REPLY TO

ORIGINAL: 2178

STEWART J. GREENLEAF 27 NORTH YORK ROAD WILLOW GROVE, PA 19090-3419 (215) 657-7700 (215) 560-6052 FAX

SENATE BOX 203012 THE STATE CAPITOL HARRISBURG, PA 17120-3012 (717) 787-6599 (717) 783-7328 FAX



Senate of Bennsylvania May 9, 2001

Eva Cheney, Board Counsel State Board of Social Workers, Marriage and Family Therapists, and Professional Counselors 116 Pine Street; P.O. Box 2649 Harrisburg, PA 17105-2649

Dear Attorney Cheney:

JUDICIARY, CHAIRMAN LAW AND JUSTICE, VICE CHAIRMAN **APPROPRIATIONS** BANKING AND INSUPANCE CONSUMER PROTECTION AND PROFESSIONAL LICENSURE ENVIRONMENTAL RESOURCES AND ENERGY SOUTHEASTERN PA TRANSPORTATION AUTHORITY (SEPTA) TASK FORCE ON DECEDENTS ESTATES TASK FORCE ON DOMESTIC RELATIONS LAW TASK FORCE ON ADOPTION LAW

COMMITTEES

I am writing today in reference to the proposed licensure regulation for marriage and family therapists and professional counselors (#16A-694) recently issued by the State Board to implement the provisions of Act 136 of 1998.

Please find enclosed copies of letters I have recently received from various practitioners (Registered Art Therapist, Certified Addictions Counselor, Pastoral Counselor and Supervisor of a Department of Counselors) highlighting concerns that the proposed regulation effective precludes a significant number of qualified counseling professionals and therapists from licensure. Their concerns center, in part, around the limited number of fields included in the proposed definition of "field closely related to the practice of professional counseling" and "field closely related to the practice of marriage and family therapy." I fully support an expansion of this definition to ensure that Certified Addiction Counselors with Masters Degrees, Pastoral Counselors, Practitioners who are Supervisors and Registered Art Therapists may obtain licensure under this regulation.

As presently crafted, this regulation would prevent well-qualified and experienced counseling professionals and therapists from obtaining a license. I believe many of the concerns and comments raised by these individuals are also addressed in written comments submitted by the Pennsylvania Alliance of Counseling Professionals.

While I realize that the official public comment period has expired, I would greatly appreciate if the State Board would give full consideration to the issues raised in the attached letters as it moves forward with developing the final-form regulation.

Thank you for your consideration of this matter.

Sincerely,

SJG:ep

cc: Independent Regulatory Review Commission

Senator Clarence D. Bell, Chair of Senate Consumer Protection &

Professional Licensure Committee

Enclosures

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Willow Grove

CHERYL J. TURETSKY, M.A., ATR

Maple Glen, PA 19002 (215) 540-0467

April 15, 2001
Reference #: 16A-964
RECEIVED

Eva Cheney, Board Counsel
State Board of Social Workers, Marriage and Family
Therapists, and Professional Counselors
161 Pine Street
P.O. Box 2649

APR 2 4 2001

HARRISBURG

Harrisburg, PA 17105-2649

Dear Attorney Cheney:

I wish to express my gratefulness for the hard work that the State Board has done in developing proposed Regulations for Professional Counselors. This work clearly reflects an intention to protect mental health consumers, permit choice of diverse services and permit qualified practitioners to provide services.

I concur with the views expressed by the Pennsylvania Alliance Counselling Professional (PACP), regarding the proposed Professional Counselor Regulations. PACP's most recent response to the proposed Regulations in the form of 'Concerns' 'Suggestions' very much reflects mv ошп concerns and recommendations.

I am a Registered Art Therapist. I have had 1000 hours of preprofessional clinical experience during graduate school, as well as 1000+ supervised hours of postgraduate professional experience. I graduated MCP-Hahnemann in May of 1997 with a degree in Creative Arts in Therapy and an advanced sub-specialty in art therapy. Course work included at least two semesters and sometimes more of at least five of the educational requirements specified by proposed subsection 49.2.

I have worked with adults, children, senior adults and adolescents both pre-professionally during my masters program, and professional during post-masters supervised experience. My professional supervision has mostly been by the person who was Director of my Creative Arts in Therapy graduate program at MCP-Hahnemann and, after that, by a psychiatrist working at the particular mental health setting in which I practiced. Much of my supervision has been individual and in person. Also, there have been a good number of group supervision in person sessions during this period.

