

RULE ADOPTIONS  
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LAW AND PUBLIC SAFETY  
DIVISION OF CONSUMER AFFAIRS  
State Board of Marriage and Family Therapy Examiners  
ALCOHOL AND DRUG COUNSELOR COMMITTEE

**Readoption with Amendments: N.J.A.C. 13:34C**

**Adopted Repeal: N.J.A.C. 13:34C-2.1**

**Adopted New Rule: N.J.A.C. 13:34C-6.2A**

**Adopted Repeal and New Rule: N.J.A.C. 13:34C-1.6**

## Rules

Proposed: April 20, 2009 at 41 N.J.R. 1653(a).

Adopted: August 13, 2009 by the State Board of Marriage and Family Therapy Examiners, James Verser, Ed.S., Chairperson.

Filed: September 10, 2009 as R.2009 d.302, **with substantive changes** not requiring additional public notice and comment (see N.J.A.C. 1:30-6.3).

Authority: N.J.S.A. 45:2D-1 through 45:2D-18.

Effective Dates: September 10, 2009, Readoption; October 5, 2009, Amendments, Repeals and New Rules.

Expiration Date: September 10, 2014.

## Federal Standards Statement

A Federal standards analysis is not required because the rules readopted with amendments, repeals and new rules are governed by N.J.S.A. 45:2D-1 et seq., and are not subject to any Federal requirements or standards. N.J.A.C. 13:34C-4.5(b) requires compliance with 42 CFR Part 2, however, that Federal standard is not exceeded.

**Full text** of the readopted rules can be found in the New Jersey Administrative Code at N.J.A.C. 13:34C.

**Full text** of the adopted amendments and new rules follows (additions to proposal indicated in boldface with asterisks **\*thus\*** ; deletions from proposal indicated in brackets with asterisks \*[thus]\*):

## SUBCHAPTER 1. GENERAL PROVISIONS

### 13:34C-1.2 Definitions

(a) The following words and terms, when used in this chapter, shall have the following meanings, unless the context clearly indicates otherwise:

...

"Health care provider" includes, a New Jersey licensed individual who is permitted, without supervision, to diagnose and/or treat within the licensee's scope of practice, such as a licensed clinical alcohol and drug counselor, a licensed physician, a certified advanced practice nurse, a licensed psychologist, a licensed clinical social worker, a licensed marriage and family therapist or a licensed professional counselor.

"ICRC member board" means a certification authority that is a member of the International Certification Reciprocity Consortium (ICRC) of Alcohol and Other Drug Abuse, Inc.

...

"Significant other" means an individual who is not related by blood or marriage, who can influence the client in a way that can impact the therapeutic intervention, success of recovery or treatment of the client. Examples include, but are not limited to, civil union partners, employers, teachers, friends, co-workers or probation/parole officers.

...

(b) Definitions of words and terms related to clinical supervision are set forth in N.J.A.C. 13:34C-6.1.

#### 13:34C-1.3 Office of the Alcohol and Drug Counselor Committee

The office of the Committee shall be maintained at 124 Halsey Street , Newark , New Jersey . The mailing address of the Committee is PO Box 45040 , Newark , New Jersey 07101 . The website of the Committee is [www.state.nj.us/lps/ca/medical/alcdrug.htm](http://www.state.nj.us/lps/ca/medical/alcdrug.htm).

#### 13:34C-1.5 License or certification renewal; active/inactive

(a) (No change.)

(b) The Committee shall send a notice of renewal to each of its licensees or certificate holders, as applicable, at least 60 days prior to the expiration of the license or certificate. If the notice to renew is not sent at least 60 days prior to the expiration date, no monetary penalties or fines shall apply to the holder for any unlicensed practice during the period following licensure expiration, not to exceed the number of days short of 60 before the renewals were issued.

(c)-(d) (No change.)

(e) Renewal applications for all licenses or certificates shall provide the licensee or certificate holder with the option of either active or inactive renewal. A renewal applicant electing to renew as inactive shall not engage in alcohol and drug counseling within the State.

