5) Receipt of evidence of past or pending civil suits alleging malpractice, professional incompetence, or negligence, indicating that the applicant cannot be relied upon to practice competently, safely, and honestly; or

(6) Receipt of evidence of a condition or disorder which presently impairs the ability of the candidate to serve as a mental health practitioner.

**Adopt Mhp 302.03 and Mhp 302.04 to read as follows:**

Mhp 302.03 Supervisor Requirements.

- (a) The supervisor shall have successfully completed one of the following:
  - (1) A graduate level course in clinical supervision;
  - (2) A clinical supervision certificate approved by one of the following:
    - a. Association for Clinical Pastoral Education;
    - b. National Association of Social Workers;
    - c. American Mental Health Counselors Association; or
    - d. American Association of Marriage and Family Therapy; and
  - (3) Twelve continuing education hours in clinical supervision prior to entering the supervision relationship meeting the requirements set forth in Mhp 402.02(a)(1).
- (b) The applicant for licensure receiving post-graduate supervision shall be supervised by at least one mental health practitioner currently licensed in New Hampshire who:
  - (1) Has been practicing clinically for a period of at least 2 years;
  - (2) Is a non-probationary employee not under disciplinary investigation or pending disciplinary charges and has not had disciplinary action taken against their license in any state within the past 5 years;
  - (3) Is not related in any of the following ways to the post-graduate applicant to be supervised:
    - a. Spouse;
    - b. Parent, stepparent, parent-in-law, or step-parent-in-law;
    - c. Natural, foster, or adopted child or stepchild; or
    - d. Sibling, brother-in-law, or sister-in-law; and
  - (4) Does not have a dual relationship with the applicant which may impair their objectivity as described in Mhp 501.02(c).

Mhp 302.04 Issuance of a Full License to a Post-Graduate Supervisee. The board shall issue full licensure to an applicant for licensing receiving post-graduate supervisee when they have:

- (a) Met all the requirements required by Mhp 302.02;
- (b) Completed the post-graduate supervision described in Mhp 302.01;

(c) Submitted appropriate “Supervision Confirmation of Clinical Experience Form” as described in Mhp 302.05 (b)(2)a. and Mhp 302.05(b)(2)b.;

(d) Submitted any documents described in Mhp 302.05 not submitted at the time the board approved the post-graduate supervision; and

(e) An updated criminal history records check required by Mhp 302.05(a)(3).

**Readopt with amendment Mhp 302.03, effective 6/24/15 (Document #10857), and renumber as Mhp 302.05, to read as follows:**

Mhp 302.05 Licensure Application Process.

(a) Persons wishing to obtain licensure as a mental health practitioner in New Hampshire shall apply to the board by completing and submitting the following:

(1) The information described in Plc 304.03 on the “Universal Application for Initial Licensure” form and sign and date in accordance with Plc 304.05;

(2) For clinical mental health counselors, the following information shall be added to the information required in (1) above:

a. All names the applicant has ever been known by;

b. Yes or no to the question “Have you previously taken the National Clinical Mental Health Counselor Examination from the National Board for Certified Counselors (NBCC)?”; and

c. Yes or no to the question “Was your graduate program in clinical mental health counseling approved by the Council for Accreditation of Counseling or Related Educational programs (CACREP)?”;

(3) For pastoral psychotherapists the following information shall be added to the information required in (1) above:

a. All names the applicant has ever been known by; and

b. Yes or no to the question “Have you previously taken the New Hampshire Pastoral Psychotherapist Association (NHPPA) Pastoral Psychotherapist Licensure Examination: Clinical Theory and Practice?”;

(4) For independent clinical social workers, the following information shall be added to the information required in (1) above:

a. All names the applicant has ever been known by;

b. Yes or no to the question “Have you previously taken the American Association of State Social Worker Boards Clinical Examination?”; and

- c. Yes or no to the question “Was your graduate program in clinical social work approved by the Council on Social Work Education (CSWE)?”;

(5) For school social workers, the following information shall be added to the information required in (1) above:

- a. All names the applicant has ever been known by;
- b. Yes or no to the question “Have you previously taken the American Association of State Social Worker Boards Clinical Examination?”; and
- c. Yes or no to the question “Was your graduate program in clinical social work approved by the Council on Social Work Education (CSWE)?”;

(6) For marriage and family therapist, the following information shall be added to the information required in (1) above:

- a. All names the applicant has ever been known by;
- b. Yes or no to the question “Have you previously taken the Marriage and Family Therapist National Examination given by the Association for Marriage and Family Regulatory Boards?”; and
- c. Yes or no to the question “Was your graduate program in marriage and family therapy approved by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE)?”;

(7) Supporting documents required of all applicant’s, as specified in Mhp 302.05(b);

(8) The documents required for the criminal history records check required under RSA 330-A:15-a, II-IV, which include:

- a. A criminal history record release form, also known as form DSSP from the department of safety, available at [https://www.nhsp.dos.nh.gov/sites/g/files/ehbemt461/files/inline-documents/sonh/dssp2561\\_vgmedits.pdf](https://www.nhsp.dos.nh.gov/sites/g/files/ehbemt461/files/inline-documents/sonh/dssp2561_vgmedits.pdf);
- b. A completed fingerprint card or submission of Live Scan documentation. A fingerprint card may be obtained by contacting the board offices at (603) 271-2152. Livescan site locations are listed on the department of safety’s website at <https://www.certifixlivescan.com/category/fingerprinting-service-locations/new-hampshire/>; and
- c. A separate check made payable to “State of NH, Criminal Records” with the fee, as required by the department of safety;

(9) If the federal criminal history records check described in (8) above shows the existence of a criminal record in another state, the applicant shall obtain a detailed criminal record check directly from that state and provide it to the board;

(10) The results of one of the following examinations appropriate for the license the applicant is applying for:

- a. The New Hampshire Pastoral Psychotherapist Examination;
- b. The American Association of State Social Work Boards, Clinical Level Exam;
- c. The National Clinical Mental Health Counselor Exam; or
- d. The National Exam of the Association of Marriage and Family Regulatory Boards;  
and

(11) The initial license fee as required by Plc 1002.29.

