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Executive Summary

The Minnesota Board of Social Work Self-Evaluation Report 2012, including the Executive Summary is being submitted to the Minnesota Sunset Advisory Commission in compliance with Minnesota Statutes 3D.06. This Executive Summary demonstrates that:

- licensing of social workers is essential to ensure public protection for the residents of Minnesota,
- the current regulatory model and governance structure utilized by the Board of Social Work and the other Health-Related Licensing Boards is an effective and nationally-recognized model,
- the Board applies mission driven financial management and priority based budget, while decreasing fees by 30% since 2006, and
- the Board utilizes on-line services and engages in strategic planning and regular self-evaluation to ensure efficient and effective outcomes.

Part 1: Key Functions, Agency Power, Duties, Mission – Public Protection Through Standards and Regulation

The Minnesota Board of Social Work is the sole licensing and regulatory agency for social workers in Minnesota. It is entirely fee supported and receives no General Fund dollars. The Board performs its core public safety duties under <u>Minnesota Statutes</u>, <u>Sections 148E.001-148E.290</u>, <u>148D.061-148D.063</u>, and <u>214.001-214.40</u>. The Board's core public safety mission is to *ensure residents of Minnesota quality social work services by establishing and enforcing professional standards*. The Board protects the public with an effective, efficient, and nationally-recognized regulatory model.

Social workers provide services to some of the most vulnerable populations in the state. If an individual is seen by a licensed social worker, the client can be assured that the licensed social worker meets education, examination, supervision, continuing education, and ethical standards of practice. The client can also be assured that if the social worker fails to meet the standards established by law, the client can file a complaint with the Board.

According to the Association of Social Work Boards (ASWB), the organization that develops and maintains the standardized social work licensing examinations, all 50 states, 10 Canadian provinces, the District of Columbia, Puerto Rico, and the Virgin Islands regulate the practice of social work through licensure or certification programs established under regulatory agencies. The professional organization, the National Association of Social Workers (NASW), estimates that 70-80% of all professional mental health providers are trained social workers.

Part 2: Governance Model, Operations – Efficiency, Collaboration, Innovation

Agency Governance – Board Members as Policy Body

To carry out the Board's functions, Board members are appointed by the Governor to serve four-year terms. To ensure diversity, the Board consists of ten licensed social workers and five public members. In addition, six members must reside outside the 11-county metropolitan area, and five members must

have expertise in communities of color. The Board also has an Advisory Committee, authorized by its bylaws, that reviews policy issues affecting the social work profession and facilitates effective communication between the Board and the profession.

Board members are true "volunteers" in Minnesota state government. They serve as subject matter experts, and their expertise is invaluable as they develop legislative agendas to address policy issues, oversee the agency budget, and act to resolve complaints against social workers with the goal of ensuring public safety. Board members contributed a total of approximately 1,306 hours of volunteer service during 2010. The financial benefit realized by the Board for Board member volunteer hours, based on a calculation of \$100 per hour for a contracted subject matter expert, is \$130,600. per year.

The Board employs an Executive Director and Board staff totaling 10.6 FTEs, who provide services in the areas of licensing, compliance and complaint resolution, and operations. Board staff provides services to 12,538 current licensees, 1,820 applicants in FY 2011, the general public, consumers of social work services, students and faculty, employers, supervisors, continuing education providers, credentialing agencies, other state and local agencies, and state and national professional social work associations. The staff ratio to licensees served is 1 staff to 1,183 licensees.

Despite the increase in services provided to customers, a 43% increase in the number of applicants, and an 11% increase in the number of active status licensees in the last ten years, Board employee complement has remained constant since 2006 that time, primarily due to internal process improvements and increased utilization of online services.

Minnesota Health-Related Licensing Boards: Nationally Recognized Model for Occupational Governance - Administrative Services Unit (ASU)

Although the Board is an independent state agency, the Board works voluntarily in collaboration with the other Health-Related Licensing Boards and the Administrative Services Unit (ASU), and is recognized nationally as having an effective governance model. Public safety is achieved most effectively if primary staff is assigned to focus on a specific health profession. To ensure fiscal efficiency and eliminate duplication, the ASU is funded by all the independent Health Licensing Boards and provides shared services to the boards in the areas of finance, budgeting, accounting, purchasing, reporting, banking, human resources, professional and technical contracts, information technology, and payroll.

<u>Part 3: Core Public Safety Services: Licensing and Complaint Resolution – Effective</u> <u>Outcomes</u>

Efficient and Effective Outcomes: Licensing Services

The Board licenses professional social workers who meet standards of education, examination, supervision, continuing education, and ethical standards of practice. There are four social work licenses in Minnesota at the bachelor, graduate, and independent practice categories.

Graduate and undergraduate social work curriculum and programs are accredited by the national accreditation body, the Council on Social Work Education (CSWE). There are approximately 700 CSWE

accredited social work programs across the nation. Minnesota currently has 14 CSWE accredited undergraduate programs and 6 accredited graduate programs.

In the past ten years the Board of Social Work has experienced a significant increase in social work licensure and renewal applications, and the trend continues. The Board currently regulates 12,538 licensed social workers.

- From FY 2000 to FY 2010:
 - Social work license applications increased by 43%.
 - Social work licenses granted increased by 25%.
 - Social work licenses renewed increased by 33%.

An applicant has one year from the time of submitting an application for licensure to meet all qualifications for licensure and provide all information requested by the Board. Application processing time is dependent on when the Board receives the required documents and how quickly an applicant chooses to move through the process.

Online application services began in 2006, at a rate of 52%.

- In FY 2007 FY 2008, 63% of licensure applications were submitted online and 37% on paper, with 56% of online applications and 71% of paper applications completed in 6 months or less.
- In FY 2009 FY 2010, 71% of licensure applications were submitted online and 29% on paper, with 59% of online applications and 68% of paper applications completed in 6 months or less.

Efficient and Effective Outcomes: License Renewal Services

Renewal processing time is contingent on the licensee and the licensee's supervisor providing all required documentation in a timely manner. If the information is not received by the Board within 2 weeks of the renewal deadline, a notice requesting the information is sent to the licensee.

Online renewal application services began in 2004, at a rate of 4%.

- In FY 2007 FY 2008, 59% of renewal applications were submitted online and 41% on paper.
- In FY 2009 FY 2010, 71% of renewal applications were submitted online and 29% on paper.

Average renewal completion times are listed below.

- In FY 2007 FY 2008, the average time for completion of an online renewal was 14 days
- In FY 2009 FY 2010, the average time for completion of an online renewal was 10 days.
- In FY 2007 FY 2008, the average time for completion of a paper renewal was 27 days.
- In FY 2009 FY 2010, the average time for completion of a paper renewal was 22 days.

Efficient and Effective Outcomes: Discipline/Complaint Resolution Services

The Board's compliance and complaint resolution process is a critical part of the State of Minnesota's and the federal government's efforts to protect social work consumers. The Board's Compliance Unit provides information to complainants, licensees, and the public about the compliance process in a variety of formats. The discipline/complaint resolution process is a collaborative effort between Board staff, Board members, and the Attorney General. Board staff and the Attorney General investigate

complaints. Eight Board members serving on the Board's two compliance panels review investigative findings and make recommendations to resolve complaints, after formal or informal conferences and meetings with the licensee, if needed.

The Board takes corrective or disciplinary action when a complaint is substantiated. Corrective action, which may be educational, is taken in less serious cases. Disciplinary action, which may involve civil penalties, conditions, limitations, or restrictions on practice, or suspension or revocation of a license, is taken in more serious cases. Corrective and disciplinary action is public data and is reported, as required, to protect the public in Minnesota and nationwide.

A review of corrective and disciplinary action taken in the past ten years indicates that licensees who have been subjected to corrective or disciplinary action are rarely subject to subsequent complaints. This result is a clear indication of the success of the Board's careful and thorough complaint process and vigilant monitoring of corrective and disciplinary action.

The average number of complaints received per year was 134 from FY 2000 to FY 2010. The efficiency and speed of the compliance process, in FY 2010, which is typical of the last ten years is noted below.

- 58% of complaints were resolved within three months
- 74% of complaints were resolved within six months
- 84% of complaints were resolved within one year

The complaint process is periodically reviewed. For example, amendments to the Board's Practice Act in 2006 established case resolution timelines and mandatory periodic updates to complainants.

Part 4: Priority Based Budgeting – Mission Driven Financial Management

The Board has reduced its fees by 30% since 2006. Current fees, for the four licenses issued by the Board, range from \$3.37 to \$9.93 per month. The Board is entirely fee supported and receives no General Fund dollars. The Board is responsible for collecting sufficient revenue from fees to cover both direct and indirect expenditures, which is deposited as non-dedicated revenue into the State Government Special Revenue Fund. The Board receives a direct appropriation from this fund to provide its core services. The Board has moved to a "cost of doing business" fiscal model, rather than the more traditional "build up and spend down" model. The "cost of doing business" model provides greater fiscal transparency and greater compliance with the statutory requirement that revenues and expenditures are closely balanced. The Board's Finance Committee provides important fiscal oversight.

The Board's priority based budget indicates that 60% of the Board's budget is spent in licensing services, 28% in complaint resolution services, and 12% in general operation services. 88% of the Board budget is allocated directly to core public safety services. The Board is committed to minimizing expenditures through reducing the frequency of meetings, limiting travel, not filling staff positions lost due to attrition, successfully promoting online services, and moving to paperless meetings.

The Board's appropriation of \$921,000 has remained constant for the last several fiscal years. During the 2011 Special Session the Board's appropriation was increased by 12%, contingent upon a licensing bill being enacted by the Legislature. This policy licensing bill did not pass in the last session.

Part 5: Electronic Government Services: Innovation and Success

The Board utilizes electronic government services and technology to provide effective online services and to increase efficiencies throughout Board operations. Robust online license application and renewal services are available 24/7, free of charge. The Board employs industry standards and security for online services, and only public data, governed by Chapter 13, is displayed and available at the website.

Online services for applicants, licensees, residents of Minnesota, employers, academic programs, supervisors, and continuing education providers are being utilized at the following rates:

- Total website hits: 1.73 million since 2006
- License Verification/Lookup: 67,754 since 2006
- Board Action Search/View Public Disciplinary Records: 13,670 since 2006
- License Application: 30,431 since 2006
- License Renewal: 49,069 since 2004
- Downloadable Forms: 19,042 since 2007

The "e-Compliance system" was started in 2009 to create efficiencies in the complaint resolution process. Investigative data is scanned and accessed by Board members from laptop computers via a secure internet connection. Positive outcomes include increased security, decreased time to process complaints, greater efficiencies in record retention, and decreased costs. A secure system to implement "paperless" electronic Board meetings in early 2012 will be deployed.

Part 6: Regulatory Requirements – State and National Collaboration

On the state level, the Health Licensing Boards, including the Board of Social Work, regulate individual practitioners. The Departments of Health and Human Services regulate facilities. The Board and the two Departments cooperate and regularly exchange authorized information regarding investigations and adverse actions to ensure coordination of efforts. The Board is also a critical part of the state's efforts to enforce its child and spousal support and tax laws. The Board is required to revoke or suspend licenses in these cases.

On the national level, the Board is required by federal law to report various adverse actions to certain federal agencies to enhance public protection nationwide, including the Health Insurance Portability Data Bank and the National Practitioner Data Bank, part of the federal Department of Health and Human Services. Certain adverse actions are reported to the Department of Health and Human Services' Office of Inspector General. In addition, the Board reports adverse actions to the Association of Social Work Boards' Public Protection Databank.

With licensing standards in place at the state level, federal entities are not required to perform the licensing function. Some of the federal entities that depend on state licensing and require state credentials in order to provide services to clients include the Veterans Health Administration; Indian Health Services Bureau; Medicare, Medicaid, and Other Insurer Funding; Medicare and Hospice Services; Joint Commission's Home Care Accreditation Program; Skilled Nursing Facilities; and the Departments of Defense, Army, Navy, and Air Force.

Part 7: Strategic Planning and Internal Controls: Ongoing Self-Evaluation

The Board conducts regular strategic planning and self-evaluation exercises to monitor and evaluate its organizational effectiveness and adherence to its mission of public safety. The Board also uses the outcomes of its strategic planning and self-evaluation exercises to regularly review whether goals and outcomes are being met. Strategic planning was conducted in 1994, 2000, 2007, and 2010. The 2007 plan included over 100 tasks, of which 83% were completed. The 2010 new Strategy Map includes four strategic objectives: 1) expand education and outreach; 2) establish and implement licensing requirements; 3) enhance Board effectiveness; and 4) ensure adherence to ethical standards of practice.

The Board complies fully with federal and state laws regarding: equality of employment opportunity, the rights and privacy of individuals, and the Minnesota Human Rights Act; hiring according to collective bargaining agreements; the Americans with Disability Act; purchasing requirements, including the state's Targeted Group/ Economically Disadvantaged small business program; financial operations and the required internal controls and delegation of duties; enforcing rules relating to potential conflicts of interest, and ethical conduct of its employees and Board members; paper and electronic records, which include records relating to licensing, complaints, employment and personnel, and finances; and open meeting laws.