(f) A licensee or certificate holder who selects the inactive renewal option shall remain on inactive status for the entire renewal period unless, upon application to the Board, the Board permits the inactive applicant to return to active status. A licensee or certificate holder who seeks to return to active status shall submit the following:

1. A completed renewal application;
2. The renewal fee for the current biennial period set forth in N.J.A.C. 13:34C-1.10;
3. An affidavit of employment listing each job held during the period the licensee or certificate holder was inactive, including the name, address and telephone number of each employer; and
4. Evidence that the licensee or certificate holder has maintained proficiency by completing the 40 or 60 contact hours of continuing education, as applicable, required for the renewal of an active license. The continuing education hours shall be completed by the applicant within three years prior to the date of application for the return to active status.

(g) A licensee or certificate holder who returns to active status shall not use any continuing education credits completed pursuant to (f)4 above toward satisfaction of the 40 or 60 contact hours of continuing education required for the renewal of the license or certificate at the end of the current biennial period.

#### 13:34C-1.6 Reinstatement

(a) An individual whose license or certificate has been suspended for failure to renew pursuant to N.J.A.C. 13:34C-1.5(c) for a period of five years or less shall be reinstated by the Committee upon submission of the following:

1. A completed reinstatement application;

2. A reinstatement fee and all past delinquent biennial renewal fees set forth in N.J.A.C. 13:34C-1.10;
3. An affidavit of employment listing each job held during the period the individual was suspended, including the name, address and telephone number of each employer;
4. Any outstanding penalties imposed by the Committee; and
5. Evidence that the individual has maintained proficiency by completing the 40 or 60 contact hours of continuing education, as applicable, required for the renewal of an active license or certificate. The continuing education hours shall be completed by the applicant within three years prior to the date of application for reinstatement.

(b) An individual whose license or certificate has been suspended for failure to renew pursuant to N.J.A.C. 13:34C-1.5(c) for a period of more than five years shall be reinstated by the Board upon successful completion of the licensing examination set forth at N.J.A.C. 13:34C-[page=3837] 2.2(b)2 or 2.3(b)6 and 7 within one year of the date of application and upon submission of the following:

1. A completed reinstatement application;
2. Payment of the reinstatement fee and all past delinquent biennial renewal fees set forth in N.J.A.C. 13:34-1.1;
3. An affidavit of employment listing each job held during the period the individual was suspended, including the name, address and telephone number of each employer; and
4. Any outstanding penalties imposed by the Committee.

(c) A licensee or certificate holder who is reinstated shall not use any continuing education credits completed pursuant to (a)5 above toward satisfaction of the 40 or 60 contact hours of continuing education required for the renewal of the license or certificate at the end of the current biennial period.

#### 13:34C-1.7 Licensee to display notice or give notice; licensee to display license

(a) All licensees, conducting independent practice, shall ensure that the following notice is either prominently displayed in a waiting room or other area where it will be visible to the licensee's clients or provided to the licensee's clients in writing:

"Alcohol and drug counselors are licensed by the Board of Marriage and Family Therapy Examiners, Alcohol and Drug Counselor Committee, an agency of the Division of Consumer Affairs. Any member of the consuming public having a complaint concerning the manner in which the alcohol and drug counseling practice is conducted or services are provided should notify the Alcohol and Drug Counselors Committee, PO Box 45040, 124 Halsey Street, Newark, New Jersey 07101, [www.state.nj.us/lps/ca/medical/alcdrug.htm](http://www.state.nj.us/lps/ca/medical/alcdrug.htm), or the New Jersey Division of Consumer Affairs, Post Office Box 45027, 124 Halsey Street, Newark, New Jersey 07101, [www.state.nj.us/lps/ca/comp.htm](http://www.state.nj.us/lps/ca/comp.htm)."

(b) (No change.)

## SUBCHAPTER 2. APPLICATION PROCEDURE; APPLICANT QUALIFICATIONS

### 13:34C-2.1 (Reserved)

### 13:34C-2.3 Application procedure: certified alcohol and drug counselor

(a) (No change.)

