

# Important Announcement

from



NATIONAL BOARD FOR  
CERTIFIED COUNSELORS.

## Upcoming change to NBCC Educational Requirements

Beginning  
January 1, 2022,  
NBCC will require a  
master's degree or  
higher from a  
CACREP-accredited  
counseling program.

### Timing of This Announcement

In recognition of those counselors who have contributed to the profession, NBCC has created a transition plan that allows time for institutions and professionals to prepare for this important change.

### Effect on Current National Certified Counselors

This decision will not affect current NCCs or counselors who become certified by December 31, 2021. Any individual certified prior to January 2022 can hold the certification as long as they continue to adhere to NBCC policies and procedures. Current NCCs will still be able to apply for specialty certifications.

### Effect on Current Students in Counseling Programs

Students graduating from programs accredited by the Council for Accreditation of Counseling & Related Educational Programs (CACREP) are not affected. Beginning January 2022, any student graduating from a program not accredited by CACREP will not be eligible to apply for the National Certified Counselor (NCC). These students must apply prior to January 2022 in order to be considered for national certification.

### Purpose of the Change

The NBCC Board of Directors listened over many years as counselors described difficulty obtaining licensure, relocating to other states and obtaining employment through federal programs. These concerns compelled NBCC to consider how we could help position the counseling profession for continued growth and recognition. We strongly believe that we owe it to future counselors to refine the profession so that they have increased opportunities.

### Relevant Background

Professional advocacy efforts have included discussions with legislative leaders who have shared important concerns regarding how counselors may serve their constituents. In reality, we all share the common goal of providing quality services to those in need.

Federal legislators have clearly communicated that inconsistent educational standards represent an impediment to inclusion in federal programs. They further indicated that state licensure in its variety of forms does not address the need for a uniform method for recognizing qualified professionals.

### Support for Counselor Education Programs

NBCC created a unique assistance initiative for regionally accredited institutions seeking first-time CACREP accreditation for master's-level counseling programs. Funds are awarded to university programs in three phases.

### Expected Outcome: Enhanced Portability

NBCC believes that requiring a degree from a CACREP-accredited program will provide greater portability. The lack of uniformity in academic requirements in state licensure laws negatively affects counselors' ability to relocate. Establishing a high baseline degree requirement can provide a consistent educational foundation that may facilitate improved options when moving to another state.

**From:** Jason King, PhD  
**To:** "Paul Gore"; [msteinagel@utah.gov](mailto:msteinagel@utah.gov)  
**Cc:** [DOPLWeb@utah.gov](mailto:DOPLWeb@utah.gov)  
**Subject:** RE: A professional opinion related to Clinical Mental Health Counselor licensure  
**Date:** Monday, February 23, 2015 7:18:00 PM

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Hello Director Steinagel,

You may notice that Dr. Gore copied me on his email to you in which he expressed concerns about the influence of The Council for Accreditation of Counseling & Related Educational Programs (CACREP). My assumption is that Dr. Gore wanted to advise me of these concerns because of my position as Chair of the DOPL Clinical Mental Health Counselor board. Please understand that my response here is solely speaking for myself and does not represent any formal opinion from the CMHC board. However, I believe a response is necessary to clarify some misunderstandings and misrepresentations contained in Dr. Gore's email. My statements and opinions represent my collective experience as former Director of Training, Professor of Practice, Area Chair, and Lead Faculty for Argosy University Utah campus and for the University of Phoenix Utah campus (they both have clinical mental health counseling programs, one of which is not accredited by CACREP).

I commend Dr. Gore, his faculty, and his students who "are strongly in favor of diversity and inclusion in counselor training" and I further commend their master's level program that "subscribes to the highest standards of content and pedagogy in this field." Such principles are also promoted by CACREP.

In his email, Dr. Gore expresses concern about "guild-driven initiatives." However, I thank him for what I perceive as a compliment in what was intended as a disparaging statement because CACREP is a guild by definition as it is "an organized group of people who have joined together because they share the same job or interest." CACREP is a national organization created by and administered by counselors, not psychologists (as Dr. Gore and his faculty identify by degree and licensure), to ensure that the knowledge, skills, and professional dispositions that characterize the counseling profession are protected and promoted. I would assume that Dr. Gore would agree that his own professional national association – the American Psychological Association (APA) – is a "guild" as it exclusively shares the same job interests of psychologist instead of social workers, marriage and family therapists, vocational rehabilitation counselors, substance use disorder counselors, and clinical mental health counselors.

I am confused by Dr. Gore's comment and concern about what he deems CACREP's "exclusionary initiatives." If a national accreditation body does not have restrictive standards, then what is the purpose of such body? Would Dr. Gore share the same level of concern towards the University of Utah Department of Educational Psychology's "exclusionary initiatives" that deny student admission for candidates with below threshold ACT scores, substandard GPA, or deficient professional comportment? His department's website for the master's degree in clinical mental health counseling prides itself on their exclusionary initiatives that "limit our numbers" to "selecting only 6-12 students per year." Without these proper exclusionary initiatives, Dr. Gore's program would compromise its self-promoted "individualized attention," "close supervision," and their student's perception of being "well-known among the faculty." Essentially these exclusionary initiatives

promote program integrity and serve a positive function.