Part 8: Stakeholder Involvement: Outreach, Collaboration, Transparency

The Board provides information about licensing requirements and standards of practice to the public and 28 stakeholder groups utilizing printed literature and brochures, PowerPoint presentations, a compliance video, the Board's website and newsletter, and telephone and e-mail contact. In FY 2009 – FY 2010 the Board offered 86 public education programs at state and national conferences and at social work academic programs.

Stakeholder groups regularly provide input to the Board. In 2008 stakeholder input was utilized in completing a report required by the Legislature regarding the need to increase the number of licensed social workers serving underserved communities, and exploring the barriers to licensure. In 2006 stakeholders participated in the Department of Human Services "Clinical Task Force", which resulted in the report for the Legislature: "Baseline of Competency: Common Licensing Standards for Mental Health Professionals". In 2005 the Board convened a Legislative Task Force to carry out the Board's goal to modify the current licensing exemptions. Legislation was introduced in 2011, but did not receive final approval. The Board welcomes and values the involvement of stakeholder groups when it develops policy, proposes fee changes, and is involved in the legislative process.

Introduction

The Minnesota Board of Social Work Self-Evaluation Report 2012 was completed by Kate Zacher-Pate, LSW, Executive Director, and is being submitted to the Minnesota Sunset Commission in compliance with <u>Minnesota Statutes 3D.06</u>, which requires the chief administrative officer of a state agency that is subject to sunset review to report to the Sunset Commission as follows:

- 1. information regarding the application to the agency of the criteria in section 3D.10;
- 2. a priority-based budget for the agency;
- 3. an inventory of all boards, commissions, committees, and other entities related to the agency; and
- 4. any other information that the agency commissioner considers appropriate or that is requested by the commission.

This report was prepared in collaboration with Board members and Board staff. It contains data reported to the Legislature in the Board's Biennial Reports and additional statistical data from Board records. <u>Minnesota Statutes 3.197</u> states that a "report to the legislature must contain, at the beginning of the report, the cost of preparing the report..." The approximate cost to prepare this report, including staff salary and benefits, is approximately \$7,700.

This Self-Evaluation Report demonstrates that the:

- licensing of social workers is essential to ensure public protection for the residents of Minnesota,
- current regulatory model and governance structure utilized by the Board of Social Work and the other Health-Related Licensing Boards is an effective and nationally-recognized model,
- Board applies mission driven financial management and priority based budgeting, while decreasing fees by 30% since 2006, and
- Board utilizes on-line services and engages in strategic planning and regular self-evaluation to ensure efficient and effective outcomes.

Board of Social Work website address: <u>www.socialwork.state.mn.us</u>

This document is available in alternative formats to individuals with disabilities by calling: Toll Free: 888.234.1320 or TTD: 800.627.3529

Agency Contact Information

Kate Zacher-Pate, LSW, Executive Director 2829 University Avenue SE #340 Minneapolis MN 55414 612.617.2110 office 612.617.2103 fax <u>kate.zacher-pate@state.mn.us</u> Kenneth Middlebrooks, Board Chair 2829 University Avenue SE #340 Minneapolis MN 55414

Agency at a Glance

The Board of Social Work was established in 1987 and operates according to laws passed by the Minnesota Legislature. The Board is mandated by Minnesota Statutes to perform the duties necessary to promote and protect the public health, safety, and welfare through the licensure and regulation of persons who practice social work in the state, including investigating complaints against licensed social workers and their practice.

The Board has diligently and deliberatively executed strategic planning beginning in 1994. This planning has resulted in greater effectiveness and efficiencies in operations, streamlining of processes, implementation of robust online services, and fee and staff reductions, while licensing more individuals and resolving increased numbers of complaints in less time.

<u>Key Facts</u>

Funding. The Board is entirely fee supported and receives no General Fund dollars. The Board remains committed to holding down expenditure and are responsible for collecting sufficient revenue from fees to cover both direct and indirect expenditures, which are deposited as non-dedicated revenue into the State Government Special Revenue Fund (SGSRF). The Board has been successful in reducing its licensing fees by 30% since 2005. Current fees for the four licenses range from \$3.37 to \$9.93 per month.

Staffing. The agency has 15 volunteer Board members appointed by the Governor and 10.6 FTE staff members. They currently serve 12,538 licensees, members of the public, applicants, employers, credentialing entities, and academic programs. The staff to licensee ratio is 1 staff to 1,183 licensees.

Licensing. The Board licenses professional social workers who meet standards of education, examination, supervised practice, continuing education, and ethical standards of practice. There are four social work licenses in Minnesota at the bachelor, graduate, and independent practice categories. New licenses issued have increased from 780 in FY 2000 to 977 in FY 2010, which is an increase of 25%. The total number of active status licensees has increased from 9,803 in 2000 to 10,905 in 2010, which is an increase of 11%.

Complaint Resolution and Enforcement. The Board investigates and resolves complaints against individual social worker's practice to ensure competent and ethical services are provided to Minnesota residents. Regulation of professional social workers affords consumers of social work services access to the Board's independent complaint resolution process. The average number of complaints received per year was 134 from FY 2000 to FY 2010.

Online Services. To increase Board efficiency, online services were implemented in 2004. The utilization rate of online license application services has steadily increased from 52% in 2006, peaking at 84%, and averaging 71% in 2010; online license renewal services increased from 4% in 2004 to 73% in 2010. A total of 67,754 online license verifications have been recorded since 2006.

Strategic Planning Initiatives. Strategic Planning, which occurred in 1994, 2000, 2007, and 2010, has proven beneficial to evaluate and streamline Board processes and to most effectively and efficiently meet the Board's core public safety mission. This ongoing self-evaluation and goal-setting process has resulted in the successful leverage of resources and important outcomes.

Major Accomplishments

1987	Social Work Legislation Enacted
1990	Board of Unlicensed Mental Health Practitioners (BUMP) Sunsets and the Board
	of Social Work Becomes an Independent Board
1991	Minnesota School Social Work Licensing Clarified
1993	Board Clinical Task Force Established
1995	Hospital and Nursing Home Social Work Licensing Exemption Repealed
1997	Definition of Clinical Practice Revised
	Legislation Adds Five Public Board Members
1998	Supervised Practice Requirements Strengthened
2000	Board Special Committee on Board Operations (SCOBO) Established to
	Streamline Operations
2001	Alternative Licensing for Foreign Born/ESL Applicants Established
2002	Board Complaint Resolution Process Improved
2003	Minnesota Merit System Accepts National Social Work Licensing Exam in lieu of
	Minnesota Merit Exam for Social Work Employment
2004	Online Services Implemented
2005	Legislation Improves Complaint Resolution Process by Requiring Time Lines for
	Resolution; and ability to suspend investigation during an investigation is being
	conducted by a county regarding a vulnerable adult or child
2006	Licensing Fees Decreased by 20%
2007	Legislation to Enact Increased Clinical Standards Following DHS Task Force
2009	Licensing Fees Decreased by Additional 10%
2011	Implementation of Increased Licensing and Clinical Standards

Awards for Regulatory Accomplishments

2000	Certificate of Commendation Semi- Finalist Cooperative Public Service Award: Presented by Governor Jesse Ventura
2002	Superior Publication Award: Presented by the Association of Social Work Boards (ASWB)
2008	Recognition Award Finalist Continuing of Operations Plan (COOP): Presented by the National Association of State Chief Information Officers (NASCIO)
2009	Board Administrator Award for Outstanding Regulatory Board Service: Presented to Executive Director by Association of Social Work Boards (ASWB)

Section I. Key Functions, Powers, Duties, Mission

Criteria (2): The mission, goals, and objectives intended for the Board and of the problem or need that the Board was intended to address and the extent to which the mission, goals, and objectives have been achieved and the problem or need has been addressed.

Mission and Goals

It is essential for public protection that regulation and licensing of social workers exists. The Minnesota Board of Social Work is the licensing and regulatory agency for social workers in Minnesota. The Board's public safety mission is to *ensure residents of Minnesota quality social work services by establishing and enforcing professional standards.* The Board's vision is to protect the public through licensure of qualified social workers and to provide timely and impartial resolution of complaints against social workers. [Board Strategic Plan September 1994]

The Board of Social Work was established in 1987 and operates according to laws passed by the Minnesota Legislature. The Board is mandated by <u>Minnesota Statutes 214</u>, <u>148E.001-148E.290</u>, and <u>148D.061-148D.063</u>, to perform the duties necessary to promote and protect the public health, safety, and welfare through the licensure and regulation of persons who practice social work in the state, including investigating complaints against licensed social workers and their practice.

The Board provides core public safety services through the regulatory oversight of social workers. Services are provided to the general public, consumers of social work services, social work applicants and licensees, students and faculty in social work academic programs, employers, supervisors, credentialing agencies, other state and local agencies, and state and national professional social work associations.

The Board licenses professional social workers in four different categories, at both the bachelor and graduate degree level, including:

- Licensed Social Worker (LSW)
- Licensed Graduate Social Worker (LGSW)
- Licensed Independent Social Worker (LISW)
- Licensed Independent Clinical Social Worker (LICSW)

The purpose of regulation through licensing is to set and enforce standards of competence and ethical practice, and to ensure that persons licensed as social workers meet educational, examination, supervised practice, and continuing education standards. Requirements must be demonstrated at initial application for licensure and at each biennial license renewal.

The scope of the Board's statutory authority applies to all applicants and licensees, all persons who use the title social worker, and all persons residing within or outside of the State of Minnesota who provide social work services to clients who reside in Minnesota, unless there are specific applicable exemptions provided by law. Board duties include, but are not limited to: (1) establishing the qualifications and procedures for individuals to be licensed as social workers;

(2) establishing standards of practice for social workers;

(3) holding examinations or contracting with the Association of Social Work Boards or a similar examination body designated by the board to hold examinations to assess applicants' qualifications;

(4) issuing licenses to qualified individuals according to sections 148E.055 and 148E.060;

(5) taking disciplinary, adversarial, corrective, or other action according to sections 148E.255 to 148E.270 when an individual violates the requirements of this chapter;

(6) assessing fees according to sections 148E.175 and 148E.180; and

(7) educating social workers and the public on the requirements of the board.

Minnesota Statutes, Section 148E - Title and Practice Act and Social Work Licenses

The Social Work Practice Act is both a title and practice protection act that requires persons in Minnesota 1) who use a title that incorporates the words "social work" or "social worker," or 2) who provide social work services in a position for which the educational basis is the individual's degree in social work, obtained from a Council on Social Work Education (CSWE) accredited academic program, to be licensed unless exempted by law.

"Clinical practice" and "practice of social work" are defined in <u>Minnesota Statutes, Chapter 148E.010</u>, subdivisions 6 and 11 as follows:

"Clinical practice" means applying professional social work knowledge, skills, and values in the differential diagnosis and treatment of psychosocial function, disability, or impairment, including addictions and emotional, mental, and behavioral disorders. Treatment includes a plan based on a differential diagnosis. Treatment may include, but is not limited to, the provision of psychotherapy to individuals, couples, families, and groups across the life span. Clinical social workers may also provide the services described in subdivision 11.

"(a) "Practice of social work" means working to maintain, restore, or improve behavioral, cognitive, emotional, mental, or social functioning of clients, in a manner that applies accepted professional social work knowledge, skills, and values, including the person-in-environment perspective, by providing in person or through telephone, video conferencing, or electronic means one or more of the social work services described in paragraph (b), clauses (1) to (3). Social work services may address conditions that impair or limit behavioral, cognitive, emotional, mental, or social functioning. Such conditions include, but are not limited to, the following: abuse and neglect of children or vulnerable adults, addictions, developmental disorders, disabilities, discrimination, illness, injuries, poverty, and trauma. Practice of social work also means providing social work services in a position for which the educational basis is the individual's degree in social work described in subdivision 13.

(b) Social work services include:

(1) providing assessment and intervention through direct contact with clients, developing a plan based on information from an assessment, and providing services which include, but are not limited to, assessment, case management, client-centered advocacy, client education, consultation, counseling, crisis intervention, and referral; (2) providing for the direct or indirect benefit of clients through administrative, educational, policy, or research services including, but not limited to:

(i) advocating for policies, programs, or services to improve the well-being of clients;

(ii) conducting research related to social work services;

(iii) developing and administering programs which provide social work services;

(iv) engaging in community organization to address social problems through planned collective action;

(v) supervising individuals who provide social work services to clients;

(vi) supervising social workers in order to comply with the supervised practice requirements specified in sections 148E.100 to 148E.125; and

(vii) teaching professional social work knowledge, skills, and values to students; and

(3) engaging in clinical practice.