(b) An applicant shall furnish evidence that the applicant has:

1. Received a bachelor's degree or an associate's degree or a high school diploma or a certificate of high school equivalency;

2.-3. (No change.)

4. Completed 270 hours of alcohol and drug education, \*[which may include,]\* **\*approved by member boards of the International Certification Reciprocity Consortium of Alcohol and Other Drug Abuse, Inc. (ICRC), the National Association of Alcoholism and Drug Abuse Counselors (NAADAC), the Association for Addiction Professionals or a regionally accredited college or university, which shall be related to the knowledge and skill associated with the functions of an alcohol and drug counselor, including\*** formal classroom education, workshops, seminars, institutes, in-service training or a maximum of 54 course hours in distance learning programs\* [. Such training shall be approved by member boards of the International Certification Reciprocity Consortium of Alcohol and Other Drug Abuse, Inc. (ICRC) or its successor, or by NAADAC, the Association for Addiction Professionals, in those states that have NAADAC certification. An applicant may also complete the 270 hours of alcohol and drug education in a matriculated program in a regionally accredited college or university, which shall demonstrate competency in the knowledge and skill associated with the core functions of an alcohol and drug counselor, and which shall include the following domains, each of which shall be consistent with current course content standards established by ICRC member boards]\* **\*as follows\*** :

i. Fifty-four course hours of assessment, with a minimum of six hours in each of the topics and distributed among all of the following:

(1)-(3) (No change.)

(4) Diagnostic summaries;

(5) Compulsive gambling; and

(6) (No change in text.)

ii.-v. (No change.)

5. (No change.)

6. Successfully completed a written examination developed and prepared by the ICRC, or its successor; and

7. Successfully completed an oral examination developed and prepared by the ICRC, or its successor, on the applicant's written case presentation.

(c)-(e) (No change.)

### SUBCHAPTER 3. GENERAL OBLIGATIONS

#### 13:34C-3.1 Standards of practice; scope of practice

(a) (No change.)

(b) The scope of practice of a certified alcohol and drug counselor includes, but is not limited to the following 12-core functions: screening, intake, orientation, assessment, treatment planning, counseling-individual, group and family, case management, crisis intervention, client education, referral, consultation and recordkeeping.

(c) (No change in text.)

(d) A certified alcohol and drug counselor is prohibited from making diagnoses.

(e) (No change in text.)

#### 13:34C-3.3 Sexual misconduct and harassment

(a) (No change.)

(b) A licensee or certificate holder shall not seek, solicit or engage in sexual contact with a client with whom he or she has a current client-counselor relationship.

(c) A licensee or certificate holder shall not seek, solicit or engage in sexual contact with a current client's family member, a former client, a former client's family member or a former student when any alcohol and drug counseling services were rendered to the client, former client or former student in the immediately preceding 24 months, or with a current student, supervisee, supervisor or research participant.

1. (No change.)

(d) A licensee or certificate holder shall not seek, solicit or engage in sexual contact with any person in exchange for professional services.

(e)-(k) (No change.)

## SUBCHAPTER 5. CONTINUING EDUCATION

### 13:34C-5.2 Continuing education contact hour requirements

(a)-(c) (No change.)

(d) All licensees and certificate holders shall complete at least six required contact hours of continuing education in legal standards related to the practice of alcohol and drug counseling in New Jersey during the initial biennial period. These six contact hours may be used towards the required continuing education hours. These six contact hours shall focus on N.J.S.A. 45:1-1 through 45:1-32 and 45:2D-1 through 45:2D-17 and this chapter. An individual is not precluded from completing this requirement prior to applying for licensure or certification, but the fulfillment of this requirement shall not be substituted for N.J.A.C. 13:34C-2.3(b)4v(1) and/or (2).