CHERYL J. TURETSKY, M.A., ATR Registered Art Therapist

1419 Patrick Court Maple Glen, PA 19002 (215) 540-0467

> April 15, 2001 Reference #: 16A-964 Page 2

I worked very hard during my graduate studies. I also put much effort into my postgraduate professional work; additionally, the satisfaction surveys during my post-graduate professional work show my clients have been satisfied. I very much believe my graduate studies are sufficient for, and that my post-graduate supervised professional experience should count towards, licensure. I believe it wound be inequitable if this hard work and effort would be rendered meaningless. It would not be rendered meaningless if the views expressed by the PACP in their most recent response to the proposed Professional Counselor Regulations in the form of 'Concerns' and 'Suggestions' were to be utilized and/or adopted.

Thank you very much for your consideration of this very important matter.

Sincerely,

Cheryl J. Turetsky, M.A., ATR

cc: Independent Regulatory Review Commission 333 Market Street, 14th Floor

Senator Greenleaf
27 North York Road
Willow Grove, PA 19090-3419 the Serve Consumer Protection of
Representative Civera
232 Long Lane
Uppper Darby, PA 19082
Fax: 610-352-3389

Please let Chairman Dell of
Protection of Protecti



Kevin J. Drab, M.A., M.Ed., CAC Diplomate
Associate Director, Addictions Counseling Sciences Program
College of Nursing and Health Professions
Mail Stop 507 • 245 N. 15th Street • Philadelphia, PA 19102-1192
TEL 215.762.6922 • FAX 215.762.7889 • E-MAIL Kevin.Drab@drexel.edu
www.mcphu.edu

Senator Stewart J. Greenleaf Senate District 12 Senate Box 203012 Harrisburg, PA 17120-3012

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HARRISBURG

April 12, 2001

Dear Senator Greenleaf,

Ref: (a) Act 136, The Professional Counselor Licensing Bill

(b) State Board of Social Workers, Marriage and Family Therapists and Professional Counselors, Proposed Rulemaking (Licensure) to Act 136. Pennsylvania Bulletin, 31(12), 1547-1668, March 24, 2001. (ref. # 16A-694).

I am writing as a concerned citizen (living in Montgomery County), as well as a behavioral healthcare professional who has worked in many positions as a counselor and clinical director for more than 21 years, and currently teaches in and manages MCP Hahnemann University's undergraduate degree program which grants a Bachelors of Science in Addictions Counseling Sciences.

I am deeply concerned regarding the noninclusion of Certified Addictions Counselors with Masters Degrees in the Proposed Rulemaking (ref. b) for Act 136 (ref. a). This exclusion of a clearly identifiable and competent group of counseling professionals delivering specialized services to the State's large population of individuals with drug and alcohol problems is puzzling to say the least. The fact that at least ten other states (e.g., Maine, Minnesota, New Hampshire, New Jersey, New Mexico, North Dakota, Rhode Island, Tennessee, Texas, and Wyoming) already license Addictions Counselors, while others are considering similar licensure, raises additional questions as to the absence of this profession from the licensure proposal.

There are two primary questions which must be asked in the process of amending Act 136 via the Proposed Rulemaking:

1. What criteria is being used which would differentiate the qualifications and functions of Masters Degreed Certified Addictions Counselors to such an extent that they would not be considered comparable to those professions included in this proposal, e.g., Social Workers, Rehabilitation Counselors, Art Therapists, Music Therapists, Dance Therapists, Drama Therapists, and Clinical Mental Health Counselors, Masters Degreed Psychologists, and National Certified Counselors? There is nothing in Act 136 or the proposed changes which would suggest why Masters Degreed Certified Addictions Counselors are not equally acknowledged with the other professions mentioned.

2. What will be the long-term impact of this exclusion of the Addictions Counseling profession from Act 136 be on the continuation and improvement of effective drug and alcohol treatment and prevention in the Commonwealth, and on the retention of talented and skilled individuals in this field? A particularly serious outcome will result from the trend in managed care organizations to not reimburse the services of non-licensed professionals, effectively leading to the decline of addictions specialists and their programs, as they become unable to compete in the marketplace. Who among those professions in the proposal is qualified to treat drug and alcohol problems, or clinically supervise the provision of such services?