Licensure is not mandated, but voluntary, in the following exempt settings, in accordance with <u>Minnesota Statute, Section 148E.065</u>:

- Students in internships required for social work degrees
- City, county, and state agency social workers
- Social workers employed by federally recognized tribes
- Social workers employed by private, nonprofit agencies with *primary service focus* specific to ethnic minority population <u>and</u> social worker is member of population
- Other licensed/designated professionals
- A geographic waiver may be granted by the Board on a case-by-case basis to agencies with special regional hiring problems

The Board's standards of practice and the purpose of its compliance laws are contained in sections <u>148E.185 to 148E.290</u>. The compliance laws protect the public by ensuring that all persons licensed as social workers meet minimum standards of practice. The Board shall promptly and fairly investigate and resolve all complaints alleging violations of statutes and rules that the Board is empowered to enforce and (1) take appropriate disciplinary action, adversarial action, or other action justified by the facts, or (2) enter into corrective action agreements or stipulations to cease practice, when doing so is consistent with the Board's obligation to protect the public.

Minnesota Statutes, Section 214

All Health-Related and Non-Health-Related Licensing Boards, including the Board of Social Work, are governed by <u>Minnesota Statutes</u>, <u>Sections 214.001-214.40</u>. This statute contains provisions such as:

- Board members terms, compensation, and removal
- Requirements related to fees charged by boards
- Requirement that each Health-Related and Non-Health-Related Board submit a biennial report to the Legislature in the fall of each even calendar year specific to budget, mission, and outcome data related to credentialing and complaint resolution services

- Creation of the following programs and services:
 - Health-Related Licensing Boards Administrative Services Unit (ASU)
 - Health Professionals Services Program (HPSP) Diversion Program
 - Council of Health Boards
 - Volunteer Health Care Provider Program
- Requirements for Health-Related Licensing Boards specific to:
 - Complaint, investigation, and hearing processes
 - Substantiated maltreatment complaints
 - Default on federal loans or service
 - Obligations regarding insurance fraud and federal loans

Agency Governance - Board Members as Policy Body

To carry out the Board's functions, Board members are appointed by the Governor to serve four-year terms, under <u>Minnesota Statutes</u>, <u>Sections 15.0597 and 15.0575</u>. Qualifications of the 15 Board members are listed in section 148E.025, and include:

- Five must be public members as defined in Minnesota Statutes, Section 214.02;
- Ten must be licensed as social workers at both the bachelor and graduate levels;
- Eight of the social work members must be employed in specific, representative practice settings;
- Six members must reside outside the 11-county metropolitan area; and
- Five members must have expertise in communities of color.

The Board has adopted bylaws to govern its proceedings. It meets six times per year and its committees meet regularly. Board officers are elected biennially. The Board employs an Executive Director and Board staff totaling 10.6 FTEs, who provide services in the areas of licensing, compliance and complaint resolution, and operations.

Board members are true "volunteers" in Minnesota state government. They serve as subject matter experts, and their expertise is invaluable as they develop legislative agendas to address policy issues, oversee the agency budget, and act to resolve complaints against social workers with the goal of ensuring public safety. While Board members are eligible to obtain a nominal per diem of \$55 per day for time spent on Board business, according to Minnesota Statutes, Section 15.0575, subdivision 3, the hours contributed in these volunteer appointments far outweigh the per diems collected by members. Board members contributed a total of approximately 1,306 hours of volunteer service during 2010. The financial benefit realized by the Board for Board member volunteer hours, based on a calculation of \$100 per hour for a contracted subject matter expert, is \$130,600. per year.

Current Board of Social Work Members

Member	Degree/License Held	Practice Setting	Location	Term
David Hallman, Immediate Past Chairman	BSW/LSW County Agency		Moorhead*	July 2004-January 2012
Janna Kovach	BSW/LSW	Hospital/Nursing Home	Rosemount	March 2009-January 2013
Carol Payne	BSW/LSW	Private Agency	Clear Lake	March 2009-January 2013
Nicole Roiger	BSW/LSW	State Agency	Saint James*	May 2010-January 2014
Tamerlee Ruebke	BSW/LSW	School	Ada*	August 2007-January 2014
Christine Black-Hughes, Vice Chair	lack-Hughes, MSW/LICSW Educator		Mankato*	April 2008-January 2012
Mary Casey Ladd	MSW/LICSW	Clinical	Duluth*	July 2004-January 2012
Jacqueline Johnson	MSW/LICSW	Clinical	Rochester*	April 2008-January 2014
Beverly Ryan	MSW/LISW	Hospital/Nursing Home	Lilydale	July 2005-January 2013
Angie Stratig	MSW/LICSW	//LICSW Community of Color/ Private Agency/Clinical Min		April 2008-January 2015
Rosemary Kassekert	Public Member	Retired/Attorney	Saint Paul	July 2005-January 2013
Kenneth Middlebrooks, Chairman	Public Member	Community of Color/ Retired/Child Advocate	Plymouth	July 2003-January 2015
Ruth Richardson	Public Member	Community of Color/City Agency	Mendota Heights	July 2005-January 2013
David Sandry, Secretary-Treasurer	Public Member	Small Business Owner	Waldorf*	August 2007-January 2014
Antonia Wilcoxon, MA	Public Member	Community of Color/DHS	Hopkins	August 2002-January 2013

* Indicates Board member outside of the 11-county metro area

Board Committees and Liaison Assignments

The Board's bylaws are an integral part of the overall operation and effectiveness of the Board and define Board committees. Board members serve on Board committees, which may also include members of the Board's Advisory Committee and public members, as appointed by the Board Chair. Staff members serve as liaisons and provide administrative support to Board committees. The Board committees are described below.

Board Committees	Liaison Assignments and Responsibility						
Compliance	Compliance Committee: Reviews policy issues relating to complaint resolution						
Committee and	and, as appropriate, makes recommendations to the Board.						
Compliance Panels	Compliance Panels: Two Compliance Panels efficiently conduct and expedite the						
	complaint resolution process.						
Communication,	Determines target audiences and tailors education, outreach, and relationship-						
Education, and	building to increase awareness of the Board's mission and regulatory role.						
Outreach Committee							
Applications Review	Board members with clinical expertise review clinical coursework required for						
Committee	eligibility for the Licensed Independent Clinical Social Worker (LICSW) license						
Executive Committee	Comprised of Board chair, vice chair, and secretary-treasurer. Duties include, but						
	are not limited to, meeting between meetings of the Board to address matters						
	identified by the chair, reviewing and making recommendations to the full Board						
	on amendments to the bylaws, and conducting the annual performance review of						
	the Executive Director.						
Finance Committee	Reviews policy issues related to budget and finance and, as appropriate, makes						
	recommendations to the Board.						
Legislation and Rules	Reviews policy issues related to legislation and rules and, as appropriate, makes						
Committee	recommendations to the Board.						
Nominating	Brings forward a slate to conduct the biennial election of officers in accordance						
Committee	with the statute, and develops and implements strategies to inform the citizens of						
	Minnesota about opportunities to serve as members of the Board.						
Advisory Committee	Created in 1994 and consists of representatives of professional social work organizations appointed by the Board chair. Reviews policy issues affecting the profession, and facilitates effective communication between the Board and the profession.						
	 National Association of Black Social Workers, MN Chapter 						
	Organization of Macro Practice Social Workers						
	Minnesota Coalition of Licensed Social Workers						
	Minnesota Conference on Social Work Education						
	Minnesota Nursing Home Social Workers Organization						
	Minnesota School Social Workers Organization						
	Minnesota Society for Clinical Social Work						
	Minnesota Association of Home Care Social Workers						
	National Association of Social Workers – MN Chapter						
	Social Workers in Marketing (SWIM)						

Ad Hoc Committees: Committee on Board Processes, Legislative Task Force, and Licensing Study Committee	Upon majority vote, the Board may create ad hoc committees to address issues specified by the Board, and, as appropriate, make recommendations to the Board. May include members of the public and subject matter experts, as needed.
Liaison Committees	Board members are appointed to serve as liaisons to agency and program entities such as the Association of Social Work Boards (ASWB), Council of Health Boards, and the Health Professionals Services Program (HPSP).

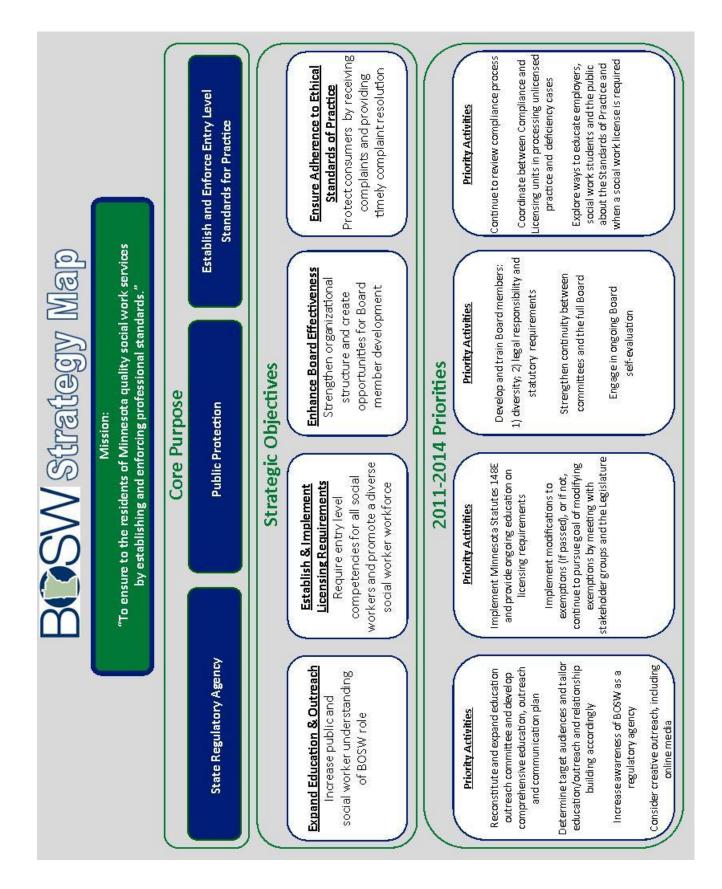
Board Strategic Planning and Self-Evaluation

Historically, the Board has conducted regular strategic planning and self-evaluation exercises to monitor and evaluate its organizational effectiveness and adherence to its mission of public safety. The Board has found it essential to identify strategic goals to be most responsive to current issues and to successfully leverage resources. A strategic planning event occurred in 1994 when the Board affirmed its mission and vision and set goals regarding operations, fees, and legislation and policy.

In 2000 the Board convened the Special Committee on Board Operations (SCOBO), with participation from social work professional associations and the social work community. The purpose of SCOBO was to review all aspects of the Board's regulatory activities, find ways to streamline and simplify its operations, and recommend regulatory and operational changes that would enable the Board to control future costs. These tasks were completed in an eighteen month period. Both short-term and long-term strategies were employed to make recommendations related to: increased efficiencies in licensure services; improvements to the Complaint Resolution Process; changes to the administrative activities related to fees and budget strategies; better utilization of the Board's website and data base system; and strategies for reducing meeting-related costs. Recommendations were implemented through administrative, rule, and legislative methods.

In 2007 the Board conducted both a Board and Staff strategic planning exercise that resulted in a strategic action plan containing over 100 tasks, of which 83% were executed by early 2010. These outcomes included: increased public education efforts; decreased expenditures resulting from internal process improvements; legislative initiatives to implement increased clinical and licensing standards; online service enhancements; and continued streamlining and simplification in all areas.

In 2010 a follow-up Strategic Realignment Workshop was conducted to reassess and reprioritize the 2007 Board Strategic Plan. A new action plan was developed to prioritize goals in order to further produce and track outcomes. The Board's Strategy Map, which identifies the four primary strategic objectives for the next three-year period, follows.



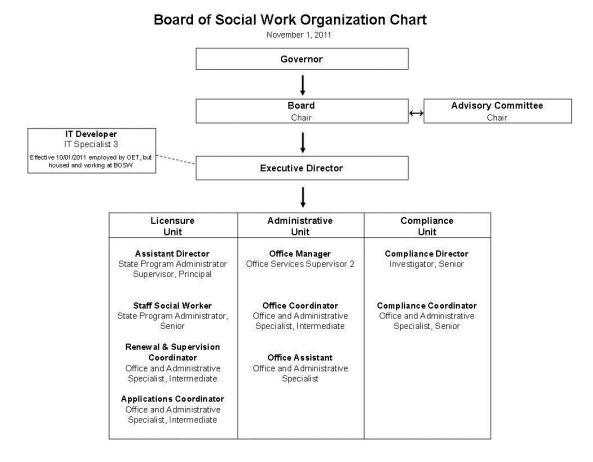
Section II. Operations – Effectiveness and Collaboration

Criteria (1): The efficiency and effectiveness of the Board.