(e) Beginning August 1, 2010, all licensees and certificate holders shall complete a minimum of three contact hours of the 40 or 60 contact hours of continuing education, as applicable, required by N.J.A.C. 13:34C-5.1 in the subject area of social and cultural competence in every biennial period. For the purposes of this subsection, cultural competence includes, but is not limited to, an understanding of the cultural context of relationships; issues and trends in a diverse society related to such factors as culture, ethnicity, nationality, age, gender, sexual orientation, mental and physical characteristics, education, family values, religious and spiritual values, socioeconomic status and unique characteristics of individuals, couples, families, ethnic groups and communities, including any of the following:

1. Multicultural and pluralistic trends, including characteristics and concerns between and within diverse groups nationally and internationally;

2. Attitudes, beliefs, understandings and acculturative experiences, including specific experiential learning activities;

[page=3838] 3. Individual, couple, family, group and community strategies for working with diverse populations and ethnic groups;

4. Counselors' roles in social justice, advocacy and conflict resolution, cultural self-awareness, the nature of biases, prejudices, process of intentional and unintentional oppression and discrimination and other culturally supported behaviors that are detrimental to the growth of the human spirit, mind or body;

5. Theories of multicultural counseling, theories of identity development and multicultural competencies; and

6. Legal considerations relating to issues of diversity.

(f) The three contact hours of continuing education in the subject area of social and cultural competence required

pursuant to (e) above shall be in addition to the required six contact hours of continuing education in legal standards as set forth in (d) above.

### 13:34C-5.3 Approval of continuing education courses and/or programs

(a) (No change.)

(b) The following continuing education courses and programs shall be deemed automatically approved, as long as the courses or programs fall within the content areas set forth in (d) below:

1. Courses and programs approved by a regionally accredited institution of higher learning; the APCBNJ or any other ICRC member board; NAADAC, the Association for Addiction Professionals; American Society on Addiction Medicine; National Board of Certified Counselors; the American Counseling Association; the American Psychological Association; the American Psychiatric Association; the National Association of Social Workers; the American Association for Marriage and Family Therapy; the National Council on Compulsive Gambling; and the American Compulsive Gambling Counselor Certification Board;

2.-5. (No change.)

(c)-(d) (No change.)

(e) A course or program in the subject area of social and cultural competence for the purpose of fulfilling the three contact hours of continuing education requirement shall be obtained consistent with (b) above or shall be subject to the approval of the Committee. A course or program in the subject area approved by the Board of Marriage and Family Therapy Examiners, the Board of Social Work Examiners or the Professional Counselor Examiners Committee shall be deemed acceptable by the Committee.

## SUBCHAPTER 6. CLINICAL SUPERVISION

### 13:34C-6.1 Definitions

For purposes of this subchapter, the following words and terms have the following meanings:

"Alcohol and drug counselor intern" means an individual in training working under the clinical supervision of a qualified clinical supervisor as set forth in N.J.A.C. 13:34C-6.2(a) and who is working toward completing the requirements of N.J.A.C. 13:34C-2.3(b)3ii.

"Clinical supervision" means the ongoing process of direct review of an alcohol and drug counselor intern and/or a certified alcohol and drug counselor for the purpose of administrative accountability, teaching, quality assurance, training, administering and/or clinical review of alcohol and drug counselor interns and certified alcohol and drug counselors performed by a qualified clinical supervisor who monitors the performance of the core functions of alcohol and drug counseling, providing regular consultation, guidance and instruction with respect to the counseling skills and competencies of the alcohol and drug counselor intern and/or certified alcohol and drug counselor.

"Credentialed intern" means an individual holding an active license as a health care provider as defined in N.J.A.C. 13:34C-1.2, who is working toward completing the requirements of N.J.A.C. 13:34C-2.3(b)3ii under the clinical supervision of a qualified clinical supervisor as set forth in N.J.A.C. 13:34C-6.2A(a).

...

"Group supervision" means the process of supervising no more than eight persons in a group setting by a qualified clinical supervisor as set forth in this section.

...

"Supervised agency practice" means alcohol and drug counseling by a certified alcohol and drug counselor within an

alcohol and drug treatment facility licensed by the Department of Human Services.

"Supervised practical training" or an "alcohol and drug counselor internship" means alcohol and drug counseling as a training experience leading towards licensure or certification as an alcohol and drug counselor.