There is no question that Certified Addictions Counselors, particularly at the Masters Level, have met nationally-based standards (established by the International Certification & Reciprocity Consortium) of education and continuing education, demonstrated competencies through work performance, a written exam, an oral exam, clinical supervision, and adhere to a code of professional ethics equal in breadth and sophistication to any of behavioral health care professions included in the proposal. The details of this indepth professional certification process and the standards of conduct for Addictions Counselors are readily available from The Pennsylvania Certification Board (contact Mary Jo Mather at 717-540-4455).

The issue, therefore, lies not in the nature or qualifications of the Addictions Counseling profession, but in how and why a decision was reached to ignore the information I have described, and exclude a group of dedicated, competent professionals from Act 136. I would further observe that these are individuals who, on a daily basis, provide critically essential services to deeply troubled clients and their families, which impact both those individuals as well as the well-being of the local community, and society as a whole – no more and no less important a function than those of the professions included in the proposal being discussed.

I would be pleased to discuss this matter further with you, and will conclude with my suggestions for facilitating Act 136 to become a more viable vehicle for serving the Commonwealth's behavioral healthcare needs by making the following additions to the Proposed Rulemaking:

- 1. Acceptance of Certified Addictions Counselors with Masters Degrees in the list of professions to be recognized.
- 2. The grandparenting regulations accept individuals with appropriate Masters Degrees and Certified as Addictions Counselors in the State of Pennsylvania.
- 3. Acceptance of the International Certification & Reciprocity Consortium's national exam as fulfilling the examination prerequisite.

Sincerely,

Kevin L'Drab, M.A., M.Ed., CAC Diplomate
Assistant Professor of Mental Health Sciences

cc: Rep. Lawrence Curry
State Board of Social Workers, Marriage and Family Therapists and Professional Counselors
Pennsylvania Certification Board



765 Skippack Pike, Suite 300 Blue Bell, PA 19422 (215) 643-5826 Fax (215) 643-6750 RECTIMED

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HARRISBURG

April 11, 2001

Senator Stewart Greenleaf Senate Consumer Protection and Professional Licensure Committee Senate Box #203012 Harrisburg, PA 17120-3012

Dear Senator Greenleaf,

In 1994 when I was Pastoral Care Director at Holy Redeemer Hospital, you graciously met with me and a colleague of mine in your Willow Grove office. We urged you then to support the Licensure Bill for Professional Counselors. Thank you for your efforts which contributed to the passage of that law.

Now as the Proposed Licensing Regulations (reference number 16A-964) are being discussed, I ask your help again. As a certified Pastoral Counselor with the American Association of Pastoral Counselors (AAPC), I strongly urge the recommendations listed on the following page. I also request that you bring these to the attention of Senator Clarence Bell, Chair and the other members of the Senate Consumer Protection and Professional Licensure Committee.

Thank you, Senator Greenleaf, for your attention to these recommendations. I have further included for your information:

 a copy of another state's (Arkansas) law recognizing AAPC as a qualified credentialing body for their licensed professional counselors

- sample questions from the Pastoral Counselor Examination to demonstrate its clinical rigor

As a full-time therapist with the Samaritan Counseling Center since 1995, I provide competent professional counseling to many individuals. It is appropriate that I - and others in my profession - have the opportunity to be licensed as professional counselors in the state of Pennsylvania. Thank you again for your consideration and assistance.

Sincerely.

Mary Dyer Hubbard, M.S.

Pastoral Counselor



765 Skippack Pike, Suite 300 Blue Bell, PA 19422 (215) 643-5826 Fax (215) 643-6750

Proposed Licensure Regulations for Professional Counselors and Marriage and Family Therapists

(reference #16A-964)

Recommendations:

- 1) In naming fields "closely related to the practice of professional Counseling" (§49.1) expand the list to include pastoral counseling
- 2) In approving "continuing education requirements for grandparenting" (49.15(5)(iv)) include courses approved by the American Association of Pastoral Counselors (AAPC)
- 3) In recognizing certification through national counseling organizations, include certification as a Fellow or a Diplomate through the American Association of Pastoral Counselors
- 4) In recognizing national licensing examinations for counselors, include the Pastoral Counselors Examination administered through the Pastoral Counselors Examination Board (PCEB)

PCEB

Pastoral Counselors Examination Board 1701 S. Prospect, Suite 19, Champaign, IL 61820 217-356-4357 or decondan@msn.com

September 20, 2000

To Whom It May Concern:

This is to certify that Mary (Dyer) Hubbard successfully passed the Pastoral Counselors Examination in 1995. The Pastoral Counselors Examination has been standardized to the norms of pastoral counselors throughout the United States.