Organizational Structure/Operations

The Board as a governance model, in cooperation with other entities, is a regulatory model that is effective; it works well. The Board, an independent, non-cabinet state agency and part of the Executive Branch, working in collaboration with the other Health-Related Licensing Boards, has been recognized nationally as having an effective governance model.

Board staff, including an Executive Director, is employed by the Board to carry out duties delegated by the Board. Board staff currently provide services to 12,538 licensees, the general public, consumers of social work services, social work applicants and licensees, students and faculty in social work academic programs, employers, supervisors, continuing education providers, credentialing agencies, other state and local agencies, and state and national professional social work associations. Staff was decreased from 13.0 to 10.0 FTE in 2004. In 2006, an IT Developer was hired to expand online services for greater efficiencies and enhanced customer service, and to integrate new statutory licensing require changes into the Board's data base system in order to conduct business. The current staff total of 10.6 FTE has been maintained since that time. The staff ratio to licensees served is 1 staff to 1,183 licensees.



Key Mission Activity Goals & Measures

The Board's primary duty and mission is to promote and ensure public safety for the residents of Minnesota. These mission driven services can be measured by the following data which demonstrates positive outcome and efficiency measures.

Licensing Services - Purpose and Data

The purpose of regulation through licensing is to set and enforce standards of competence and ethical practice, thus fulfilling the Board's mission of public protection. Social workers provide services to some of the most vulnerable populations in the state. If an individual is seen by a licensed social worker, the client can be assured that the licensed social worker has met education, examination, supervised practice, continuing education, and ethical standards. Requirements must be demonstrated at initial application for licensure and at each license renewal, which occurs every 24 months. Staff members process applications; verify compliance with statutory requirements and licensure; comply with data requests; provide assistance and information to a variety of customers; and work in collaboration with other agencies at the state, federal, and national levels.

Graduate and undergraduate social work curriculum and programs are accredited by the national accreditation body, the Council on Social Work Education (CSWE), which was founded in 1952. CSWE is a partnership of educational and professional institutions, social welfare agencies, and private citizens and is recognized as the sole accrediting agency for social work education in the country. There are approximately 700 CSWE accredited social work programs across the nation. Minnesota currently has 14 CSWE accredited undergraduate programs and 6 accredited graduate programs.

The Association of Social Work Boards (ASWB), incorporated in 1979 and devoted to consumer protection, is the association of jurisdictional boards that regulate social work. ASWB membership includes 49 states, the District of Columbia, the Virgin Islands, and the Canadian provinces. ASWB develops and maintains the standardized social work licensing examinations and is a central resource of information. There are four ASWB tests – Bachelors, Masters, Advanced Generalist, and Clinical – designed to measure competency at different educational and experience levels.

In an effort to be proactive in educating students, professionals, and consumers about licensing requirements, the standards of practice, how to file a complaint with the Board, and the compliance process, staff members offer student presentations to every CSWE accredited social work program in the state each year, work vendor booths, and offer presentations at professional and consumer conferences throughout Minnesota. Board staff developed an educational publication for students, *"Minnesota Social Work Licensure: A Handbook for Students"*, and created brochures on *"Social Work License Requirements"*, *"Continuing Education Requirements"*, and *"Compliance Process"*.

Licensing Process

To become licensed in Minnesota, applicants must meet education, experience, and examination requirements specified in Minnesota Statutes, Section 148E.055, and satisfy criminal and disciplinary

background checks. An applicant must meet all qualifications for licensure and provide all information requested by the Board within one year of the time the Board receives an application for licensure.

Four licenses are available in Minnesota. These licenses include an entry level bachelor license - Licensed Social Worker (LSW); an entry level graduate license - Licensed Graduate Social Worker (LGSW); and two independent graduate licenses - Licensed Independent Social Worker (LISW) and Licensed Independent Clinical Social Worker (LICSW). A social worker's scope of practice is determined by their license. An LSW may <u>not</u> engage in clinical practice, and an LGSW and LISW may only engage in clinical practice under the supervision of an LICSW. An LICSW may independently engage in clinical social work practice. The Board also issues temporary licenses and provisional licenses.

<u>Licenses</u>

The illustration below, *"Categories of Licensure"*, identifies the four categories of social work licensing in Minnesota and highlights the key requirements for each license.



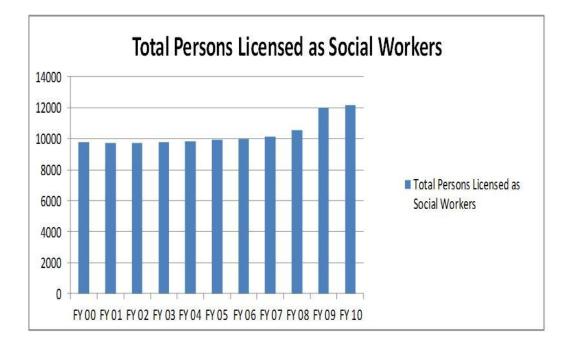
These additional requirements apply to all license categories: Standards of Practice and ethical conduct, continuing education, and Minnesota Bureau of Criminal Apprehension background check.

The following tables *"Total Persons Licensed as Social Workers"* displays trend data which demonstrates an overall increase in the number of licensees.

	Total Persons Licensed as Social Workers										
	FY 00	FY 01	FY 02	FY 03	FY 04	FY 05	FY 06	FY 07	FY 08	FY 09	FY 10
Licensed Social Workers (LSW)	*	*	5124	5112	5124	5068	5131	5119	5194	5801	5785
Licensed Graduate Social Workers (LGSW)	*	*	1090	1103	1119	1078	1103	1086	1291	1534	1576
Licensed Independent Social Workers (LISW)	*	*	789	797	742	800	741	708	697	805	793
Licensed Independent Clinical Social Workers (LSW)	*	*	2699	2786	2831	2990	3030	3242	3357	3885	4044
Total	9803	9727	9703	9798	9816	9936	10005	10155	10539	12025**	12198**

*Detailed data is not available for this time period

******Total data for FY 09 and FY 10 includes alternative statuses



Efficiency and Effectiveness: Licensing/Credentialing Services

In the past ten years the Board of Social Work has experienced a significant increase in social work licensure and renewal applications. From FY 2000 to FY 2010, social work license applications have increased by 43%, the number of licenses granted has increased by 25%, and the number of licenses renewed has increased by 33%. The trend has continued. In FY 2011, 1,820 license applications were received, for an increase of 25% over the number received in FY 2010.

Supervision Plan forms were highly recommended prior to 2006 and mandated by legislation, effective January 2006. The Supervision Plan is a simple form submitted by a licensee when supervision begins. It is a proactive method, for both the Board and the licensee, to ensure compliance with the supervised practice requirements. Continuing Education Provider approval was also enacted in January 2006, which shifted Board approval from a specific program to providers and has resulted in a more efficient process. Compliance with requirements is ensured with an audit process.

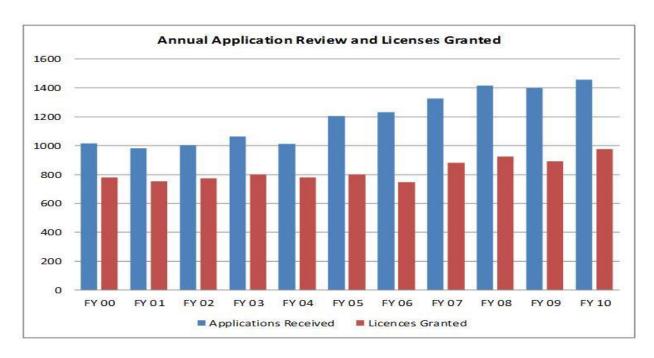
Despite the increase in services provided to customers, a 43% increase in the number of applicants, and an 11% increase in the number of active status licensees in the last ten years, Board employee complement, decreased from 13.0 to 10.0 FTE in 2004, has remained at 10.6 FTE since that time, primarily due to internal process improvements and increased utilization of online services.

Public Prote	Public Protection through Licensing Professionals Who Demonstrate Licensure Standards										
	FY 00	FY 01	FY 02	FY 03	FY 04	FY 05	FY 06	FY 07	FY 08	FY 09	FY 10
Applications Received	1016	981	1002	1063	1014	1203	1231	1326	1418	1401	1457
Licenses Granted	780	754	774	802	779	800	748	881	925	892	977
Licenses Renewed	3599	4420	4342	4524	4416	4618	4400	4623	4604	4849	4770
Supervision Plans Reviewed	*	*	*	928	823	928	1070	1010	1141	1068	1061
Supervision Verifications Reviewed	*	*	*	*	*	*	1726	1686	1719	1835	1610
Continuing Education Providers Approved	**	**	**	**	**	**	**	266	255	270	280

The table, "Public Protection through Licensing Professionals Who Demonstrate Licensure Standards", illustrates the increase in applications received, licenses granted, and licenses renewed during the past 10 years.

* Data on Supervision Plans reviewed is not available prior to FY 2003, and data on Supervision Verifications reviewed is not available prior to FY 2006

** Continuing Education Providers first enacted in 2006



The table, "Annual Application Review and Licenses Granted", illustrates the increase in applications received, licenses granted, during the past 10 years; a 10% increase from FY 2007 to FY 10.

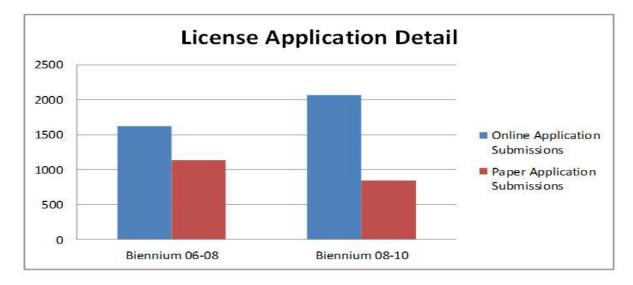
Licensing Time Frame

Since FY 2006, the number of applications submitted online has increased significantly. The online application service began in 2006, at a rate of 52%. As noted in the tables on the following page, *"License Application Detail"*, in FY 2007 – FY 2008, 59% of licensure applications were submitted online; in FY 2009 – FY 2010, 71% of licensure applications were submitted online.

An applicant has one year from the time of submitting an application for licensure to meet all qualifications for licensure and provide all information requested by the Board. Application processing time depends on when the Board receives the required documents and how quickly an applicant chooses to move through the process. For example, students may apply and take the licensing examination prior to completing their degree requirements, but they must wait until their official transcript, including degree conferred, is available after graduation to be issued a permanent license.

From FY 2007 to FY 2010, the number of applications for licensure received increased by 10%. In FY 2007 – FY 2008, 56% of online applications and 71% of paper applications were completed in 6 months or less. In FY 2009 – FY 2010, 59% of online applications and 68% of paper applications were completed in 6 months or less. The average number of days for first contact, which is notification from the Board of approval or a request for items not yet received, remained consistent during both time periods. In FY 2007 – FY 2008, average number of days for first contact was 28; in FY 2009 – FY 2010, average number of days for first contact was 28; in FY 2009 – FY 2010, average number of days for first contact was 29.

License Application Detail							
	July 1, 2006 – June 30, 2008		July 1, 2008-June 30, 2010				
Total Applied	2758		2858				
Online Applications	1624	59%	2069	71%			
Paper Applications	1134	41%	846	29%			
Average Time for Completion Online Applications	6 months or less	56%	6 months or less	59%			
Average Time for Completion Paper Applications	6 months or less	71%		68%			



Renewal Time Frame

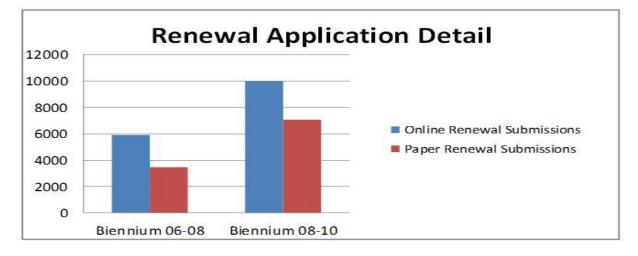
Online renewal application services began in 2004, at a rate of 4%. Since FY 2006, the number of renewals submitted online has also increased significantly. The *"Renewal Application Detail"* tables, on the following page, shows that in FY 2007 – FY 2008, 63% of renewals were submitted online; in FY 2009 – FY 2010, 71% of renewal applications were submitted online.

Renewal processing time is contingent on both the licensee and the licensee's supervisor providing all required renewal documentation in a timely manner. If the information is not received by the Board within 2 weeks of the renewal deadline, a deficiency notice requesting the information is sent to the licensee.

From FY 2007 to FY 2010, the number of applications for license renewal increased by 4%. The processing time of both online and paper renewals has improved. In FY 2007 – FY 2008, the average time for completion of an online renewal was 14 days; in FY 2009 – FY 2010, the average time for completion of an online renewal was 10 days. In FY 2007 – FY 2008, the average time for completion of

a paper renewal was 27 days; in FY 2009 – FY 2010, the average time for completion of a paper renewal was 22 days.