...

### 13:34C-6.2 Clinical supervision of alcohol and drug counselor internship training experiences

(a) The following individuals may be qualified clinical supervisors of alcohol and drug counselor interns:

1.-2. (No change.)

3. A New Jersey certified advanced practice nurse, licensed psychologist, licensed clinical social worker, licensed marriage and family therapist or licensed professional counselor, all of whom shall be certified as a clinical supervisor by ICRC member boards.

(b) Qualified clinical supervisors shall have written agreements with alcohol and drug counselor interns that outline planned hours of practice, planned hours of clinical supervision, types of clinical supervision, nature of work assignments and other specifications that the qualified clinical supervisor deems appropriate to the alcohol and drug counselor intern's level of training.

(c) Prior to the alcohol and drug counselor intern's provision of treatment services, the supervisor shall obtain a written disclosure that the client has been informed that the services are provided by an alcohol and drug counselor intern under the clinical supervision of a qualified clinical supervisor as set forth in (a) above. This disclosure shall be kept as part of the client record. If the disclosure is part of another document provided at client orientation, the disclosure shall be clearly evident, understood and signed by the client.

(d) The qualified clinical supervisor shall retain responsibility for collecting fees from clients when applicable.

(e) The qualified clinical supervisor shall be ultimately responsible for the welfare of the client with respect to the treatment being offered by the alcohol and drug counselor intern.

(f) The qualified clinical supervisor shall supervise only in areas of which he or she possesses the required skill, training and experience.

(g) Qualified clinical supervisors shall co-sign all diagnostic summaries, treatment plans, reports to courts, agencies or other treatment providers, which are prepared by alcohol and drug counselor interns. All diagnoses shall be made by the qualified clinical supervisor and shall not be delegated to an alcohol and drug counselor intern.

(h) Qualified clinical supervisors shall be responsible for assisting the alcohol and drug counselor intern to function in a professional manner and comply within all State and Federal regulations and with the current professional code of ethics. The qualified clinical supervisor shall inform the Committee of violations of this chapter, laws and code of ethics and the corrective action taken by the qualified clinical supervisor to remedy the situation and assure that it will not reoccur.

(i) Qualified clinical supervisors shall not supervise an alcohol and drug counselor intern with whom the qualified clinical supervisor has a relationship, which may compromise the objectivity of the supervisor or impair the professional judgment of the supervisor. Examples of inappropriate supervisory relationships include, but are not limited to, current clients, former clients within one-year period post-treatment, former spouses, relatives, sponsor/sponsee relationships in self-help groups, anyone with whom the supervisor is having a sexual relationship or has had a sexual relationship within the past 24 months. A qualified clinical supervisor shall not supervise a current student unless the supervisor is the faculty instructor in the academic internship training program.

(j) Qualified clinical supervisors shall evaluate alcohol and drug counselor interns at least twice a year, emphasizing

their strengths and shortcomings, as well as whether the alcohol and drug counselor intern needs to pursue additional knowledge and/or skill development. These evaluations shall be signed by both the supervisor and alcohol and drug counselor intern, and copies shall be retained by both for seven years. [page=3839] Copies of these evaluations may be requested by the Committee prior to initial certification or licensure.

(k) Clinical supervision of alcohol and drug counselor interns shall include at least 50 hours of face-to-face supervision per year, averaging one hour per week. No more than 25 hours shall be group supervision.

(l) All qualified clinical supervisors of alcohol and drug counselor interns shall obtain Committee approval prior to commencing the supervisory relationship with the alcohol and drug counselor intern. A qualified clinical supervisor shall submit evidence, on forms provided by the Committee, that he or she has satisfied all applicable requirements of this subchapter.