Sincerely,

Daniel C. Henderson

President

Pastoral Counselors Examination Board

SAMPLE ITEMS

1. According to Erikson's psychosocial view of 7. Which of the following tests is primarily intended development, the struggle between industry to measure psychopathology? and inferiority occurs during A. Minnesota Multiphasic Personality A. school age. Inventory B. middle age. B. Edwards Personal Preference Inventory C. infancy. C. The Personality Orientation Inventory D. adolescence. D. Sixteen Personality Factors Test 2. Which of the following is not an axis dimension of 8. African-American family structures differ from the DSM-IV? many middle-class European American family structures in that A. age of syndrome appearance B. physical disorder A. there are seldom two parents. C. psychiatric syndrome displayed B. the extended family is the prevalent D. psychological stressors model. C. they are usually matriarchal. 3. In The Living Human Document, Charles Gerkin D. generational differences are relatively proposes a(n) _ __ approach to unimportant. pastoral counseling. 9. Edwin H. Friedman studied the emotional life of A. hermeneutic synagogues and churches under the rubrics B. client centered of C. analytical D. structural A. Jungian psychology. B. Freudian psychology. 4. The core idea at the root of the meaning of C. Alderian psychology. ministry is D. Systemic family therapy. A. status. 10. Ron Taffel and Rosemary Masters identify certain B. worship. variables that limit the ability a woman has C. proclamation. to change her life (e.g. in therapy). Which of D. service. the following is not one of those variables? 5. In the context of sexual or domestic violence in A. Number of children the family, Marie Fortune argues that B. Economic viability C. Perceived empathic support D. Level of education A. justice is the precondition for forgiveness. B. mediation is a valuable pastoral resource. 11. According to the AAPC Code of Ethics, it is C. forgiveness allows victims to forget their permissible to use testimonials from clients abuse. D. the perpetrator's religious conversion is a when advertising one's services primary goal. A. if the client provides written release for the testimonial. 6. Statistically, the means of three or more samples B. if no individual client names are used in may be compared simultaneously by using the advertisement. C. if the ad copy has been reviewed before A. the chi-square test. publication by the AAPC. B. the t test.

C. the analysis of variance.

D. the correlation coefficient.

D. none of the above.

CASE SCENARIO

John is a 50 year old white married male. He is referred to you by a managed care company where he has had an initial assessment interview by a psychologist prior to assignment. The client says to you that he is seeking therapy because he is anxious about decisions he has to make in life. He is considering a career change. In fact, he has made several career changes in his life, seeming to do well in each field until he decides to try something different. His speech is rapid and he frequently changes subjects. The report from the managed care company psychologist who did the assessment says, "John is clearly manic-depressive, as evidenced by his pressured speech." You are suspicious of the correctness of the diagnosis.

- 1. Given the above information, what additional information can be sought immediately in order to confirm the correctness of the diagnosis.
 - A. The reputation of the person doing the initial assessment.
 - B. The effectiveness of medication in treating the disorder.
 - C. Indications of the cycle involved in the bi-polar illness.
 - D. Test results from either an MMPI or MMPI-2.
- 2. It is determined by further questioning that the bi-polar diagnosis is probably not valid. Given the above information, which of the following is most likely to be an alternative diagnosis.
 - A. Schizophrenia
 - B. Attention Deficit Disorder
 - C. Schizotypal Personality Disorder
 - D. Dependent Personality Disorder
- 3. Which of the following spiritual issues would most likely be involved with this person,
 - A. Issues related to how he fits in the world.
 - B. Issues related to how we relates to other people.
 - C. Issues related to how well he avoids doing inappropriate things.
 - D. Issues related to his extending grace to himself.
- 4. In the above scenario, the client had been asked by the psychologist doing the initial assessment to make an appointment with a psychiatrist for evaluation regarding the appropriateness of lithium. He indicates to you that he has not made the appointment and asks if you think he needs to follow through. If you were to answer his question, the best answer would be
 - A. To advise him to delay the appointment until you have done more testing and evaluation.
 - B. To advise him to follow what the managed care representative had asked him to do.
 - C. To advise him that the diagnosis given at his initial assessment was probably wrong and that he should go back to the managed care company for further assessment.
 - D. To advise him not to go for medical evaluation since the diagnosis is clearly wrong.
- 5. Given only the above information, the most appropriate treatment plan for you would focus on would involve
 - A. Further assessment
 - B. Medication and further assessment
 - C. Career counseling
 - D. Relaxation training