(b) Each applicant for licensure shall submit with the application the following supporting documentation:

(1) One of the following supervised clinical experience forms:

- a. The “Summary of Supervised Clinical Experience Form – Clinical Mental Health Counselors, Independent Clinical Social Workers, Pastoral Psychotherapist, or School Social Workers” requiring the following information:

1. Applicant’s name;
2. Start and end date of each post-graduate supervised clinical experience;
3. Name of facility for each supervised clinical experience;
4. Name of supervisor for each supervised clinical experience;
5. Total hours of each individual supervision received for each supervised clinical experience;
6. Total hours of clinical experiences for each supervised experience;
7. Total hours of supervised clinical experience for all experiences; and
8. The applicant’s signature and date of signing below the following attestation:

“By signing below, I certify that the foregoing is correct to the best of my knowledge.”; or

- b. The “Summary of Supervised Clinical Experience Form – Marriage and Family Therapist” requiring the following information:

1. Applicant’s name;
2. Start and end date of each supervised clinical experience;
3. Name of facility for each supervised clinical experience;

4. Name of supervisor for each supervised clinical experience;
5. Total hours of each individual supervision received for each supervised clinical experience;
6. Total hours of client contact for each supervised clinical experience;
7. Total hours of clinical experiences for each supervised experience;
8. Total hours of supervised clinical experience for all experiences; and
9. The applicant's signature and date of signing below the following attestation:

“By signing below, I certify that the foregoing is correct to the best of my knowledge.”;

(2) One of the following supervisor's confirmation of clinical experience forms:

a. The “Supervisor's Confirmation of Clinical Experience Form – Clinical Mental Health Counselors, Independent Clinical Social Workers, and Pastoral Psychotherapists, or School Social Workers” requiring the following information:

1. The applicant's name, address including city, state, and zip code, signature, and date of signing under the following statement:

“I am applying for licensure as a clinical mental health counselor, independent clinical social worker, pastoral psychotherapist, or school social worker in the State of New Hampshire. The Board of Mental Health Practice requires confirmation of supervised clinical experience. This is your authority to release all information you have in your files.”

2. Name of facility where the post-masters supervised clinical experience took place;
3. Address of facility where the post-masters supervised clinical experience took place;
4. Applicant's title at the time of supervision;
5. Beginning and ending month and year of supervised clinical experience;
6. Hours per week of face-to-face individual supervision;
7. Total hours of face-to-face supervision;
8. Total hours of paid post-master's supervised clinical work experience, which is the number of hours worked per week times the number of weeks worked;

9. Answer yes or not to the question “If the supervision took place in New Hampshire was an approved “Candidate Licensure supervisor Agreement” on file in the board’s office prior to the commencement of supervision?”

10. Attach to this form a description of the supervisor methods and the types of issues dealt with during supervision, a description of the type of work performed by the applicant, and a description of the quality of work performed by the applicant completed by the supervisor;

11. Printed name of supervisor(s);

12. Title of supervisor at the time of supervision;

13. Supervisor’s business address;

14. Highest degree earned by the supervisor;

15. What is the supervisor licensed as including the state of licensure, license number, and date the license was issued;

16. Supervisor’s phone number; and

17. Supervisor’s signature and date of signing; or

b. The “Supervisor’s Confirmation of Clinical Experience Form – Marriage and Family Therapists” requiring the following information:

1. The applicant’s name, address including city, state, and zip code, signature, and date of signing under the following statement:

“I am applying for licensure as a marriage and family therapist in the State of New Hampshire. The Board of Mental Health Practice requires confirmation of supervised clinical experience. This is your authority to release all information you have in your files.”

2. Name of facility where the supervised clinical experience took place;

3. Address of facility where the supervised clinical experience took place;

4. Applicant’s title at the time of supervision;

5. Beginning and ending month and year of supervised clinical experience;

6. For the total clinical experience the number of hours per week, the number of weeks, and total hours;

7. For the client contact hours the number of hours per week, the number of weeks, and the total number of hours;

8. The total hours of individual supervision;

9. The total number of hours of group supervision;

10. Answer yes or not to the question “If the supervision took place in New Hampshire, was an approved “Candidate Licensure supervisor Agreement” on file in the board’s office prior to the commencement of supervision?”

11. Attach to this form a description of the supervisor methods and the types of issues dealt with during supervision, a description of the type of work performed by the applicant, and a description of the quality of work performed by the applicant completed by the supervisor;

12. Printed name of supervisor(s);

13. Title of the supervisor(s) at the time of supervision;

14. Supervisor(s) address;

15. Highest degree earned by the supervisor(s);

16. What is the supervisor(s) licensed as including the state of licensure, license number, and date the license was issued;

17. Yes or no to the question “I am an AAMFT” approved supervisor and if no what other type of approval does the supervisor(s) have;

18. Supervisor(s) phone number; and

19. Supervisor(s) signature and date of signing; and

(3) Three separate and distinct “Professional Reference Forms”, each signed by the person providing the reference, at least one of which is from a supervisor.