Renewal Application Detail							
	July 1, 2006 – June 30, 2008		July 1, 2008-June 30, 2010				
Total Applied	9390		9961				
Online Applications	5933	63%	7048	71%			
Paper Applications	3457	37%	2913	29%			
Average Time for Completion Online Renewals	14 days		10 days				
Average Time for Completion Paper Renewals	27 days		22 days				



Summary of Licensing Changes Effective August 1, 2011

The 2007 Legislature increased standards for clinical practice, including academic coursework, supervision, requirements for licensing supervisors, and continuing education, with the delayed effective date of August 1, 2011. These changes were based on the Department of Human Services Task Force Report on Clinical Standards submitted to the Minnesota Legislature on January 15, 2007 entitled: *"Baseline of Competency: Common Licensing Standards for Mental Health Professionals"*. Continuing education and supervised practice requirements were also modified for all licensees based on a comparison of requirements in other states. Following are the current requirements:

Continuing Education

- For all licensees, 40 hours of continuing education is required every two years, including 2 hours in ethics content
- For clinical social workers, at least 24 of the 40 hours must be in clinical content

• For social workers who provide licensing supervision, at least 6 of the 40 hours must be in the practice of supervision

Supervised Practice

- For LSWs and LGSWs (non-clinical), 100 hours of supervision is required over 4,000 hours of practice
- For LGSWs and LISWs (clinical), 200 hours of clinical supervision is required over a minimum of 4,000 hours and a maximum of 8,000 hours of clinical practice, with a minimum of 1,800 hours of direct clinical client contact

Licensing Supervisor Requirements

- Completion of a one-time requirement of 30 hours of training in supervision
- Clinical licensing supervisors must also have at least 2,000 hours of experience in authorized social work practice, including 1,000 hours in clinical practice

LICSW Academic Requirement

- An applicant for the LICSW license must hold a Council on Social Work Education (CSWE) accredited graduate degree in social work. An applicant must complete 360 clock hours in the following six specific clinical knowledge areas:
 - 108 clock hours in differential diagnosis and biopsychosocial assessment including normative development and psychopathology across the life span;
 - o 36 clock hours in assessment-based clinical treatment planning with measurable goals;
 - 108 clock hours in clinical intervention methods informed by research and current standards of practice;
 - 18 clock hours in evaluation methodologies;
 - 72 clock hours in social work ethics and values, including cultural context, diversity, and social policy; and
 - 18 clock hours in culturally specific clinical assessment and intervention.

Efficiency and Effectiveness: Discipline/Complaint Resolution Services

The discipline/complaint resolution process is a collaborative effort between Board staff, Board members, and the Attorney General. Board staff and the Attorney General investigate complaints. Eight Board members serving on the Board's two compliance panels review investigative findings and make recommendations to resolve complaints, after formal or informal conferences and meetings with the licensee, if needed. Complaints that are not closed are generally resolved through agreement with the licensee by corrective action that does not require full Board approval or disciplinary action that does require full Board approval. Cases involving impaired licensees may be referred to the Health Professionals Services Program, the State's diversion program for impaired health professionals. Expensive and time-consuming contested case hearings are very rare. An indication of the efficiency and speed of this process is that, in FY 2010, which is typical of the last ten years,

- 58% of complaints were resolved within three months,
- 74% of complaints were resolved within six months, and
- 84% of complaints were resolved within one year.

The Board's Compliance Unit provides information to complainants, licensees, and the public about the compliance process in a variety of formats. This information is contained in a compliance video, at the Board's website, and in paper format. Board staff is also available by telephone and email, and has presented information about the complaint process and standards of practice at regional and statewide conferences.

Please see Section VII Complaint Resolution Process page 39 for complete information and statistical outcome data on the Board's Discipline/Complaint Resolution Services.

Efficiency and Effectiveness: Online Services and Information

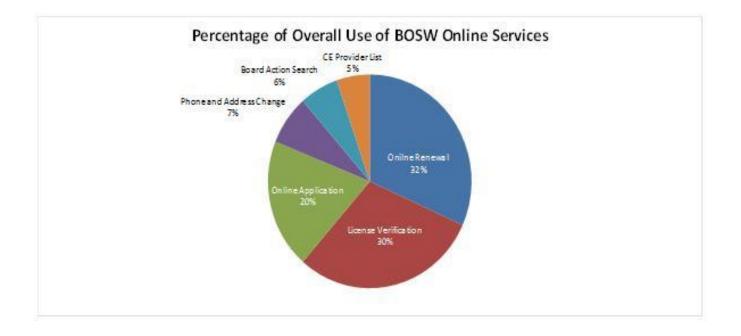
The Board supports Electronic Government Services and technology in providing efficient licensing services for applicants, licensees, and residents of Minnesota. Robust online application services have been available 24/7 since 2004 for both initial licensure and license renewal. Online license verification services allow the general public, employers, licensees, and credentialing entities to verify licensure status and to determine whether public disciplinary/adverse action has been taken against a licensee. A video on the Board's compliance process, current and timely information on laws and regulations, downloadable forms, reports and brochures, and FAQs are on the Board's website. The Board is successfully meeting its key priority of developing and utilizing electronic methods and online services to increase efficiencies throughout Board operations, as demonstrated in the tables below.

Online Services: Applicants, Licensees, Public, Employers, Students

- Downloadable forms and applications
- Online applications and license renewal
- Download of national examination scores
- Examination retake authorizations
- Address changes
- Secure credit card transactions
- License verifications for other jurisdictions
- E-newsletters
- Legislative updates

- Public orders and compliance history
- Board disciplinary and adverse action reports
- License verification
- Online Compliance Process video
- Brochures and reports
- Student Handbook
- Links to statute and other resources
- CE provider information
- Board meeting agenda and minutes

	Highlights of Online Services Effectiveness								
• • • •	Total "hits" to the Board's website since 2006 Visits to the Board's website homepage Online service activity License Verification / Lookup Board Action Search/View Public Disciplinary Records License Application License Renewal Downloadable forms	• • • • •	1.73 million 834,081 (July 2008-June 2010) 13% of online activity (since 2006) 67,754 (since 2006) 13,670 (since 2006) 30,431 (since 2006; 52% to 84%) 49,069 (since 2004; 4% to 73%) 19,042 (since 2007)						
•	Online streaming Compliance Process video	•	Created 2008						



Efficiency and Effectiveness: "Paperless" Meetings

The strategic goal of improving the complaint review process and moving from a "paper system" that was expensive, non-green, and labor-intensive to a "secure paperless system" was implemented in 2009. The paper-driven system of Board complaint review required the Board to copy and mail investigative data to Board members. The new "e-Compliance system" allows all investigative data to be scanned and accessed by Board members from laptop computers via a secure internet connection. Positive outcomes include increased security, decreased time to process complaints, greater efficiencies in record retention, and decreased costs. An estimated savings of \$700. per meeting was realized.

The Board is developing a secure system to begin implementing "paperless", electronic Board meetings early in 2012 to allow for similar efficiencies.

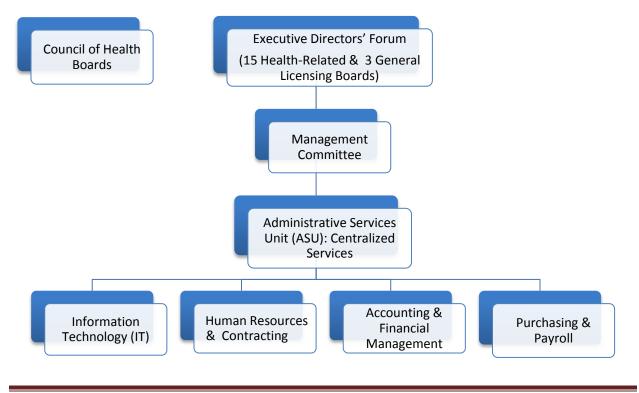
Collaboration and Effectiveness

"Minnesota Health-Related Licensing Boards: Nationally Recognized Model for Occupational Governance - Administrative Services Unit"

Public safety is achieved most effectively if primary staff is assigned to focus on a specific health profession. To ensure fiscal efficiency, the Health-Related Licensing Boards review general objectives and promote cooperation among the boards through utilization of the Administrative Services Unit (ASU) and the Executive Directors Forum in an effort to eliminate duplication of similar effort.

Administrative Services Unit (ASU)

The Board of Social Work acts in a collaborative manner with the Health-Related Licensing Boards. The Administrative Services Unit (ASU) (M.S. 214.07) is funded by all the independent Health Licensing Boards and consists of 7.12 FTE staff members who perform shared administrative and business services for all the boards. ASU provides shared services to the boards in the areas of finance, budgeting, accounting, purchasing, reporting, banking, human resources, professional and technical contracts, information technology, and payroll. ASU also coordinates the Volunteer Health Care Provider Program, which provides malpractice coverage for physicians, physician assistants, dentists, dental hygienists, and nurses serving in a voluntary capacity at a charitable organization. ASU's annual budget is determined by the Executive Directors' Forum, and the oversight of ASU is assigned on a rotating basis to one of the Health-Related Boards. The current ASU oversight board is the Minnesota Board of Examiners for Nursing Home Administrators. ASU is managed through the Executive Directors' Forum Management Committee. The following chart illustrates the governance model utilizing the Administrative Services Unit (ASU).



Health-Related Licensing Boards Information Technology Workgroup

Under the auspices of the Executive Directors' Forum, an Information Technology Work group is responsible for coordination of HLB technological projects and implementation of technological improvements. The Health-Related Licensing Boards have developed cooperative IT capabilities, including an award winning security model, advanced hardware standards, and collaborative financial resources. The Boards utilize a combination of developers, data base experts, and security credentialed staff members, including two Certified Information Systems Security Professionals (CISSIP) IT Administrators. This collaborative structure will now become part of the State's IT enterprise through the Office of Enterprise Technology.

Executive Directors' Forum

The Executive Directors' Forum consists of the Executive Directors of each independent board. The forum meets at least once a month to discuss issues and concerns affecting all boards and is governed by bylaws. The forum was created with a goal of working together on matters of common concern, thus increasing the efficiency and effectiveness of each individual board.

The forum establishes committees to develop recommendations for consideration by the forum. These committees include the Policy Committee and the Management Committee. The Management Committee makes recommendations to the Executive Directors' Forum on issues relating to the internal management of the boards' cooperative activities. The Policy Committee monitors state-wide and national policy issues and health care regulation legislation that may affect the boards.

Section III. Authority for Additional Activities Not Specified in Statute

Criteria (3): Identification of any activities of the Board in addition to those granted by statute and of the authority for those activities and the extent to which those activities are needed.

Board of Social Work Advisory Committee

The Board has an Advisory Committee authorized by its bylaws. The Board's Advisory Committee was created in 1994 and consists of representatives of professional social work organizations appointed by the Chair of the Board. The committee reviews policy issues affecting the social work profession and facilitates effective communication between the Board and the profession. The professional member organizations include:

- National Association of Black Social Workers Minnesota Chapter
- Organization of Macro Practice Social Workers
- Minnesota Coalition of Licensed Social Workers
- Minnesota Conference on Social Work Education
- Minnesota Nursing Home Social Workers Organization
- Minnesota School Social Workers Organization
- Minnesota Society for Clinical Social Work
- Minnesota Association of Home Care Social Workers
- National Association of Social Workers Minnesota Chapter

• Social Workers in Marketing

Support to Other State Agencies and Exchange of Information

The Board consistently works with other state agencies to provide information and to comply with other state mandated initiatives including:

- Partnering with the Office of Rural Health and Primary Care by participating in a state-wide workforce survey. Survey data is being collected for the Department of Health, under the authority of Minnesota Statutes section 144.052, and Minnesota Rules 4695.0300. This data will help to support health care workforce planning efforts and in directing Minnesota resources to resolve identified workforce shortages. The Board of Social Work is the first "mental health licensing board" in Minnesota to contribute data to this state-wide workforce planning initiative.
- Serving on the Minnesota Department of Human Services (DHS) Clinical Task Force in 2005 to develop common baseline licensing standards for mental health professionals.
- Serving on the Minnesota Department of Health Rural TeleMental Health Workgroup in October 2009 to produce a report for the Legislature on the needs related to tele-mental health in Minnesota.
- Serving on the Minnesota Department of Human Services (DHS) Work Group to develop and implement changes to Rule 47 for Outpatient Mental Health Services. Amendments to the Rule for outpatient mental health services covered under Medical Assistance and MinnesotaCare have been adopted and were effective June 28, 2011.
- Working collaboratively in providing information to MN Responds! to ensure that credentials of licensed health professionals are quickly available in case of a major emergency, as well as arranging for regular transfer of data between Department of Health and health licensing databases.
- Participating in cooperative efforts with the Department of Health to share information regarding licensee / registrant investigations in full compliance with the Government Data Practices Act requirements, including ad hoc Just Culture / Health meetings regarding coordinating Department of Health investigations and Health Board investigations, and exchange of information under Chapter 214.10, subdivision 8 (c). This has included development with the Attorney General Office of a data-sharing memo that permits joint investigations to be conducted among Health Licensing Boards and provides for sharing of investigative data.
- Participating in the Health Professional Services Program (HPSP) Program Committee.