#### 13:34C-6.2A Clinical supervision of credentialed interns who hold an active license as a health care provider

(a) The following individuals may be qualified clinical supervisors of credentialed interns who hold an active license as a health care provider as defined in N.J.A.C. 13:34C-1.2, provided such individuals are not precluded from providing such supervision by the laws or regulations in this State pertinent to their health care practice:

1. A New Jersey licensed clinical alcohol and drug counselor;
2. A New Jersey licensed physician certified by the American Society of Addiction Medicine or a psychiatrist with added qualifications in chemical dependency from the American Psychiatric Association; and
3. A New Jersey certified advanced practice nurse, licensed psychologist, licensed clinical social worker, licensed marriage and family therapist or licensed professional counselor, all of whom shall be certified as clinical supervisors by ICRC member boards.

(b) Qualified clinical supervisors shall have a written agreement with credentialed interns describing the planned hours of practice, supervision schedule, nature of work assignments and other specifications that the supervisor reasonably deems appropriate to the credentialed intern's level of training.

(c) The qualified clinical supervisor may require the cosigning of reports to outside agencies or providers.

(d) Qualified clinical supervisors shall inform the Committee of violations of this chapter, laws and code of ethics and the corrective action taken by the qualified clinical supervisor to remedy the situation and assure that it will not recur.

(e) Qualified clinical supervisors who terminate their supervisory relationship with a credentialed intern shall retain the client records, arrange for appropriate termination of the counselor/client relationship and offer the client additional options for continuation of the treatment care.

(f) If the reason for termination of the supervisory relationship with the credentialed intern involves the violation of this chapter, Federal or State laws or regulations affecting the profession or the current code of ethics, the qualified clinical supervisor shall report the reasons to the Committee with the credentialed intern's name and certificate number.

(g) Qualified clinical supervisors shall retain a copy of the credentialed intern's current license and curriculum vitae for seven years.

(h) Qualified clinical supervisors shall not supervise a credentialed intern with whom the supervisor has a relationship that may be inappropriate to the supervision and may compromise the objectivity of the supervisor or impair the professional judgment of the supervisor. Examples of inappropriate supervisory relationships include, but are not limited to, current clients, former clients within a one-year period post-treatment, former spouses, relatives, sponsor/sponsee relationships in self-help groups or anyone with whom the supervisor is having a sexual relationship or has had a sexual relationship within the past 24 months. A qualified clinical supervisor shall not supervise a current student unless the qualified clinical supervisor is the faculty instructor in an academic training program.

(i) Qualified clinical supervisors shall evaluate credentialed interns at least annually, emphasizing their strengths and shortcomings, as well as areas in which the credentialed intern should pursue additional knowledge and/or skill development. These evaluations shall be cosigned by both the qualified clinical supervisor and the credentialed intern and copies shall be retained by both for seven years. Copies of these evaluations may be requested by the Committee.

(j) Clinical supervision shall include at least 25 hours of face-to-face supervision per year, averaging one hour every other week, with no more than 10 percent being real-time interactive video conferencing.

(k) All qualified clinical supervisors of credentialed interns shall obtain the approval of the Committee prior to the commencing the supervisory relationship with the credentialed intern.

### 13:34C-6.3 Clinical supervision of a supervised practice for certified alcohol and drug counselors

(a) The following individuals may be qualified clinical supervisors of certified alcohol and drug counselors:

1.-2. (No change.)

3. A New Jersey certified advanced practice nurse, licensed psychologist, licensed clinical social worker, licensed marriage and family therapist or licensed professional counselor, all of whom shall be certified as clinical supervisors by ICRC member boards.

(b) Qualified clinical supervisors shall have a written agreement with certified alcohol and drug counselors describing the planned hours of practice, supervision schedule, nature of work assignments and other specifications that the supervisor reasonably deems appropriate to the certified alcohol and drug counselor's level of training.

(c) Prior to the certified alcohol and drug counselor's provision of treatment services, the qualified clinical supervisor shall obtain a written disclosure that the client has been informed that the services are provided by a certified alcohol and drug counselor under the supervision of a licensed professional as set forth in (a) above. This disclosure shall be kept as part of the client record. If the disclosure is part of another document provided at client orientation, the disclosure shall be clearly evident, understood and signed by the client. The qualified clinical supervisor shall retain the responsibility for collecting fees from clients when applicable.

(d) The qualified clinical supervisor may require the cosigning of reports to outside agencies or providers.