(4) The “Professional Reference Form” shall be provided by the board and require the following information:

a. The applicant for initial licensure shall complete the following information on the form before providing the form to the professional reference:

1. A check mark next to the type of application being applied for, independent clinical social worker, clinical mental health counselor, marriage and family therapist, or pastoral psychotherapist;

2. Their full legal name;

3. Their physical address including city, state, and zip code; and

4. Their signature and date of signing; and

b. After the applicant for licensure has completed the portion of the form described in a. above the applicant shall have the professional reference provide the following information on the form:

1. Their full legal name;
2. Their relationship with the applicant;
3. The length of time they have known the applicant;
4. A brief description of their knowledge of the applicant's professional and ethical behavior;
5. The name of the organization and the applicant's title and position at the organization when the professional reference worked with the applicant;
6. A brief description of the applicant's duties and responsibilities at the organization described in v. above;
7. The area of the applicant's specialties;
8. A brief description of any knowledge that the applicant:
  - a. Has been or is the subject of any malpractice or civil suit involving the practice of their profession;
  - b. Has been charged or convicted of a crime in any state or country, the disposition of which was other than acquittal or dismissal;
  - c. Has been or are any complaints or charges of violation of the ethical codes, professional misconduct, unprofessional conduct, incompetence, or negligence made or pending against them;
  - d. Has ever been required to surrender their license or certification; or
  - c. Has been found guilty of, or have entered into a consent decree regarding a violation of ethics codes, professional misconduct, unprofessional conduct, incompetence or negligence in any state or county by any licensing board or professional ethics body;
9. An attestation and certification that the reference believes that the applicant is an individual of good professional and moral character, and if the answer is no to provide an explanation;
10. A check mark next to the type of endorsement: without reservation, with reservation, or not recommended;
11. If the reference indicates with reservation or not recommended then provide a written explanation of that answer;
12. Their mailing address, phone number, title, degree, license or certification specialty, state(s) in which they are licensed, and license number(s); and
13. Signature and date of signing; and

c. The professional reference shall provide the “Professional Reference Form” to the applicant in a sealed envelope signed so it is evident it has not been tampered with.

(c) The application form and supporting documentation shall:

- (1) Be legible;
- (2) Have all sections complete or designated as not applicable to the applicant; and
- (3) Be signed by the applicant.

(d) Any application form shall be returned to the applicant as incomplete if:

- (1) Any portion of the form is illegible;
- (2) Any section of the form is incomplete; or
- (3) The form is not signed where required by the applicant or other person who has completed that section.

(e) An application shall be considered completed and filed with the board as of the date the board has received:

- (1) A fully completed application form;
- (2) All required supporting documentation specified in Mhp 302.03; and
- (3) Proof that the applicant’s check has been deposited and cleared, if applicable.

(f) Upon receipt of a completed application, the board shall either:

- (1) Within 30 days, request additional information or documentation; or
- (2) Within 60 days of receipt of the completed application and any additional information requested pursuant to (1) above, approve or deny the application for licensure.

(g) The board shall deny an application if:

- (1) The applicant has not passed the examinations as required by Mhp 302.5(a)(10);
- (2) The educational attainment of the applicant does not meet the standards for the licensure being applied for as set forth in one of the following:
  - a. Mhp 303.01 for pastoral psychotherapists;
  - b. Mhp 304.01 for social workers;
  - c. Mhp 305.01 for mental health counselors; or
  - d. Mhp 306.01 for marriage and family therapists;

(3) The prelicensure supervised practice of the applicant does not meet the requirements for licensure being applied for as set forth in one of the following:

- a. Mhp 303.02 for pastoral psychotherapists;
- b. Mhp 304.02 for social workers;
- c. Mhp 305.03 for mental health counselors; or
- d. Mhp 306.02 for marriage and family therapists;

(4) The applicant does not meet the character qualifications of Mhp 302.02; or

(5) The applicant has not paid the fee required by Plc 1002.29.

(h) If the application is denied, the applicant shall be provided an opportunity to request a hearing for reconsideration pursuant to Mhp 208.16 on the deficiency issues identified by the board.

(i) Any such request for a hearing shall be submitted to the board within 30 days from the date of the board's notification of denial or return from active military duty, failing which the denial shall be deemed final.

**Readopt with amendments Mhp 302.04, effective 6-24-15 (Document #10857), as amended effective 7-4-18 (Document #12571), and renumber as Mhp 302.06, to read as follows:**

Mhp 302.06 Application Process for Those Licensed in Another State for a Period of 5 Years or Less.

(a) Persons who wish to apply for a license as a pastoral psychotherapist and are already licensed in another state for 5 years or less shall:

- (1) Submit an application as required in Mhp 302.05 (a)(1) c.;
- (2) Pass the examination required in Mhp 303.05(a);
- (3) Meet the educational requirements in Mhp 303.01;
- (4) Meet the coursework requirements in Mhp 303.01;
- (5) Meet the supervision requirements in Mhp 303.02 if applying with a doctoral degree in clinical psychology;
- (6) Meet the supervision requirements in Mhp 303.03 ff applying with a license in mental health from another state;
- (7) Provide the board with the documents to receive a criminal history records check as described in Mhp 302.05(a)(8); and
- (8) Pay the initial license fee required in Plc 1002.29.

(b) Persons who wish to apply for a license as an independent clinical social worker and are already licensed in another state for a period of 5 years or less shall:

- (1) Submit an application as required in Mhp 302.05;
- (2) Pass the Association of Social Work Boards clinical level examination;
- (3) Meet the educational requirements in Mhp 304.01(a);
- (4) Meet the coursework requirements in Mhp 304.01(b);
- (5) Meet the supervision requirements in Mhp 304.02;
- (6) Provide the board with the documents to receive a criminal history records check as described in Mhp 302.05(a)(8); and
- (7) Pay the initial license fee required in Plc 1002.29.

(c) Persons who wish to apply for a license as a clinical mental health counselor and are already licensed in another state for a period of 5 years or less shall:

- (1) Submit an application as required in Mhp 302.05;
- (2) Pass the National Clinical Mental Health Counselor Examination;
- (3) Meet the educational requirements in Mhp 305.01;
- (4) Meet the course requirements in Mhp 305.02;
- (5) Meet the supervision requirements in Mhp 305.03;
- (6) Provide the board with the documents to receive a criminal history records check as described in Mhp 302.05(a)(8); and
- (7) Pay the initial license fee required in Plc 1002.29.