Section IV. Authority Related to Fees, Inspections, Enforcement

Criteria (4): An assessment of authority of the Board relating to fees, inspections, enforcement, and penalties.

Board Fees Authorized by Minnesota Statutes, 148E.175 & 148E.180, Subdivisions 1-7

The following information describes fees the Board is authorized to collect by law. The Board's fees were moved from rule to statute in 2005, as authorized by the Legislature under Minnesota Statutes, Section 16A.1283. The Board does not conduct inspections.

All fees collected by the Board are required to be deposited in the State Government Special Revenue Fund (SGSRF). None of the fees collected are deposited in the State General Fund (SGF). In addition, the Board does not receive any General Fund dollars.

The fees listed are:

- Application, licensing, and renewal fees
- Fees charged for goods and services authorized by statute
- Fees authorized for penalties related to complaint resolution

It is important to note that because of effective fiscal management, social work licensing fees were reduced by 20% in 2006 and by an additional 10% in 2009. Based on the recommendation from the Board's Special Committee on Board Operations in 2002, the Board has moved towards a "cost of doing business" fiscal model, rather than the more traditional "build up and spend down" model. This model provides more transparency in fiscal management and complies with the statutory requirement that revenues and expenditures are closely balanced.

Effective July 1, 2009, the Board's license and renewal fees were reduced by 30%, and late fees for license renewals were reduced from 1/3 to 1/4 of the applicable renewal fees. License and renewal fees vary by license type. Based on an analysis of Board direct and indirect expenditures divided by the number of individuals licensed, the average cost per license per month is \$7.25; the average yearly cost is \$87.00. Fee amounts specified in Minnesota Statutes, Section 148E.180, subdivisions 1-7, are below.

License	Application Fee MS 148E.180 (Subdivision 1)	*Criminal Background Check Fee (Subdivision 1)	**License & Renewal Fee (Subdivision 2) 24 month fee
LSW	\$45	\$15	\$81.00
LGSW	\$45	\$15	\$144.00
LISW	\$45	\$15	\$216.00
LICSW	\$45	\$15	\$238.50
Emeritus License	N/A	N/A	\$43.20
Endorsement Application	\$85	\$15	N/A
Temporary License	\$50	N/A	N/A

*Determined by the BCA

**<u>All licensing and renewal fees submitted on or after 7/1/10 through 6/30/15 will be assessed the mandatory OET</u> <u>Surcharge. [See Minnesota Statutes, Section 16E.22.]</u> If initial term of licensure is more or less than 24 months, the fee is prorated proportionately.

CE Provider Fees (Subdivision 4)	Fee Amount	
1-8 Clock Hours in One-Year Period	\$50	
9-16 Clock Hours in One-Year Period	\$100	
17-32 Clock Hours in One-Year Period	\$200	
33-48 Clock Hours in One-Year Period	\$400	
49+ Clock Hours in One-Year Period	\$600	
Late Fees (Subdivision 5)	Fee Amount	
Renewal Late Fee	1/4 of renewal fee	
Supervision Plan Late Fee	\$40	
License Card and Wall Certificate Fees (Subdivision 6)	Fee Amount	
Duplicate License Card	\$10	
Duplicate License Wall Certificate	\$30	
Reactivation Fees (Subdivision 7)	Fee Amount	
Temporary Leave	Prorated share of renewal fee	
Emeritus Status	Prorated share of renewal fee	
Expired License	New fee is 1.5 times renewal fee	

Fees Charged for Goods & Services Statutory Authority

Minnesota Statutes, Section 16A.1283 provides that "an executive branch state agency may not impose a new fee or increase an existing fee unless the new fee or increase is approved by law." However, the statute exempts from this requirement "charges for goods and services provided for the direct and primary use of a private individual, business, or other entity." Fees charged by the Board for "goods and services provided for the direct and primary use of a private individual, business, or other entity" include fees for non-sufficient fund checks, copying, written license verifications, and public data mailing lists.

Fees Authorized by Statute for Enforcement and Penalties Related to Disciplinary Action

In accordance with Minnesota Statutes, Section 148E.260, subdivisions (7) and (8), the Board is authorized to:

"(7) impose a civil penalty of up to \$10,000 for each violation in order to discourage future violations or to deprive the licensee of any economic advantage gained by reason of the violation; or

(8) impose a fee to reimburse the board for all or part of the cost of the proceedings resulting in disciplinary action, including, but not limited to, the amount paid by the board for services received from or expenses incurred by the Office of Administrative Hearings, the Office of the Attorney General, court reporters, witnesses, board members, board staff, or the amount paid by the board for reproducing records."

In the past ten years, the Board has assessed administrative costs or civil penalties in 26 cases totaling \$13,325., ranging from \$125. to \$2,000.

Section V. Regulation and Public Protection

Criteria (5): Whether less restrictive or alternative methods of performing any function that the agency performs could adequately protect or provide service to the public.

National Data

Anthony A Bibus III, PhD, LISW, and Needha Bouttè-Queen, PhD, in their book, *Regulating Social Work: A Primer on Licensing Practice*, state that "lawmakers in every state have deemed it to be in the public interest to regulate social workers in order to protect residents of their states".

According to the Association of Social Work Boards (ASWB), all 50 states, 10 Canadian provinces, the District of Columbia, Puerto Rico, and the Virgin Islands regulate the practice of social work through licensure or certification programs established under state boards or regulatory agencies. These jurisdictions vary in defining social work practice and in the titles that licensees may use in professional practice; however, regulation is in effect in every American state and territory.

The professional association, the National Association of Social Workers (NASW), estimates that 70%-80% of all professional mental health providers are trained Social Workers.

Minnesota Experience

In 2007 the Legislature required the Board to "study and make recommendations to the Legislature by December 15, 2008, on how to increase the numbers of licensed social workers serving underserved communities and culturally and ethnically diverse communities. The study shall also explore alternative paths to licensure that does not include a standardized examination."

In 2008 the Board contracted with Lindsey Alexander, B.A., M.M.P., and Bill Johnston, B.S., M.A, to perform this research. It was found that "licensing does make a difference – more perhaps for groups/institutions than for individuals, but it does make a difference. If an institution is licensed, the public can usually be guaranteed that it has more access to ancillary services and has a longer-term record. Both of these characteristics of institutions are correlated with long-term successful outcomes. Regarding individuals, licensing tends to show knowledge and academic background. Licensed individuals are also more likely to be involved in ongoing professional development..."

They also reported that "another area in which licensing has been demonstrated to show differences is in cultural sensitivity. Licensing examinations with appropriate multicultural measures do effectively predict who will show more cultural sensitivity in the workplace."

Under the Board of Unlicensed Mental Health Practice, Minnesota had experience with a lesser form of regulation from 1989 – 1991 that ultimately was determined to not effectively protect the public. This model of regulation, which proved to be ineffective, was "voluntary registration". The "voluntary registration" model had no viable enforcement authority. The responsibilities of this office were transferred to the Minnesota Department of Health, whose sole duty was to take complaints against

unlicensed mental health workers. In 2005 the Minnesota Office of Mental Health Practice (OMHP) was transferred from the authority of the Minnesota Department of Health to become an independent program, with an Advisory Council under the auspices of the Minnesota Health Licensing Boards. The OMHP model did not require registration, but could investigate alleged complaints regarding unprofessional or incompetent practice against unlicensed mental health workers. However, in the experience of OMHP, often no known address was found for the respondent, and it was difficult to follow up on these complaints. Unlicensed individuals were, and still are, authorized by law to engage in "psychotherapy" without meeting standards and being regulated. In 2009 the Minnesota Legislature determined that this system was not effective, and the OMHP program was allowed to sunset.

Fiduciary Obligation

Minnesota Statutes, Section 214.06 requires the Board to collect fees sufficient to cover expenditures. Fees collected are deposited in the State Government Special Revenue Fund and appropriated back to the Board. An alternative and less burdensome method of funding Board operations would be for the Board to have fiscal authority without this legislative appropriation, thus eliminating a layer of bureaucracy. Fees would be established by the Legislature, with oversight by Minnesota Management and Budget. These mechanisms would provide external and internal audit controls to assure the public of compliance with Minnesota law and best accounting practices.

Legal Services

Minnesota Statutes, Section 214.103 requires that legal and investigative services be provided by the Minnesota Attorney General's Office (AGO). The Boards of Dentistry, Medical Practice, and Nursing have implemented a system in which Board staff draft legal documents of notice rather than the AGO. The AGO reviews these documents for accuracy, and for compliance with the law. This practice has resulted in a 50% decrease in the time from receipt of a complaint until it is forwarded for review before the Board. There has been no change in costs to the Board through this mechanism. A logical expansion of this practice would be for the Health Licensing Boards to retain their own legal counsel and investigative staff rather than contract with the AGO. Legal and investigative services would be shared among the Health-Related Licensing Boards on a fee-for-service basis. Based on the experience with drafting of notices, complaint resolution time would be reduced and public safety enhanced.

Section VI. Agency Structure and Program Administration

Criteria (6): The extent to which the jurisdiction of the Board and the programs administered by the Board overlap or duplicate those of other agencies, the extent to which the Board coordinates with those agencies, and the extent to which the programs administered by the Board can be consolidated with the programs of other state agencies.

Licensing Authority

The Board of Social Work is the only state agency authorized to perform the regulatory functions of licensing, and investigating and resolving complaints against professionals licensed as social workers. No other state agency performs this core public safety mandate. The Board protects the public with an effective regulatory model.

When a complaint related to employment performance is reported, or when a complaint is reported by a consumer, the Board works collaboratively with other city, county, or state agencies to review and resolve the complaint. This includes, but is not limited to, specific county agencies, Minnesota Department of Health, Minnesota Department of Human Services, and Ombudspersons' Offices. The Board works with the Minnesota Department of Revenue when related action is required by the Board due to failure of a licensee to pay spousal or child support, income tax delinquency, or failure to pay student loans. The Board provides a critical service as the one agency that is authorized to sanction licensed professional social workers.

In the event a licensed social worker is licensed with another Health Licensing Board, investigations are conducted jointly to the extent possible.

The Health-Related Licensing Boards have established strategies to work collaboratively, avoid duplication of resources, and maximize effectiveness and efficiencies.

Section VII. Complaint Resolution Process

Criteria (7): The promptness and effectiveness with which the agency addresses complaints concerning entities or other persons affected by the agency; including an assessment of the agency's administrative hearings process.

Complaint and Disciplinary Activity

The Board's complaint and compliance process is critical to the Board's mission of protecting the public. The complaint and compliance process allows the public to report to the Board licensees whose conduct they believe is substandard. The Board is required to investigate the reports. The Board is authorized by law to take corrective or disciplinary action against licensees after an investigation in which due process is protected. This ensures competent and ethical social work practice.

A detailed description of the Board's complaint process is available online at the Board's website and on paper, upon request. This descriptive document was recently held up as an example of superior public communication of the complaint process at the annual national conference of the Citizens Advocacy Center. The Board's website also has a video about the compliance process. A compliance brochure is available online and on paper. The Board's website allows the public to find, 24/7, license status of a practitioner, including viewing and printing of full copies of corrective and disciplinary action taken by the Board. In addition, Board staff frequently talk with members of the public and provide information about how to file a complaint and how the compliance process works, including speaking at regional and statewide conferences.

Complaint Resolution Process Improvements

The Board's complaint and compliance process is constantly reviewed and improved. Major improvements that increased the efficiency, speed, and thoroughness of the process were instituted in 2001 and 2002 after extensive discussions with other stakeholders and as part of the Board's Special Committee on Board Operations (SCOBO) process. In addition, 2006 amendments to the Social Work Practice Act resulted in clarifications of the standards of practice and streamlined the Board authority.

Most importantly, these amendments established the only case resolution timelines and mandatory periodic updates to complainants of any Health Licensing Board.

Continuing improvements to the Board's complaint resolution process have been made as part of the Board's ongoing strategic planning, including the Board's e-Compliance initiative. E-Compliance is a system developed whereby all case material is scanned and is accessible to Panel members securely online. By removing paper from the process, the process is faster, less expensive, more efficient, more environmentally responsible, and more secure.

Statewide Regulation and Collaboration

On the state level, the Health Licensing Boards, including the Board of Social Work, regulate individual practitioners. The Departments of Health and Human Services regulate facilities. The Health Licensing Boards and the two Departments cooperate and regularly exchange authorized information regarding investigations and adverse actions. This collaboration ensures that reports about facilities result in investigations of individual practitioners and vice versa. This collaboration is efficient in that agencies regularly use another agency's investigative data and findings as a basis for their action, streamlining the investigation process. In addition, individual Health Licensing Boards cooperate in cases where a licensee holds multiple licenses and where an incident results in allegations about multiple licensees holding different licenses. Because all Health Licensing Boards are represented by the Attorney General, only one seamless investigation is required.