Similarly, DOPL promotes exclusionary initiatives to protect the public by denying licensure applicants or by revoking licensees who fail to adhere to basic competencies related to professional conduct. Moreover, Dr. Gore's profession of psychology, as enforced by DOPL, holds firmly to its exclusionary initiatives that restrict applicants to become a licensed psychologist in Utah to candidates having earned a doctoral degree accredited by the APA. How is that standard any different than if DOPL were to require CMHC candidates to have a CACREP-accredited master's degree in counseling? Given these considerations I hope that we do not assume that "exclusionary initiatives" are inherently problematic or undesired – as I perceive that is how Dr. Gore presents them in his email to you.

Please allow me to further comment on other statements from Dr. Gore with the intent to provide clarity so that DOPL can make an informed decision on this topic.

Statement from Dr. Gore	Correct Information
<p>"Our program...[is] prevented from seeking CACREP accreditation because of their exclusionary/exclusivity accreditation standards that <b>require faculty</b> of CACREP accredited programs to have graduated from CACREP accredited programs."</p>	<ul style="list-style-type: none"> <li>• The 2009 CACREP Standards (currently in force) for <u>full-time/core faculty</u> require that "at least three persons whose full-time academic appointments are in counselor education... 1) have earned doctoral degrees in counselor education and supervision, <b>preferably from a CACREP-accredited program</b>, 2) <i>or have been employed as full-time faculty members in a counselor education program for a minimum of one full academic year before July 1, 2013.</i>"</li> <li>• The 2009 CACREP Standards (currently in force) for <u>non-fulltime/non-core faculty</u> indicate that "the academic unit may employ <b>noncore faculty</b> (e.g., adjunct, affiliate, clinical) who support the mission, goals, and curriculum of the program and meet the following requirements: 1) Hold graduate degrees, <b>preferably</b> in counselor education from a CACREP-accredited program; 2) Have relevant preparation and experience in the assigned area of teaching; 3) Identify with the counseling profession through memberships in professional organizations, appropriate certifications, and/or licenses pertinent to the profession.</li> <li>• The 2<sup>nd</sup> draft of the 2016 CACREP</li> </ul>

Standards (effective next year) for full-time/core faculty indicates "Core counselor education program faculty must have 1) earned doctoral degrees in counselor education, **preferably** from a CACREP-accredited program, 2) *or have related doctoral degrees and have been employed as full-time faculty members in a counselor education program for a minimum of one full academic year before July 1, 2013.*

- The 2<sup>nd</sup> draft of the 2016 CACREP Standards (effective next year) actually loosens up the more restrictive 2009 language for non-fulltime/non-core faculty and indicates that "**non-core faculty** may be employed who support the mission, goals, and curriculum of the program. They must have graduate or professional degrees in a field that supports the mission of the program."

To summarize: Dr. Gore's statement is incorrect because his department would only need to hire 3 full-time core faculty who hold degrees in Counselor Education and Supervision, as opposed to Psychology, to receive CACREP accreditation for their master's level clinical mental health counseling program. His program could have other full-time core faculty who identify as Psychologists by degree and licensure and his program could employ additional diverse and experienced adjunct faculty – who do not have degrees in counseling – to enhance the educational experience of their students. His statement is also misleading in that it communicates an absolute restriction to all faculty as he does not distinguish between full-time core faculty and part-time adjunct faculty. Dr. Gore neglected to mention that CACREP allows full-time core faculty without degrees in Counselor Education and Supervision who were employed prior to July 2013. Moreover, his statement is misleading in that CACREP does not "require," but rather "prefers," that full-time core faculty have a doctoral degree from a CACREP program.

On a side note, I am curious if Dr. Gore can share with us policies/procedures for the University's Department of Educational Psychology relative to full-time faculty employment: Is his department open to hiring psychologists who received a doctoral degree in psychology from a non-APA accredited program? Is his department open to hiring a clinical mental health counselor who received a doctoral degree in counselor education and supervision? My assumption is the answer to these questions is "no." And as such, I would like to understand why those restrictions from his department would not be considered "guild-driven exclusionary initiatives?"

In his email, Dr. Gore also commented that "this week you may hear from CACREP as they engage a nationwide campaign to promote CACREP exclusivity in counselor licensure laws." It is important to understand CACREP's initiative. There are pressing issues facing the counseling profession on a

national level, and consistent and standardized education and training of counselors is imperative for the following:

- Inclusion of counselors in the Medicare program.
- Improved counselor employment by the Department of Veterans Affairs.
- Increased counselor inclusion and recognition by the Military Health Systems.
- The creation of a Federal Occupational Series for Counselors.
- Advocacy for the Minority Fellowship Program and other federal workforce programs.
- Counselor recognition by the Indian Health Service.