(d) Persons who wish to apply for a license as a marriage and family therapist and are already licensed in another state for a period of 5 years or less shall:

- (1) Submit an application as required in Mhp 302.05;
- (2) Pass the exam required in Mhp 306.03;
- (3) Meet the educational or course work requirements required in Mhp 306.01(a)(3) and Mhp 306.01(b);
- (4) Meet the coursework required in Mhp 306.01 (b);
- (5) Meet the supervision required in Mhp 306.02;

(6) Provide the board with the documents to receive a criminal history records check as described in Mhp 302.05(a)(8); and

(7) Pay the initial license fee required in Plc 1002.29.

(e) Complete applications that are submitted pursuant to (a)-(d) above and received by the board at least 10 business days prior to a regularly scheduled meeting shall be reviewed by the board at that meeting.

(f) The board shall review applications submitted under (a)-(d) above in accordance with Mhp 302.05(f)-(i).

(g) Notwithstanding (f) above, pursuant to RSA 330-A:26, II any applicant seeking licensure under this section shall be allowed to practice in New Hampshire not more than 30 days after the completed application is received by the board pending final approval or conditional denial of the license for other reason by the board.

**Adopt Mhp 302.07 to read as follows:**

Mhp 302.07 Application Process for Those Actively Licensed in Another State for a Period of 5 Years or More In Good Standing.

(a) Persons who have been actively licensed as a mental health professional in another state for 5 or more years in good standing who wish to apply for a license in the same discipline as a clinical social worker, clinical mental health counselor, marriage and family therapist, or pastoral psychotherapist shall:

(1) Submit a “Universal Application for Initial Licensure” as required in Mhp 302.05, checking the box marked “Fast Track Application”;

(2) Submit the documents required for a criminal records check, pursuant to RSA 330-A:15-a, II-IV, as required in Mhp 302.05(a)(8);

(3) Submit either:

a. Proof that the state the applicant is applying from accepts the same exam listed in Mhp 302.03(a)(10) for the relevant profession at the time the applicant was licensed by the state; or

b. The results of the examination to achieve licensure listed in Mhp 302.05(a)(10);

(4) Submit the initial license fee as required by Plc 1002.29;

(5) The name of the graduate school attended, and official transcript certified by a school official showing all coursework, type of degree granted, and date of degree; and

(6) Provide verification from all other states in which the applicant is licensed to practice directly from the issuing state.

(b) Complete applications that are submitted pursuant to (a) above and received by the board at least 10 business days prior to a regularly scheduled meeting shall be reviewed by the board at that meeting.

(c) The board shall review applications submitted under (a) above in accordance with Mhp 302.05(f)-(i).

(d) Notwithstanding (c) above, pursuant to RSA 330-A:26, II any applicant seeking licensure under this section shall be allowed to practice in New Hampshire not more than 30 days after the completed application is received by the board, pending final approval or conditional denial of the license for other reason by the board.

**Readopt with amendments Mhp 303.01, effective 6-24-15 (Document #10857), amended 3-25-17 (Document #12153), to read as follows:**

Mhp 303.01 Educational Requirements for Pastoral Psychotherapists. All applicants for licensure for pastoral psychotherapist shall have completed one of the following sets of requirements:

(a) Concentration in theological studies, by demonstrating the following:

(1) Have met the standards as defined by RSA 330-A:17, I – X;

(2) Hold the following degrees:

a. A baccalaureate degree from a regionally accredited college or university;

b. A Master of Divinity degree from a school of theology accredited by the American Association of Theological Schools or have met the theological body of knowledge as defined by the Association for Clinical Pastoral Educators and approved by the New Hampshire Pastoral Psychotherapist Association, available as noted in Appendix II; and

c. A doctoral degree in pastoral psychotherapy or psychology and clinical studies based on a program the content of which was primarily psychology, pastoral counseling or psychotherapy and clinical studies, or its equivalent in both subject matter and extent of training;

(3) The following areas of study shall be included as components of the academic degrees required in (2) above:

a. Theories of personality and personality development;

b. Interpersonal relations;

c. Marriage and family dynamics;

d. Group dynamics;

e. Personality and culture;

f. Psychopathology;

g. Psychology of religious experience;

h. Theories of counseling and psychotherapy;

- i. Personality assessment and statistics;
  - j. Theories of the pastoral office, including the history and theory of pastoral care;
  - k. Research methods,
  - l. Models of integration of psychology and spirituality; and
  - m. Orientation to the helping professions and ethics;
- (3) Are a member of and have maintained active membership in a denomination or faith group; and
- (4) Are a member of and have maintained active membership in the New Hampshire Pastoral Psychotherapist Association; or
- (b) Concentration in multidisciplinary studies by demonstrating the following:
- (1) Hold a current active license recognized by the NH board of mental health practice or NH board of psychologists; and
  - (2) The course of study has components that study a multidisciplinary core body of knowledge that includes the following:
    - a. “Area I: Core Clinical Theory” shall include but not be limited to:
      - 1. A minimum of 18 semester hours with courses in 2-6 making up the 18;
      - 2. Counseling and psychotherapy: theory and techniques of at least 6 hours;
      - 3. Group dynamics: theory and technique of at least 3 hours;
      - 4. Couples and family systems: theories and techniques of at least 3 hours;
      - 5. Social and cultural diversity of at least 3 hours;
      - 6. Elective courses of at least 3 hours shall include but not be limited to:
        - (i) Theories of human behavior: learning and personality development;
        - (ii) Appraisal, evaluation and diagnostic procedures;
        - (iii) Abnormal behavior;
        - (iv) Addictions; and
        - (v) Foundations of spiritually integrated psychotherapy; and
      - 7. Specialized technical studies with a minimum of 6 semester hours that includes the following topics:

- (i) Psychodynamic psychotherapies;
- (ii) Marriage and family systems;
- (iii) Humanistic psychotherapy;
- (iv) Transpersonal psychotherapy;
- (v) Cognitive therapy;
- (vii) Behavior therapy;
- (viii) Grief therapy;
- (ix) Group therapy; and
- (x) Post-modern and constructivist therapies; and

b. “Area II: Pastoral Counseling Foundations” which include but shall not be limited to:

1. Required graduate courses of a minimum of 21 semester hours with hours in 2 and 4 making up the 21:
2. Graduate courses:
  - (i) Sacred texts of at least 3 hours required;
  - (ii) Theology and theological ethics of at least 6 hours;
  - (iii) History of pastoral care and counseling;
  - (iv) Pastoral diagnosis; and
  - (v) Basic pastoral care; and
3. Elective courses of at least 6 semester hours in the following:
  - (i) History of one’s faith group; and
  - (ii) World religions or comparative religions studies shall include the following:
    - i. Spirituality and spiritual formation;
    - ii. Pastoral theology;
    - iii. Faith development;
    - iv. Theology of psychotherapy;

- v. Psychology of religion; and
- vi. Clinical pastoral education or pastoral care specialist training.