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ARKANSAS

BOARD OF EXAMINERS IN COUNSELING

RULES AND REGULATIONS
ACT 593 AMENDED BY ACT 244 OF 1997

Preface

The Arkansas Board of Examiners in Counseling interprets the intent of the Legislature, which passed as A.C.A. 17-27-101 through 104. (An Act to amend Arkansas Act 593 to provide for the licensure and regulation of Marriage and Family Therapists, now numbered Act 244 of 1997) and the Governor who signed it into law to be for the protection of the public welfare and in the public interest.

Therefore, the Board of Examiners in Counseling shall in all its deliberations and all its adopted rules and regulations diligently pursue goals most consistent with the public interest, and shall, at all times, apply the provisions of A.C.A 17-27-101, et seq. and the rules and regulations adopted from time to time in a fair and impartial manner.

1. GENERAL INFORMATION

1.1 Description of Organization

The Arkansas Board of Examiners in Counseling is composed of nine (9) members appointed by the Governor to staggered terms of three years. The composition of the Board shall include six (6) licensed or licensable counselors, (three practicing counselors, three counselor educators or supervisors, (one of which shall also be a licensed marriage and family therapist, if available), and one (1) non-licensed individual who represents the general public. The seven are recommended to the governor by November 1 each year by the Executive Committee of the Arkansas Counseling Association (ArCA). One (1) licensed marriage and family therapist shall be recommended to the governor by the Board of Directors of the Arkansas Association for Marriage and Family Therapists (ArAMFT). One (1) non-licensed member shall represent the over sixty populations and is selected by the governor from the general population.

Practicing counselors are defined, by the American Counseling Association, as individuals who apply mental health, psychological, or human development principles, through cognitive, affective, behavioral or systemic intervention strategies, that address wellness, personal growth, or career development, as well as pathology.

Counselor educators are defined, in accordance with the American Counseling Association's (ACA) 1995 Code of Ethics and Standards of Practice, as counselors who are responsible for developing, implementing, and supervising educational programs and are skilled as teachers and practitioners. They are knowledgeable regarding the ethical, legal, and regulatory aspects of the profession, are skilled in applying that knowledge, and make students and supervisees aware of their responsibilities. Counselors conduct counselor education and training programs in an ethical manner and serve as role models for professional behavior. Individuals

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101 Livingston Court

N. Wales, PA 19454

April 14, 2001

REVIEW COMMESSOR APR 2 0 2001

HARRISBURG

Honorable Stewart Greenleaf

Senate Box 203012

Harrisburg, PA 17120-3012

Re: Proposed Licensure Regulations (16A-694)

Dear Senator Greenleaf:

The Pennsylvania Alliance of Counseling Professionals has submitted recommendations to correct a few areas of the Licensure requirements so that qualified counseling professionals are not excluded because of a few provisions.

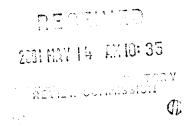
I am concerned that I will not qualify if changes are not made because I am a Supervisor of a Department of Counselors. I have a Master's in Counseling Psychology and a Bachelor's from Penn State University in Rehabilitation Education. I have six years of formal education and I hold certifications as a Certified Rehabilitation Counselor, Certified Case Manager and Certified Disability Case Manager. I maintain each certification by completing 80 to 100 continuing education units for each certification every 5 years. I use my counseling skills everyday in my position as a Supervisor. I do not believe that I could have successfully trained and mentored counselors in my Department without being a qualified and professional Counselor

Therefore, I am urging you to adopt the changes in the proposed regulations so that I can be eligible for licensure. Thank you very much for your time and assistance in this very important matter.

Sincerely.