The Board is also a critical part of the state's efforts to enforce its child and spousal support and tax laws. The Board is required by law to revoke or suspend the licenses of licensees who fail to pay child or spousal support, fail to file tax returns, or fail to pay taxes.

National Reporting Obligations

On the national level, the Board is required by federal law to report various adverse actions to certain federal agencies. Most adverse actions must be reported to the Health Insurance Portability Data Bank and the National Practitioner Data Bank, part of the federal Department of Health and Human Services. Certain adverse actions are reported to the Department of Health and Human Services' Office of Inspector General. In addition, the Board reports adverse actions to the Association of Social Work Boards' Public Protection Databank. Thus, a wide range of entities and individuals have access to the Board's corrective and disciplinary actions to protect the public nationwide.

Licensure also supports the federal government's efforts to provide quality health and mental health services to members of the armed forces and to veterans. The Department of Defense and the Department of Veterans' Affairs require that their social workers be licensed. Together, this national reporting system ensures that health care consumers and other federal and state regulators have up-to-the-minute information about corrective and disciplinary action taken in Minnesota.

Complaints and Investigations

Reports of alleged substandard practice provided by licensed social workers may be initiated by clients, families and friends of clients, co-workers, employers, health and mental health professionals, health

plans and insurers, supervisors, and others. Complaints are also opened as a result of information received on applications for licensure and renewal and supervision documents, from federal agencies, and from other state agencies such as other Health Licensing Boards, the Departments of Health and Human Services, and various state ombudspersons. Complaints contain allegations such as failure to maintain professional boundaries with clients, including personal and sexual relationships with clients; lack of competence; impaired practice; failure to maintain the confidentiality of client data; failure to make a mandated report; failure or inability to document services; fraud and theft; and misrepresentation of credentials and unlicensed practice.

Types of Complaints Received FY Type of Complaint **Boundaries** Confidentiality Failure to Report Fee Payment Issue Impairment Licensure Non-Jurisdictional Other Practice Issue Sexual Conduct or Harassment **Unlicensed Practice** Misrepresentation Violation of Board Order Total

The following chart *"Types of Complaints Received"* itemizes complaints received by the type of violation alleged.

Complaints are investigated by Board staff or by the Attorney General's Office depending on the complexity of the complaint. Certain complaints, such as those alleging sexual conduct with clients, must, by law, be investigated by the Attorney General. Complaints, depending on their complexity, involve gathering additional information from the complainant; information from the licensee, including his or her records; and information from other witnesses.

Completed investigations are reviewed by one of two four-member Compliance Panels. Volunteer Board member review of investigations and resolution is invaluable. The Panels, which include the perspective of public Board members, allow the Board to take advantage of the deep social work expertise of professionally licensed Board members. Without this tremendous resource, the cost of contracting for this expertise would be staggering. Each Panel is represented by an Assistant Attorney General, who participates in the Panel's meetings. The Attorney General's participation ensures that the Panels' decisions are consistent and legally sound. After review of the investigation, Panels may close the complaint, meet face-to-face with the licensee formally or informally, depending on the severity of the allegations and findings, and may propose corrective or disciplinary action with the advice of the Attorney General. The value of educational meetings and investigative conferences is that they allow Panel members to receive direct input from licensees and maximize the likelihood that the proposed remedy is appropriate, ensuring that it both corrects the violation and protects the public by preventing future violations.

The Board informs complainants about the status of their complaints from time to time, as permitted by the Government Data Practice Act, upon request, and at the end of the investigation.

Complaints investigated by Board staff generally are reviewed by a Panel within two to four months of receipt of the complaint and at the first meeting after completion of the investigation. Complaints requiring Attorney General investigation, an educational meeting, an investigative conference, or a contested case hearing generally take longer. The Board's statistics indicate that more than 58% of all cases are resolved in less than three months, about 74% of all cases are resolved in less than six months, and 84% are resolved within one year. The few cases that take longer are serious enough to require an Attorney General investigation, an educational meeting, or an investigative conference with the meetings sometimes occurring after the Attorney General investigation. A very few cases that take longer than one year to resolve are generally those cases that require an Attorney General investigation or that must be resolved through a contested case hearing.

The following chart *"Public Protection through Complaint Resolution"* indicates the number of complaints received and resolved per fiscal year, including the number resolved by public corrective or disciplinary action.

Public Protection through Complaint Resolution											
FY FY<									FY 10		
Complaints Received	206	120	123	207	167	114	91	106	116	123	106
Complaints Resolved	189	125	109	213	148	143	113	94	111	138	108
Board Action Taken	21	14	16	17	10	12	24	14	8	6	20

The following chart *"Types of Resolutions Including Types of Corrective and Disciplinary Action"* shows how many complaints are closed and how many complaints result in a specific type of corrective or disciplinary action.

Types of Resolutions Including Types of Corrective and Disciplinary Action										
	FY	FY	FY	FY	FY	FY	FY	FY	FY	FY
Type of Resolution Closed	01	02	03	04	05	06	07	08	09	10
Dismissed or Closed	111	93	196	138	131	113	98	96	116	106
Revocation	0	1	4	2	3	2	2	0	0	0
Voluntary Surrender	2	1	2	2	1	0	1	0	0	1
Suspension	2	0	3	2	2	1	2	1	0	3
Restrictions, Limitations, Conditions	4	10	2	1	3	2	2	0	4	1
Reprimand	2	0	6	2	2	0	1	3	0	3
Agreement for Corrective Action	4	4	0	1	1	2	1	0	0	5
Stipulation to Cease Practice	0	0	0	0	0	0	4	0	0	1

The following chart "Complaint Resolution Time" shows how quickly complaints are resolved.

Complaint Resolution Time											
									FY 10		
3 months or less	*	*	*	60%	54%	60%	43%	49%	57%	53%	58%
6 months or less	*	*	*	82%	80%	88%	68%	69%	72%	74%	74%
9 months or less	*	*	*	*	84%	93%	80%	76%	84%	87%	84%
9-18 months	*	*	*	*	91%	97%	100%	99%	100%	100%	95%

*Detailed data is not available for this time period

Complaint Resolution: Discipline and Corrective Action

The Board takes corrective or disciplinary action when a complaint is substantiated, and when such action is required to protect the public and prevent re-offense. In most cases quality investigations result in evidence that encourages licensees to agree to settlement short of costly and time-consuming contested case hearings. Corrective and disciplinary action is public data and is reported as required, discussed earlier in this section, to protect the public in Minnesota and nationwide.

Corrective action is taken in less serious cases. Examples of less serious cases that resulted in corrective action include cases where licensees have engaged in unintentional violations of standards of practice because of lack of knowledge that were determined to be remediable by education and supervised practice. It typically involves remedial education, supervised practice, and reports to the Board.

Disciplinary action is taken in more serious cases. Examples of more serious cases that resulted in disciplinary action are cases where licensees have had personal and sexual relationships with clients and former clients, where licensees have violated a client's confidentiality, where licensees have engaged in

a pattern of substandard billing and documentation practices, have neglected vulnerable adult clients, and have stolen money from vulnerable clients. It may involve revocation or suspension of a license, administrative costs, and civil penalties. More often, disciplinary action involves a reprimand and conditions, limitations, restrictions, and supervision designed to correct the problem and ensure that the licensee's practice is limited and monitored for a period of time.

The Panels hold educational meetings and investigative conferences with licensees that do not result in corrective or disciplinary action. A total of 21 educational meetings and investigative conferences were held from July 1, 2009 to June 30, 2010, and 29 occurred from July 1, 2010 to June 30, 2011. These meetings are not tracked in statistical charts. But these conferences and meetings allow the Panels to meet with licensees face-to-face and close the complaint when it determines that the licensee made a one-time error or has, since the error, taken appropriate remedial action to reduce the risk of reoffense; thus, public protection goals are met.

Examples of cases in which the Board has taken disciplinary action include those of licensed social workers who have had sexual relationships with clients; have struck clients; were convicted on federal child pornography charges; and have stolen money from clients, including one case in which a social worker, in multiple transactions, "borrowed" \$105,000. from a client. Many cases involve a multitude of practice-related issues.

Contested Case Activity

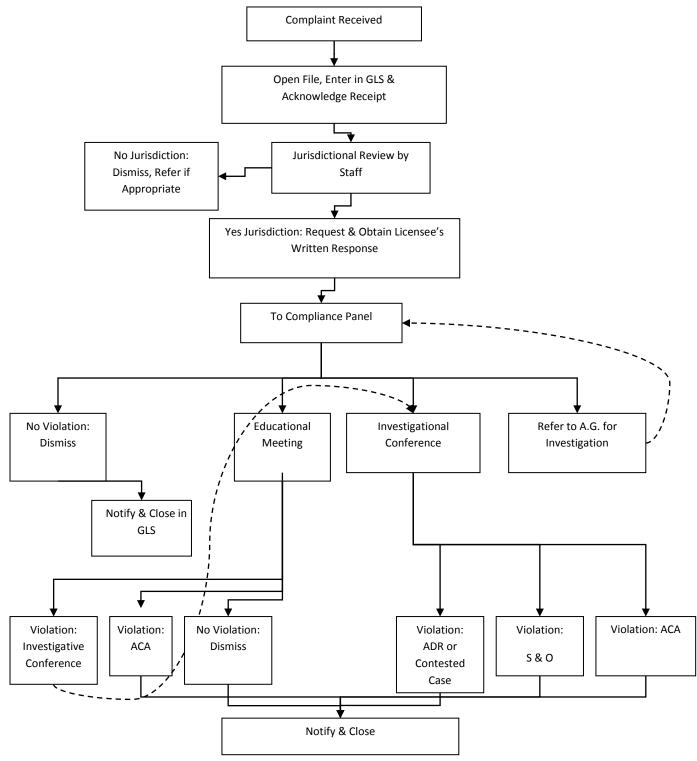
The Board generally is able to resolve cases through voluntary agreements with licensees. The Board has been involved in seven contested cases in the last ten years.

Compliance Monitoring

Cases resulting in corrective or disciplinary action are actively monitored by Board employees to ensure compliance with the agreement or order. Generally, these cases result in the licensee having to obtain education and having his or her practice conditioned, limited, restricted, or supervised. If education and reports of compliance with conditions, limitations, restrictions, and supervision are not submitted, they are requested. Licensees are generally compliant with corrective or disciplinary action and are prompted to submit required information if reporting is late.

A review of corrective and disciplinary action taken in the past ten years indicates that licensees who have been subjected to corrective or disciplinary action are rarely subject to subsequent complaints. This result is a clear indication of the success of the Board's careful and thorough complaint process and vigilant monitoring of corrective and disciplinary action.

The Board's complaint and compliance process is a critical part of the State of Minnesota's and the federal government's efforts to protect health and mental health consumers. Courts have recognized the importance of this process as described in the following quote: "It is difficult to conjure up a state interest more compelling than oversight of the professional conduct of local health care providers, nor a subject in which Rhode Island's citizenry would have a more legitimate stake." *Calenda v. Rhode Island Board of Medical Review*, 565 F. Supp. 816, 819-820 (1983).



The Board's *"Compliance/Complaint Resolution Process Flow Chart"*, which explains the Board's procedures, is on the following page.

Note: "Notify" means to inform the complainant and the applicant or licensee of the disposition of the case. Where the Board or Panel has taken corrective or disciplinary action, it includes notification of ASWB/HIPDB/NPDB as required by law and posting to the Board's website. Complainants are notified of the progress of the investigation, as required by law.

Section VIII. Rules, Policy, Legislation Enactment/Development and Stakeholder Participation

Criteria (8): An assessment of the Board's rulemaking process and the extent to which the Board has encouraged participation by the public in making its rules and decisions and the extent to which the public participation has resulted in rules that benefit the public.

Board Rules

The Board of Social Work Rules, Chapter 8740, was effective from 1989 through 2005. During the 2005 Legislative Session, the Legislature repealed the Board's Rules and all rule requirements were incorporated into statute. This change was made in order to:

- Simplify and streamline the Board's requirements to make them easier to understand and comply with, reducing the regulatory burden for licensees and applicants
- Reduce the possibility of discrepancies between statute and rules
- Eliminate the time-consuming and costly rulemaking process
- Create greater transparency as the consolidation of statutes and rules makes it easier to understand and comply with requirements as they are contained in one place

Fees contained in Rule were put into the Board's Statute to comply with Minnesota Statutes, 16A.1283, which requires executive branch agencies to receive legislative approval, and incorporate any new fees or increase existing fees into statute.

Before the repeal of the Board's Rules in 2005, the Board followed all the requirements to promulgate rules including publishing a Statement of Need and Reasonableness (SONAR), meeting public posting requirements and requests for comments, and satisfying the public hearing requirements with the Administrative Law Judge. The Board completed rulemaking processes in 1998 and 2001.