**Readopt with amendments Mhp 303.02, effective 6-24-15 (Document #10857), amended 3-25-17 (Document #12153), to read as follows:**

Mhp 303.02 Practical Experience for Pastoral Psychotherapists Who Graduated With a Doctoral Degree in Clinical Psychology.

- (a) Applicants shall have completed 2 years of supervised experience in pastoral psychotherapy.
- (b) A year of experience shall be not less than 1500 hours.
- (c) Of the 3000 hours, at least 1375 shall be clinical counseling hours, with at least 250 hours of individual face-to-face supervision.
- (d) The applicant shall give evidence of satisfactory completion of one unit of CPE accredited by the Association for Clinical Pastoral Education or a unit of training approved by the New Hampshire Pastoral Psychotherapist Association.
- (e) Supervision shall be done by at least 2 different New Hampshire state approved supervisors, at least one of whom shall be a licensed pastoral psychotherapist, pursuant to the requirements set forth in Mhp 302.01(c).
- (f) The supervised experience shall begin following the completion of the academic or coursework portion of the postgraduate studies in pastoral counseling.
- (g) The supervised experience shall be adequately divided to assure competence in intake and referral consultation, as well as individual, group, marriage, divorce, and family therapy.
- (h) Supervised experience shall not include class work, practicum experience, or other course-related experiences.
- (i) Supervisors shall not be related to the supervisee in any of the following ways:
  - (1) Spouse;
  - (2) Parent, stepparent, parent-in-law, or step-parent-in-law;
  - (3) Natural, foster, or adopted child or stepchild; or
  - (4) Sibling, brother-in-law, or sister-in-law; and
  - (5) Does not have a dual relationship with supervisee which may impair their objectivity as described in Mhp 501.02(c).
- (j) Independent private mental health practice shall not be considered supervised professional experience.

(k) If the supervised professional experience was in a private practice, then and the supervisee shall have a W-2 relationship with the site. A 1099 independent contractor relationship with the site shall not meet this requirement.

(l) Additional supervision may be obtained by a supervisee in order to meet the requirements of Mhp 303.02 (e).

**Adopt Mhp 303.03 and Mhp 303.04 and renumber existing Mhp 303.03 as Mhp 303.05, to read as follows:**

**Mhp 303.03 Practical Experience for Pastoral Psychotherapists Who Have a Mental Health License in Another State.**

(a) Applicants applying for pastoral psychotherapist with a concentration in theological studies shall:

- (1) Provide evidence of satisfactory completion of one unit of CPE approved by the New Hampshire Pastoral Psychotherapist Association; and
- (2) Have supervision completed by at least 2 different New Hampshire state approved supervisors, at least one of whom shall be a licensed pastoral psychotherapist.

(b) Applicants applying with multidisciplinary concentration shall:

- (1) Have completed 750 hours of supervised experience in pastoral psychotherapy;
- (2) Ensure that all 750 hours are clinical counseling hours completed through supervision by a board approved licensed pastoral psychotherapist supervisor;
- (3) Have completed 50 hours of face-to-face supervision by a board approved licensed pastoral psychotherapist supervisor;
- (4) Begin following attainment of a license granted by the NHBMHP or board of psychology and have completed the core body of knowledge; and
- (5) Not have a personal relationship with the supervisor as described in Mhp 302.03(b)(3).

**Mhp 303.04 Other Requirements for Pastoral Psychotherapists.** All applicants for pastoral psychotherapist license shall:

(a) Take and achieve a passing grade on the NHPPA Pastoral Psychotherapist Licensure Examination: Clinical Theory and Practice; and

(b) Hold an active membership in the New Hampshire Pastoral Psychotherapist Association.

**Repeal Mhp 303.04, effective 6-24-15 (Document #10857) as follows:**

~~[Mhp 303.04 Oral Examination Requirements for Pastoral Psychotherapists.~~

~~— (a) Once the applicant has passed the written New Hampshire Pastoral Psychotherapist Examination, he or she shall sit for the oral examination. The time and place for the oral examination shall be arranged by mutual consent of the applicant and the examiners. A passing grade shall be based on the applicant's ability to clearly articulate by way of case presentation the items detailed in (c) below.~~

~~— (b) Applicants shall be examined orally by the pastoral psychotherapist board member, 2 additional licensed pastoral psychotherapists, and any NH licensed mental health professional all of which have been selected by the board for the purpose and function to inquire extensively into areas of professional competency specified in (c) below.~~

~~— (c) Through an oral exam an applicant shall be able to:~~

~~(1) State the conceptual model from which he or she understands the dynamics of personality and interpersonal relationships and show familiarity with at least some of the other principal models, which he/she does not use;~~

~~(2) Demonstrate familiarity with the major contributions to the literature in this professional field, and be able to discuss the writings of several of the leading authors in the field;~~

~~(3) Describe the therapeutic methodology he/she may employ with various representative types of cases;~~

~~(4) Give evidence of insight into his/her own psychological dynamics by being able to articulate how and when such dynamics are at work;~~

~~(5) Give evidence of being able to articulate religious and spiritual issues as they apply to the psychotherapeutic process; and~~

~~(6) Present a plan for how and when she or he will use peer relationships to gain ongoing insight into the work of pastoral psychotherapy and to insure that she or he does not practice in isolation.~~

~~— (d) The examining committee shall submit a written recommendation to the full board for its determination as to whether the applicant meets the requirements of Mhp 303.06 (c) (1-6).]~~

**Readopt with amendments Mhp 304.02, effective 6-24-15 (Document #10857), to read as follows:**

Mhp 304.02 Practical Experience Requirements for Social Workers.

