

## Summary of Current 9.0 Approval Requirement Chart

Requirement	Provisional	Entry Level	Full Operating	DV Clinical Supervisor
DV Specific Training Hours	MA – 35 hrs. BA – 70 hrs.	MA – 77 hrs. BA – 112 hrs.	MA – 154 hrs. BA – 203 hrs.	No additional training hours beyond Full Operating Level
DV Experiential Hours (co- facilitation of dv treatment with approved provider)	MA with 1,000 post graduate general clinical hours requires 54 hrs. MA with less than 1,000 post graduate general clinical hours or BA requires 108 hrs. (36 weeks x 1.5 hr group = 54 hrs.)	MA – 108 hrs. BA – 216 hrs. (54 hrs. x 2 groups = 108 54 hrs. x 4 groups = 216)	MA – 162 hrs. BA – 324 hrs. (54 hrs. x 3 = 162 54 hrs. x 6 = 324)	75 hrs. in addition to Full Operating Level requirement
Supervision (Supervisor or staffings shall include victim advocate at least quarterly)	A minimum of 1 hr. per month of DV clinical supervision for up to 10 client contact hours, and 2 hrs. per month for 10 or more client contact hrs. or additional supervision as determined by supervisor. Licensed provisional providers are eligible to do peer consultation rather than supervision beginning their 2nd year of practice.	A minimum of 2 hrs. per month of DV clinical supervision or additional supervision as determined by supervisor. (Variance may be requested for rural areas.) Applicants may have less if small caseload.	Minimum of 2 hrs. per month of peer consultation required for all providers at this level, no clinical supervision required. (Applicants are required to have supervision based on size of caseload.)	Minimum of 2 hrs. per month of peer consultation required with another approved and licensed provider.
Continuing Education	14 hours per year	14 hours per year	28 hours every 2 yrs	28 hours every 2 yrs.
Additional/ Special requirements	Eligibility – Only for communities that demonstrate need, such as no existing provider, approval is only for that community. A letter of support for approval from the provider that co-facilitated treatment.	None	None	Licensed mental health professional 21 hrs. training in clinical supervision within past 5 yrs.

MA = masters degree in counseling related field

BA = bachelors degree in human services related field

## Summary of Proposed 9.0 Approval Requirement Chart

Domestic Violence Requirements	Provisional Level	Entry Level	Full Operating Level	DV Clinical Supervisor
Training Hours	Masters Degree – 35 hours	Masters Degree – 42 hours Baccalaureate Degree – 77 hours	Masters Degree – 50 hours Baccalaureate Degree – 100 hrs.	No additional training hours beyond Full Operating Level.
Experiential Hours (co-facilitation of DV services with approved provider)	Masters Degree with 1,000 post graduate general clinical hours requires 30 hrs. Masters Degree with less than 1,000 post graduate general clinical hours.	Masters Degree – 54 hours Baccalaureate Degree – 108 hours	Masters Degree – 80 hours Baccalaureate Degree – 160 hours	75 hours in addition to Full Operating Level requirement
Supervision (Supervisor or staffings shall include victim advocate at least quarterly)	Tiered based on the number of direct clinical contact hours.	Tiered based on the number of direct clinical contact hours.	Tiered based on the number of direct clinical contact hours.	Tiered based on the number of direct clinical contact hours.
	<b>Direct Clinical Contact Hours per Month</b>	<b>Direct Clinical Contact Hours per Month</b>	<b>Direct Clinical Contact Hours per Month</b>	<b>Direct Clinical Contact Hours per Month</b>
	<b>Minimum Supervision Hours per Month</b>	<b>Minimum Supervision Hours per Month</b>	<b>Minimum Supervision Hours per Month</b>	<b>Minimum Supervision Hours per Month</b>
	0-59 60-79 80 or more	0-59 60-79 80 or more	0-59 60-79 80 or more	0-59 60-79 80 or more
	2 3 4	2 3 4	2 3 4	2 3 4
Continuing Education	14 hours per year	14 hours per year	20 hours every 2 yrs	28 hours every 2 yrs.
Additional/ Special requirements	Competency Assessment  Eligibility – Only for communities that demonstrate need, such as no existing provider, approval is only for that community. A letter of support for approval from the provider that co-facilitated treatment.	Competency Assessment	Competency Assessment	Competency Assessment  Hold licensure or certification as a Psychiatrist, Licensed Psychologist, Licensed Clinical Social Worker, Licensed Professional Counselor, Licensed Marriage and Family Therapist, Clinical Psychiatric Nurse Specialist or Licensed Addiction Counselor, and not be under current disciplinary action.

Please note that this chart does not include all of the proposed revisions. Please refer to the Revised Section 9.0 for more information.