Susan Zurick, M.Ed., CRC, CCM, CDMS

Case Management Supervisor



101 Livingston Court North Wales, PA 19454

April 12, 2001

Eva Cheney, Board Counsel
State Board of Social Workers, Marriage and Family Therapists, and Professional
Counselors
116 Pine Street
P.O. Box 2649
Harrisburg, PA 17105-2649

Subject: Proposed Licensure Regulations (16A-694)

Dear Attorney Cheney:

I am a Case Management Supervisor who is a 1981 graduate of Temple University's Master's Degree program in Counseling Psychology. My Bachelor's degree is in Rehabilitation Counseling from The Pennsylvania State University. As a Case Management Supervisor, I have successfully supervised, trained, and mentored counselors for the past eleven (11) years. Prior to becoming a supervisor, I counseled physically disabled adults overcome major impairments and develop a functional lifestyle which included competitive employment. I have read the proposed regulations for licensure of professional counselors that were published in the Pennsylvania Bulletin on March 24, 2001. Even though I am generally pleased with the proposed regulations, I am very concerned about a number of specific provisions that are included. Specifically, I am concerned about the following issues:

- 1. The limited number of fields included in the proposed definition of a "field closely related to the practice of professional counseling' [in § 49.1] will exclude from licensure many well-qualified and experienced professional counselors who meet all of the other licensure requirements. The list should be expanded to include more degree titles and a list of course work that would define a degree as being related to the practice of professional counseling should be developed.
- 2. The proposed experience requirement for grandparenting [§ 49.15(4)] is unfair. By requiring that qualifying practice consist of 15 hours per week with 10 hours of direct client contact, the proposed regulations for licensure by exemption (grandparenting) would unfairly and unnecessarily deny licensure to many well-qualified, experienced practitioners. Among those persons who would unfairly and unnecessarily be eliminated under this proposed regulation are: an experienced counselor who has been promoted to a supervisory or administrative position; an experienced counselor who is now an educator, someone, such as a

school counselor or college counselor, who works 9 months per year; an experienced retired counselor who maintains a part-time practice; an experienced counselor who has voluntarily cut back on practice (perhaps to raise a family or care for an elderly parent; and an experienced counselor who has been reassigned to less direct client contact because of being unable to get a license in the past. The proposed requirement needs to be significantly reduced, or preferably eliminated.

- 3. Many current graduate students and recent graduates will be unable to meet the internship requirements set forth in § 49.2(9) of the proposed regulations because many counselor preparation programs will be unable to provide these experiences in a timely fashion. For a limited period of time (perhaps 5 years), 6 semester hours of practicum/internship should be accepted in lieu of the proposed requirement.
- 4. Under the proposed regulations [§ 49.15(5)(iv)(C)] legitimate continuing education hours will be disallowed for licensure by exemption (grandparenting) if they were not approved by one of a very few organizations named in the proposed regulations. The regulation should be changed to include a greater variety of qualifying continuing education.
- 5. Exposure to group supervision for professional counselors is not allowed by the proposed regulations [§ 49.13(b)(5)]. Group supervision should be permitted.
- 6. The proposed regulations that require that the first 1800 hours of supervised clinical experience required for licensure be done by a professional counselor [§§ 49.13(b)(2) and 49.13(b)(4)(i)] disallows quality supervision that may already be being provided by a professional in a related discipline. This proposed requirement is unfair to all those who are currently working in the field and receiving supervision from someone other than a professional counselor. There is no reason that that supervised clinical experience should not count toward licensure. The requirement that the first 1800 hours of supervised clinical experience be supervised by a professional counselor should be stricken. Also, until people are licensed, it is not clear who would be regarded as a professional counselor. Clarification is needed.
- 7. The proposed regulations that require that the first 1800 hours of supervised clinical experience to be provided by a professional counselor [§§ 49.13(b)(2) and 49.13(b)(4)(i)] is likely to have an adverse effect in rural areas of the state where there are limited numbers of professionals and where supervision by professionals in related fields is the norm rather than the exception. Provision for a waiver of this requirement should be provided for those in rural areas or in other extraordinary circumstances.

The Pennsylvania Alliance of Counseling Professionals has submitted comments that address each of these concerns more thoroughly and that provide concrete suggestions for changes in the proposed regulations. I concur with those suggestions and urge the Board to adopt them.

Sincerely,

Susan Zurick, M.Ed., CRC, CCM, CDMS Case Management Supervisor

cc: Independent Regulatory Review Commission
Senate Consumer Protection and Professional Licensure Committee
House Professional Licensure Committee
Senator Stewart J. Greenleaf
Representative Kate Harper