(a) Applicants shall have completed, at a minimum, 2 years of post-masters supervised clinical work experience as follows:

(1) A year of supervised clinical work experience shall be at least 1500 hours to have been completed within not less than 12 months and not more than 24 months, for a total of 3000 hours of work experience;

(2) The supervision shall have included a minimum of one hour per week of individual face-to-face supervision between the supervisor and the applicant for a total of 100 hours; and

(3) The supervision shall be completed between 2 and 4 years from the date the approved supervision began.

(b) Notwithstanding (a) above, an applicant holding a current master licensed alcohol and drug counselor (MLADC) license issued by the board of licensing for alcohol and other drug use professionals may, under RSA 330-A:18, III substitute their experience as an MLADC for up to 1500 hours of the work experience requirement under (a)(1) above and shall be permitted to substitute up to 50 face-to-face supervision hours under (a)(2) above.

(c) Acceptable clinical supervised experience shall require face-to-face contact with a supervisor who is responsible for the clinical development and guidance of the supervisee and is familiar with the supervisee's work and organized setting.

(d) Acceptable clinical supervised experience shall comply with the following:

(1) The supervision shall be from an individual meeting the specification set forth in Mhp 302.01(c);

(2) The supervisor shall be licensed in the state where the supervision takes place;

(3) The supervision shall occur on site where the applicant delivers services, at a mutually convenient and ethically appropriate site, or using a virtual HIPAA compliant platform;

(4) Supervised experience shall not include any hours cumulated prior to the conferral of the clinical graduate degree;

(5) The supervisee shall not utilize their own independent private mental health practice as an acceptable setting for supervised clinical work experience;

(6) If the supervised professional experience was in a private practice, then the supervisee shall have a W-2 relationship with the site. A 1099 independent contractor relationship with the site shall not meet this requirement;

(7) The supervisor shall not be related to the supervisee in any of the following ways:

a. As a spouse;

b. As a parent, stepparent, parent-in-law, or step-parent-in-law;

c. As a natural, foster or adopted child, or stepchild; or

d. As a sibling, brother-in-law, or sister-in-law; and

(8) The supervisor shall not have a dual relationship with supervisee which might impair their objectivity as described in Mhp 501.02(c).

**Readopt with amendments Mhp 304.03, effective 6-24-15 (Document #10857), to read as follows:**

Mhp 304.03 Examination for Social Workers.

(a) All applicants for licensure shall pass the clinical level exam distributed by the Association of Social Work Boards (ASWB).

(b) The following shall be submitted as evidence of a passing score on the ASWB clinical level examination:

(1) Written verification from ASWB sent to the board office; or

(2) A “Social Worker Request for Results of Exam Score Form” described in (c) below and completed by another jurisdiction and sent to the board office.

(c) Applicants wishing to take the clinical level exam shall complete and submit to the board a “Request To Sit For The Association of Social Work Boards Clinical Exam” form requiring the following information:

(1) The applicant’s name as it appears on the photo ID to be used at the test site;

(2) The applicant’s mailing address;

(3) The applicant’s home or cell phone number;

(4) The applicant’s e-mail address;

(5) The applicant’s date of birth;

(6) The applicant’s social security number for the purpose of child support enforcement pursuant to RSA 161-B:11;

(7) Yes or no to the question “I have an approved “Candidate for Licensure: Supervision Agreement” on file with the NH Board of Mental Health Practice;

(8) Yes or no to the question “Pursuant to Mhp 304.03(d), I have completed at least 18 months of clinical supervision”; and

(9) The applicant’s signature and date of signing.

(d) Applicants for social work licensure shall have worked under board approved supervision for at least 18 months prior to taking the examination.

**Readopt with amendment Mhp 305.01, effective 6/24/15 (Document #10857), to read as follows:**

**Mhp 305.01 Educational Requirements for Mental Health Counselors.**

(a) Applicants shall have a 60 semester hour master’s or doctoral degree in clinical mental health counseling from a Council for Accreditation of Counseling and Related Educational Programs (CACREP) accredited institution pursuant to RSA 330-A:19, I unless approved otherwise in (b) below.

(b) An applicant who did not attend a CACREP accredited institution may apply for licensure if:

- (1) They have been granted a master's degree, with a minimum of 60 credit hours, in clinical mental health counseling, or a doctoral degree in clinical mental health counseling from a school which is a regionally accredited institution of education;
- (2) The degree granted in (1) above consists of a course of study, which encompasses a minimum of 2 academic years, 4 semesters, of full time graduate study; and
- (3) The master's or doctoral program shall:
  - a. Be described as a complete 60 or more credit hour program in clinical mental health counseling in catalogues and brochures;
  - b. Specify the intent to educate and train counselors in mental health counseling;
  - c. Have clear authority and primary responsibility for the core and specialty areas;
  - d. Have an integrated, organized, sequence of study;
  - e. Have an identifiable body of students who are matriculated in that program for a degree; and
  - f. Include at least 700 hours of supervised practicum or internship appropriate to mental health counseling.