Requiring CMHC licensure applicants in Utah to have a CACREP degree actually promotes the credibility and marketability of graduates from master's level counseling programs. An additional critical example in this area is that the Department of Veteran Affairs recently approved employment for counselors contingent upon receiving a degree from a CACREP-accredited program. This is a mandate from the Federal Government as per independent recommendation from the Institute of Medicine – not any “guild-driven initiatives” as proclaimed by Dr. Gore. Unless the counseling profession moves in the direction of requiring CACREP-accredited degrees for licensure, hundreds – if not thousands – of national graduates will not be eligible for employment by the Department of Veteran Affairs and within other critical government settings.

I recognize this topic is spirited and controversial. There are many additional aspects of this topic that I believe are vital to an open dialogue – such as professional identity, licensure portability, and licensure examination. My doctoral dissertation research was this very topic. My hope is that we can continue this dialogue in a public forum. To ensure transparency and accuracy for the public – especially for a State of Utah funded institution, I encourage Dr. Gore to share my email response with his faculty and students that he referenced, as my assumption is they are invested in this topic.

Respectfully,

*Jason King, PhD*

**From:** Paul Gore [mailto:Paul.Gore@utah.edu]  
**Sent:** Saturday, February 21, 2015 6:34 PM  
**To:** msteinagel@utah.gov  
**Cc:** DOPLWeb@utah.gov; Jason King, PhD  
**Subject:** A professional opinion related to Clinical Mental Health Counselor licensure

Dear Director Steinagel,

As a training director of a master's clinical mental health counseling program at the University of Utah I am writing to express an opinion on behalf of my faculty and students. We are strongly in favor of diversity and inclusion in counselor training and opposed to exclusionary guild-driven initiatives such as those currently being embraced by the Council on Accreditation of Counseling and Related Educational Programs (CACREP). Our program (the only publically supported clinical mental health counseling program in the State of Utah) subscribes to the highest standards of

content and pedagogy in this field but are prevented from seeking CACREP accreditation because of their exclusionary/exclusivity accreditation standards that require faculty of CACREP accredited programs to have graduated from CACREP accredited programs. This week you may hear from CACREP as they engage a nationwide campaign to promote CACREP exclusivity in counselor licensure laws. The Board successfully resisted previous efforts by CACREP to draft exclusive accreditation language in our licensure code and I urge you and the Board to continue to embrace diversity in training models in service of the public good and the citizens of our State. I am happy to discuss this issue with you and/or the Board at any time.

Sincerely,

Paul A. Gore, Ph.D.  
Associate Professor, Educational Psychology  
Director, Office of Institutional Analysis  
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As outlined in Subsection 58-60-105 (3) a licensee, in addition to their profession specific continuing education requirement, must complete two hours of suicide prevention training that meet the following standards:

- (1) The course provider shall meet the requirements of this section and shall be one of the following:
  - (a) a recognized accredited college or university;
  - (b) a county, state or federal agency; or
  - (c) a professional association or organization involved in mental health therapy.
- (2) A course provider shall have a method of verification of attendance and completion.
- (3) The content of the course shall be relevant to mental health therapy, crisis intervention, suicide prevention, intervention and postvention, consistent with the laws of this state and include one or more of the following components:
  - (a) suicide concepts and facts;
  - (b) suicide risk assessment, crisis intervention and first aid;
  - (c) evidence based intervention for suicide risk;
  - (d) continuity of care and follow-up services for suicide risk; and
  - (e) therapeutic alliances for intervention in suicide risk.
- (4) A licensee shall be responsible for maintaining competent records of completed education for a period of four years.
- (5) Each hour of education shall consist of 50 minutes of education in the form of classroom lectures and discussion, workshops, webinars/ on-line self-paced modules, case study review and simulations.
- (6) Licensees who lecture in continuing education courses meeting these requirements shall receive two hours of continuing education for each hour spent lecturing. However, no continuing education credit will be given for participation in a panel discussion.

The 2 hour pre-licensure suicide prevention courses required by Subsections 58-60-205 (1) (e) (iii), 58-60-305 (1) (e) (iv), 58-60-405 (1) (e) (iv) and 58-620-506 (5) (b) (ii) must meet the following standards:

- (1) The course provider shall meet the requirements of this section and shall be one of the following:
  - (a) a recognized accredited college or university;
  - (b) a county, state or federal agency; or
  - (c) a professional association or organization involved in mental health therapy.
- (2) The content of the course shall be relevant to mental health therapy, suicide prevention, consistent with the laws of this state and include one or more of the following components:
  - (a) suicide concepts and facts;
  - (b) suicide risk assessment and first aid;
  - (c) evidence based intervention;
  - (d) continuity of care and follow-up services; and
  - (e) therapeutic alliances for intervention in suicide risk.
- (3) Each hour of education shall consist of 50 minutes of education in the form of classroom lectures and discussion, workshops, webinars/ on-line self-paced modules, case study review and simulations.
- (4) A course provider shall have a method of verification of attendance and completion.
- (5) An applicant for licensure is responsible for submitting evidence of course completion.