(e) Qualified clinical supervisors shall inform the Committee of violations of this chapter, laws and code of ethics and the corrective action taken by the qualified clinical supervisor to remedy the situation and assure that it will not reoccur.

(f) Qualified clinical supervisors who terminate their supervisory relationship with a certified alcohol and drug counselor shall retain the client records, arrange for appropriate termination of the counselor/client relationship and offer the client additional options for continuation of the treatment care.

(g) If the reason for termination of the supervisory relationship with the certified alcohol and drug counselor involves the violation of this chapter, Federal or State laws or regulations affecting the profession or the current code of ethics, the qualified clinical supervisor shall report the reasons to the Committee with the certified alcohol and drug counselor's name and certificate number.

(h) Qualified clinical supervisors shall retain a copy of the counselor's certificate of registration and current curriculum vitae for seven years.

(i) Qualified clinical supervisors shall not supervise a certified alcohol and drug counselor with whom the supervisor has a relationship that may be inappropriate to the supervision and may compromise the objectivity of the supervisor or impair the professional judgment of the qualified clinical supervisor. Examples of inappropriate supervisory relationships include, but are not limited to, current clients, former clients within one-year period post-treatment, former spouses, relatives, sponsor/sponsee relationships in self-help groups, anyone with whom the supervisor is

having a sexual relationship or has had a sexual relationship within the past 24 months. A qualified clinical supervisor shall not supervise a current student unless the supervisor is the faculty instructor in an academic training program.

(j) Qualified clinical supervisors shall evaluate certified alcohol and drug counselors at least annually, emphasizing their strengths and shortcomings, as well as areas in which the certified alcohol and drug counselor should pursue additional knowledge and/or skill development. These evaluations shall be cosigned by both the qualified clinical supervisor and certified alcohol and drug counselor and copies shall be retained by both for seven years. Copies of these evaluations may be requested by the Committee.

[page=3840] (k) Clinical supervision shall include at least 50 hours of face-to-face supervision per year, averaging one hour per week, with no more than 10 percent being real-time interactive video conferencing. Counselors with more than five years of experience as a certified alcohol and drug counselor may be supervised less frequently, but no less than two hours per month. This reduced supervision is at the discretion of the qualified clinical supervisor and is dependent upon the supervisor's style, techniques, policies and protocols, as well as the level of skill, training and caseload of the counselor.

(l) All diagnoses shall be made by the qualified clinical supervisor and shall not be delegated to a certified alcohol and drug counselor.

(m) All qualified clinical supervisors of certified alcohol and drug counselors shall obtain Committee approval prior to commencing the supervisory relationship with the certified alcohol and drug counselor. A qualified clinical supervisor shall submit evidence, on forms provided by the Committee, that he or she has satisfied all applicable requirements of this subchapter.

#### 13:34C-6.4 Clinical supervision of an agency practice

(a) The Committee shall accept clinical supervision requirements in agencies licensed by the Department of Human Services, Division of Addiction Services, as substance abuse treatment facilities as they relate to the clinical supervision of alcohol and drug counselors, unless otherwise specified in this subchapter.

(b) Supervised agency practice by a certified alcohol and drug counselor does not apply to practice by that individual outside the licensed facility setting.

(c) If the Committee is advised of inadequacies in the clinical supervision of certified alcohol and drug counselors in a Department of Human Services, Division of Addiction Services, (DHS) licensed substance abuse treatment facility, the Committee shall notify the DHS of such inadequacies and may recommend to DHS a plan for clinical supervision. If the inadequacies in supervision within an agency practice setting, as defined in (a) above, are not resolved within three months of such notice, the agency supervision exemption described herein shall be withdrawn and the rule for supervised practice at N.J.A.C. 13:34C-6.3 shall be imposed upon subject certificate holders until such time as the Committee determines that the inadequacies in supervision have been corrected.

(d) For purposes of certified alcohol and drug counselor and licensed clinical alcohol and drug counselor applications, the clinical director of the agency shall sign all supervisory forms required pursuant to this subchapter.