**Readopt with amendments Mhp 305.03, effective 6-24-15 (Document #10857), to read as follows:**

**Mhp 305.03 Practical Experience for Mental Health Counselors.**

- (a) Applicants shall have completed at least 2 years of post-master's or doctoral supervised clinical work experience in a mental health setting.
- (b) A year of supervised clinical work experience shall not be less than 1500 hours, which have been completed within not less than 12 months and not more than 24 consecutive months.
- (c) Notwithstanding (a) and (b) above, an applicant holding a current MLADC license issued by the board of licensing for alcohol and other drug use professionals may under RSA 330-A, III, substitute their experience as an MLADC for up to 1500 hours of the work experience requirement under (a)(1) above and shall be permitted to substitute up to 50 face-to-face supervision hours under (a)(2) above.
- (d) The supervision shall have provided for a minimum of one hour per week of individual face-to-face supervision between the supervisor and the applicant for a total of 100 hours.
- (e) Acceptable clinical supervised experience shall require face-to-face contact with a supervisor who is responsible for the clinical development and guidance of the supervisee and is familiar with the supervisee's work and organizational setting.
- (f) Supervision shall be provided pursuant to Mhp 302.01(c).
- (g) The supervisor shall be licensed in the state where the supervision takes place.

(h) Supervision shall occur on site where the applicant delivers services, at a mutually convenient and ethically appropriate site, or using a virtual HIPAA compliant platform.

(i) Supervised experience shall not include class work, practicum, or internship experience or other course related experiences.

(j) Supervisors shall not have a dual relationship with the supervisee such as a spouse, close relative, or therapist.

(k) Independent private mental health practice shall not be considered acceptable supervised professional experience.

(l) If the supervised professional experience was in a private practice, then the supervisee shall have a W-2 relationship with the site. A 1099 independent contractor relationship with the site shall not meet this requirement.

**Readopt with amendments Mhp 306.01, effective 6-24-15 (Document #10857), to read as follows:**

Mhp 306.01 Educational Requirements for Marriage and Family Therapists.

(a) Applicants for licensure as a marriage and family therapist shall:

(1) Have a master's degree or a doctoral degree in marriage and family therapy from a program accredited by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE);

(2) Have a master's degree or a doctoral degree in a mental health field from a regionally accredited institution and have completed a post-graduate training program accredited by COAMFTE; or

(3) Have a master's degree or a doctoral degree with a concentration in marriage and family therapy from a regionally accredited institution.

(b) Applicants that have a degree with a concentration in marriage and family therapy as noted in Mhp 306.01 (a)(3) shall complete the following coursework:

(1) At least 3 courses in marital and family studies, family development, and family interaction patterns across the life cycle of the individual as well as the courses or studies chosen from the following subject areas:

- a. Family life cycle;
- b. Theories of family development;
- c. Marriage or family sociology of the family;
- d. Families under stress;
- e. The contemporary family;

- f. Family in a social context;
- g. The cross-cultural family;
- h. Youth, adult, aging, and the family;
- i. Family subsystems; and
- j. Individual, interpersonal relationships, such as marital, parental, and sibling;

(2) The completion of at least 3 courses in marital and family therapy chosen from the following subject areas:

- a. Family therapy methodology;
- b. Family assessment;
- c. Treatment and intervention methods; and
- d. Overview of major clinical theories of marital and family therapy such as communications theory, contextual theory, experiential theory, object relations theory, strategic theory, structural theory, systemic theory, and transgenerational theory;

(3) The completion of one course in diagnosis;

(4) The completion of at least 3 courses in human development chosen from the following subject areas:

- a. Human development;
- b. Personality theory;
- c. Human sexuality;
- d. Psychopathology; and
- e. Behavior-pathology;

(5) The completion of at least one course in professional studies chosen from the following subject areas:

- a. Professional socialization and the role of the professional organization;
- b. Legal responsibilities and liabilities;
- c. Independent practice and interprofessional cooperation;
- d. Ethics; and
- e. Family law; and

(6) The completion of at least one course in research chosen from the following subject areas:

- a. Research design;
- b. Methods;
- c. Statistics; and
- d. Research in marital and family studies and therapy.

(c) The applicant shall have completed at least a one-year practicum or internship supervised by an American Association of Marriage and Family Therapy (AAMFT) approved supervisor prior to the completion of the master's degree. This experience shall total a minimum of 300 hours of face-to-face client contact hours with individuals, couples, and families for the purpose of assessment, diagnosis, and treatment. At least half of these client contact hours shall have been completed with couples and families.

(d) A minimum of one academic year of full-time academic graduate study in marriage and family therapy shall be completed in residence at the institution granting the degree, unless the program is accredited through COAMFTE.

(e) Whether graduate study was completed in residence shall be determined based on criteria which include the following:

- (1) Predominant modality shall be face-to-face instruction;
- (2) Advising and evaluation shall be done face-to-face;
- (3) Students shall have face-to-face access to a core of marriage and family counseling faculty whose primary time and employment responsibilities are to the institution; and
- (4) Students shall have face-to-face access to other students matriculated in the program.

**Readopt with amendments Mhp 306.02, effective 6-24-15 (Document #10857), to read as follows:**

Mhp 306.02 Post-Graduate Practical Experience for Marriage and Family Therapists.

(a) All applicants for licensure as a marriage and family therapist shall have completed at least 2 years of supervised experience in the practice of marriage and family therapy with a minimum of one hour per week of individual face-to-face supervision by a psychologist, clinical mental health counselor, independent clinical social worker, pastoral psychotherapist, or marriage and family therapist licensed in the state where the supervision takes place.

(b) A year of experience shall not be less than 1500 hours, to have been completed within not less than 12 and not more than 24 consecutive calendar months. The post-graduate experience shall total 3000 hours of experience.

(b) Notwithstanding (a) and (b) above, an applicant holding a current MLADC license issued by the board of licensing for alcohol and other drug use professionals may under RSA 330-A:21, III, substitute their experience as an MLADC for up to 1500 hours of the work experience requirement under (a)(1) above and shall be permitted to substitute up to 50 face-to-face supervision hours under (a)(2) above.

(d) As part of the 3000 hours, all applicants shall have completed 1000 hours of supervised face-to-face clinical client contact hours with individuals, couples, and families.

(e) For the 1000 hours of face-to-face contact hours required by Mhp 306.02(d), all applicants shall have 200 hours of face-to-face supervision from an AAMFT approved supervisor or AAMFT approved alternate supervisor.

(f) Applicants who do not work under the supervision of an AAMFT approved supervisor or approved alternate supervisor may contract for outside supervision in order to meet the requirements in Mhp 306.02(e) as follows:

(1) The outside supervisor and the supervisee's place of employment shall complete a contract stating:

- a. The nature of their relationship;
- b. The outside supervisor's regular access to case documentation;
- c. Communication procedures and frequency between the outside supervisor and the on-site supervisor;
- d. Steps to be taken by the supervisee and each supervisor during client emergency situations;
- e. Decision-making authority of supervisors; and
- f. That the approved AAMFT supervisor or approved alternate supervisor shall visit the candidate's worksite at least twice annually;

(2) The contract, in (1) above shall be filed with the "Candidate for Licensure: Supervisory Agreement"; and

(3) Both individual and group supervision hours shall be acceptable as follows:

- a. Individual supervision shall be face-to-face contact between one supervisor and up to 2 supervisees; and
- b. Group supervision shall be face-to-face contact between one supervisor and up to 6 supervisees.

(g) Graduates of master's and doctoral programs accredited by the COAMFTE may use up to 100 hours of their pre-degree supervision towards the requirement in Mhp 306.02(e). Graduates of COAMFTE programs may also use up to a total of 500 face-to-face client contact hours earned during their graduate program towards the requirement in Mhp 306.02(e). Students in marriage and family therapy doctoral programs who have a qualifying master's degree may use practicum and internship experience and supervision in the doctoral program toward these requirements.

(h) Independent private mental health practice shall not be considered supervised professional experience.

(i) If the supervised professional experience was in a private practice, then the supervisee shall have a W-2 relationship with the site. A 1099 independent contractor relationship with the site shall not meet this requirement.

(j) Supervisors shall not be related to the supervisee in any of the following ways:

- (1) Spouse;
- (2) Parent, stepparent, parent-in-law, or step-parent-in-law;
- (3) Natural, foster or adopted child, or stepchild; or
- (4) Sibling, brother-in-law, or sister-in-law; and

(k) The supervisor shall not have a dual relationship with supervisee which may impair their objectivity as described in Mhp 501.02(c).

(l) Alternative supervisors for both pre-graduation and post-graduate experience shall meet the following requirements:

- (1) Have a graduate degree in couple or marriage and family therapy or related mental health discipline;
- (2) Hold a NH license in a mental health profession;
- (3) Have taken 5 graduate courses or taught couple or marital and family therapy within or after the mental health professional degree used to qualify for licensure in NH as follows:
  - a. Four of the 5 graduate courses shall be clinical couples or marriage and family therapy theory courses or courses applying family therapy to a population or problem type;
  - b. One course in ethics; and
  - c. A course is a 3-credit semester system or a 4-credit quarter system course or 100 continuing education units post graduate degree taken or taught in marital and family therapy workshops or seminars;
- (4) Two years of full-time clinical experience post-licensure; and
- (5) The 30-hour full AAMFT Approved Supervisor Training Course.

**Readopt with amendments Mhp 306.03, effective 6-24-15 (Document #10857), to read as follows:**

Mhp 306.03 Examination Procedures for Marriage and Family Therapists.

(a) Applicants for licensure as a marriage and family therapist shall pass the national examination in marital and family therapy distributed by the Association of Marital and Family Regulatory Boards.

(b) Applicants for licensure as a marriage and family therapist who wish to take the exam shall submit to the board the “Request to Sit for the Marriage and Family Therapy Exam Form” provided by the board requiring the following:

- (1) The applicant’s name as it appears on the photo ID to be used at the test site;
- (2) The applicant’s mailing address;
- (3) The applicant’s home or cell phone number;
- (4) The applicant’s e-mail address;
- (5) The applicant’s date of birth;
- (6) The applicant’s social security number for the purpose of child support enforcement pursuant to RSA 161-B:11;
- (7) Yes or no to the question “I have an approved “Candidate for Licensure: Supervision Agreement” on file with the NH Board of Mental Health Practice;
- (8) Yes or no to the question “Pursuant to Mhp 304.03(d), I have completed at least 18 months of clinical supervision; and
- (9) The applicant’s signature and date of signing.

**Readopt with amendments Mhp 307, effective 6-24-15 (Document #10857), to read as follows:**

**PART Mhp 307 FEES**

Mhp 307.01 Required Fees. The fees required by the board shall be the fee specified in Plc 1002.29.

**APPENDIX**

<b>Rule</b>	<b>Statute Implemented</b>
Mhp 301.01	RSA 330-A:9, XIII
Mhp 302.01	RSA 330-A:22
Mhp 302.02	RSA 330-A:17 - 21
Mhp 302.03	RSA 330-A:17 - 21
Mhp 302.04	RSA 330-A:26
Mhp 302.05 (formerly Mhp 302.03)	RSA 330-A:17 - 21
Mhp 302.06 (formerly Mhp 302.04)	RSA 330-A:26
Mhp 302.07	RSA 330-A:26
Mhp 303.01	RSA 330-A:17, I-IX
Mhp 303.02	RSA 330-A:17 I-XI
Mhp 303.03	RSA 330-A:17 I-XI
Mhp 303.04 (repeal)	RSA 330-A:17, I-XI
Mhp 303.04	RSA 330-A:17 I-XI
Mhp 303.05 (formerly Mhp 302.05)	RSA 330-A:17 I-XI
Mhp 304.02 and Mhp 304.03	RSA 330-A:18, I-IV

<b>Rule</b>	<b>Statute Implemented</b>
Mhp 305.01	RSA 330-A:19, I-III
Mhp 305.03	RSA 330-A:19, I-III
Mhp 306.01	RSA 330-A:21; RSA 330-A:10, II
Mhp 306.02	RSA 330-A:21; RSA 330-A:10, II
Mhp 306.03	RSA 330-A:21; RSA 330-A:10, II
Mhp 307.01	RSA 330-A:12