Stakeholder Participation

The Board welcomes and values the involvement of stakeholder groups when it develops policy, proposes fee changes, and is involved in the Legislative process. Stakeholder groups have provided input through the following mechanisms:

- Representatives of consumer advocacy groups provide the consumer perspective on the need for licensing standards and regulation and the need for the Board's independent complaint resolution process.
- At the request of the Board, Representatives of the Board's Advisory Committee provide input.
- The Board's Legislative Task Force and Legislation and Rules Committee allow for representatives of the professional social work associations to provide input, while not acting as decision makers.
- Information on any proposed legislation is always posted to the Board's website.
- A special designated Board email address was created in an effort to identify and encourage input regarding recent proposed legislation.
- Applicants and licensees are provided notifications and directed to the Board's website for complete details of any legislative activities.

• The Board invites input from social work educators and academic programs.

Recent Legislative Initiatives

During 2006 the Board participated in the Department of Human Services "Clinical Task Force" which resulted in the report "*Baseline of Competency: Common Licensing Standards for Mental Health Professionals A Report to the Minnesota Legislature*" which was required by Laws of Minnesota 2006, Chapter 267, Article 1, Section 12. The Task Force was multi-disciplinary in membership, with a variety of stakeholder groups participating. Legislation was enacted in 2007 to increase the Board's clinical licensing standards including specific coursework, supervised practice, continuing education, and licensing supervisor requirements.

In 2005 the Board convened a Legislative Task Force to carry out the Board's goal of modifying the current licensing exemptions. The Task Force met, and continues to meet, with stakeholder groups to identify issues that impact consumers, social workers, public sector agencies, unions, and non-profit agencies. It is designed to be responsive to stakeholder concerns, while balancing the Board's mission of protecting the public. Legislation was introduced in 2011 to modify licensing exemptions, but was not enacted. The Board met with numerous groups in developing the legislative proposal. The list below identifies stakeholders with which the Board consulted in regard to this legislative initiative, and illustrates the Board's commitment to involve the public and provide an opportunity for input in order to be responsible and transparent in its regulatory mission.

- Minnesota Welfare Training System
- Office for Mental Health and Developmental Disabilities Ombudspersons
- Office for African American Families Ombudspersons
- Supreme Court Guardian ad Litem Program
- Mental Health Advocates including National Alliance on Mental Illness (NAMI)
- Minnesota Association for Children's Mental Health
- Mental Health Association
- County Directors, Managers, and Supervisors
- Minnesota Association of County Social Service Administrators
- Minnesota Department of Human Services
- Minnesota Merit System
- American Federation of State, County and Municipal Employees (AFSCME) Union
- Minnesota Association of Professional Employees (MAPE) Union
- Teamsters Joint Council Union 32
- Minnesota Conference on Social Work Education
- Board of Social Work Advisory Committee representing nine social work professional associations
- Cultural Providers Network
- Public forums were held at the Minnesota Social Services Association, National Association of Social Workers – Minnesota Chapter, and St. Louis County Health and Human Services Conference

Section IX. Compliance with Federal and State Laws Related to Employment, Data Privacy, Purchasing

Criteria: (9): The extent to which the Board has complied with federal and state laws and applicable rules regarding equality of employment opportunity and the rights and privacy of individuals, and state law and applicable rules of any state agency regarding purchasing guidelines and programs for historically underutilized businesses.

Employment

The Board of Social Work complies fully with federal and state laws regarding equality of employment opportunity, and the rights and privacy of individuals. The Executive Director is entrusted with the responsibility for ensuring that federal and state equal employment opportunity laws are fully satisfied. This goal is achieved with the assistance of the Board's designated affirmative action officer, located in the Administrative Services Unit.

The Board maintains and updates an affirmative action plan on a biannual basis. Criteria for affirmative action plans are established by Minnesota Statutes, Sections 43A.19 and 43A.191, and Minnesota Management and Budget's (MM&B) Administrative Procedure 19.1. The Executive Director prepares and implements the Plan and signs the Plan's Statement of Commitment.

The Board fully complies with the Minnesota Human Rights Act and applicable federal equal opportunity laws. The Board works cooperatively with the Administrative Services Unit, which provides expertise on equal opportunity issues.

The Board's website homepage has an affirmative action / equal opportunity statement, lists the telephone number for hearing / speech relay, and provides an email address for comments on the web page. The Board responds to all applicable state surveys regarding equal opportunity / affirmative action, including an annual Americans with Disability Act (ADA) Survey.

This Board has received no complaints of violation of equal employment opportunity laws. All new employees are informed of equal employment opportunity policies and laws upon orientation and a copy of the Board's affirmative action plan is reviewed with them, including equal opportunity provisions and the Board's complaint process. Training on equal opportunity / affirmative action requirements is periodically provided to staff through in-person training sessions and online training, and regularly reviewed at Executive Director and Office Manager meetings.

The Board conducts its hiring in accordance with all applicable collective bargaining agreements and state and federal law, and in consultation with the Board's affirmative action designee. The Board uses the state's resume-based, skill-matching process. Resumes are evaluated against established minimum qualifications. Hiring processes are closely reviewed to ensure compliance with equal employment opportunity. Interview questions are established based on knowledge, skills, and abilities required to perform the responsibilities of each position.

It is essential that the Board represent the diversity of Minnesotans in geographic location, race, and ethnicity. To help ensure diversity of Board members, section 148E.025 requires that at least five of the 15 members "have expertise in communities of color", six members must reside outside the 11-county metropolitan area, and five members must be public members.

Applicants and the general population are becoming increasingly diverse, including cultural and language diversity. The licensing boards continue to examine matters pertaining to possible barriers in licensure as well as issues surrounding working with clients from diverse populations.

Purchasing and Contracting

The Board complies with all purchasing requirements, including the state's Targeted Group / Economically Disadvantaged small business program. Contractual guidance is provided by the Administrative Services Unit, which also provides the services of a buyer who has been trained in all state purchasing requirements, including Targeted Group / Economically Disadvantaged preferences in purchasing. The Board is also strongly supportive of Minncor purchasing. Applicable rules of any state agency regarding purchasing guidelines and programs for historically underutilized businesses are applied.

The Board is aware of state contracting requirements regarding accessibility for IT services over \$25,000., and is assisted by the Administrative Services Unit IT and contract staff. Training has been provided by the Department of Administration, Materials Management Division.

All departments and agencies making authorized, direct purchases must follow the required policies and procedures, all applicable laws and rules, including but not limited to:

- Minnesota Statutes Chapters 13, 16A, 16B, and 16C;
- Minnesota Statutes Chapter 10A.07, 15.43, 43A.38, 609.43, and 609.456;
- Minnesota Rules part 1230; and
- Uniform Commercial Code (UCC) as adopted by Minnesota (see Minnesota Statutes Chapter 336).

The Board maintains a record retention policy in accordance with Minnesota Chapter 13, which addresses paper, electronic, and scanned records in all areas of Board business. The record retention policy is reviewed and updated, as needed. Personnel, human resource, safety, Affirmative Action, ADA, Family Medical Leave Act (FMLA), payroll, and other identified records are secured according to the Department of Employee Relations (DOER) human resource record retention schedule.

The "Tennessen Warning" is information that the Board is required by the Government Data Practices Act, Minnesota Statutes, Section 13, to provide to all persons from whom it requests data. This warning is the state's requirement that persons from whom the Board requests data be told what the data will be used for, whether the data must be provided to the Board, the consequences of not providing the information, who will have access to the data, and the status of the data under the Act.

The Board requests data from applicants for licensure; applicants for license renewal; applicants for reactivation of licenses; applicants for different license statuses; persons filing complaints about

applicants and licensees; applicants and licensees against whom complaints have been filed; witnesses who have information about applicants and licensees against whom complaints have been filed; persons consulting with or supervising applicants and licensees in licensure, corrective action, and disciplinary action settings; continuing education providers; and in other situations.

In each case the Board's written request for information identifies as clearly as possible what data the Board is requesting; the statutory authority for the Board's request; why the Board needs the data; how the data will be used (generally to process the applicant's or licensee's application and to investigate a complaint against an applicant or licensee); that the person need not provide the data, but that if the person does not provide the data, the Board may not be able to process their application or, in the case of a complaint, that the failure may result in the Board's inability to investigate the complaint or that the Board will subpoena the data; that access to the data is limited to Board staff, Board members, and Attorney General staff; and that the data will be classified as confidential, private, or public, depending on the type of data, the status of the situation, and the requirements of the Government Data Practices Act.

Security Profiles – related to MAPS, SEMA4, SWIFT, Fiscal Notes, Budget, Payroll, HR, Warehouse Data

Certified profile statute reports are reviewed and are due to the Minnesota Department of Management and Budget every year. Individual profiles are maintained and reviewed frequently to ensure compliance with statutes, rules, policies, and procedures. When profiles are added or changed, individual staff profiles are reviewed.

The Board follows statutes, rules, policies, and procedures related to ensure compliance with financial operations. The Minnesota Department of Management and Budget and the Minnesota Department of Administration provide policies and procedures and training related to financial activities that staff are required to maintain. The Administrative Services Unit provides policies and procedures for Health-Related Licensing Board staff to follow. The required internal controls and delegation of duties are in place and reviewed regularly; and financial documents are monitored, reconciled, and audited internally.

Section X. Potential Conflict of Interest

Criteria (10): *The extent to which the Board issues and enforces rules relating to potential conflicts of interest of its employees.*

The Executive Director of the Board is responsible for enforcing rules relating to potential conflicts of interest of its employees. Board members are also required to comply with the State Code and the Board's bylaws, which specifically address conflicts of interest in its "Code of Conduct" section and hold Board members accountable.

Addressing Potential Board Member Conflict of Interest

To ensure compliance, Board members are provided training on conflict of interest issues in the following ways:

- The Board's bylaws contain a lengthy and specific "Code of Conduct" section, which specifically identifies potential "conflict of interest" situations that must be identified and avoided, including recusal from discussion, deliberation, and voting in certain situations
- Board members are also required to comply with the Model Code of Conduct adopted by the Federation of Associations of Regulatory Boards (FARB)
- Board members must report financial holdings to the Campaign Finance Board on a yearly basis, under Minnesota Statutes, Chapter 10A, the Ethics in Government Act, to promote transparency and public confidence
- Board members receive orientation and training, which includes a session conducted by the Attorney General's Office on "Board Member Legal Issues" including conflicts of interest, ethics, and duties as a Board member

Addressing Potential Employee Conflict of Interest

The Executive Directors of all the Health-Related Licensing Boards agreed to have each incumbent employee review State Code of Conduct provisions and to be recertified in the employee's understanding of the code annually. All new Board employees are also informed of the Code at employment orientation and are instructed to certify understanding of their responsibilities under the code. The State Code of Conduct (MMB Operating Policy and Procedure 01003-01) outlines the standards and expectations regarding employee honesty, integrity, and ethical behavior.

The Code of Ethics for State Employees [Executive Branch] with the State of Minnesota (Minnesota Statutes section 43A.38) is reviewed at orientation with all new employees and is also discussed regularly at Office Manager and Executive Director meetings.

Questions regarding conflict of interest are directed to the Administrative Services Unit staff, which seeks additional guidance as required from Minnesota Management and Budget.

Provisions regarding potential conflict of interest related to contracting are heavily regulated by Minnesota Statutes. Provisions regarding institutional conflict of interest have been reviewed at Office Manager and Executive Director meetings.

Board staff has received training from the Department of Administration, Materials Management Division, regarding appropriate contracting procedures, including conflict of interest. Adherence to state contracting statutes and regulations minimizes the risk of conflict of interest.

Section XI. Compliance with Chapter 13-Data Practices and Requests for Information

Criteria (11): The extent to which the Board complies with chapter 13 and follows records management practices that enable the agency to respond efficiently to requests for public information.

The Board's paper and electronic records, which include records relating to licensing, complaints, employment and personnel, and finances, comply with the Government Data Practices Act specified in Minnesota Statutes, Chapter 13.

Online Services

Applicants and licensees may apply for licensure and renew their licenses online. The Board has additional extensive online services, such as downloadable forms and application; secure credit card transactions; license verification; public Board disciplinary actions and public adverse actions;

E-newsletter; brochures and reports; Board meeting agendas and minutes; and information for the general public, employers, applicants, licensees, academic programs, supervisors, and continuing education providers. Significant numbers of applicants and licensees take advantage of this service.

In addition, the public is able to verify licenses, including obtaining full copies of all corrective and disciplinary action taken by the Board, online. This service is free of charge, available 24/7, and has proved to be a highly utilized service. The Board employs industry standards for online services, and only public data is displayed and available at the website. The Board ensures protection of online data by meeting or exceeding industry standards for server network security, including encryption of data and an effective firewall system. Public data provided at the Board website is governed by Chapter 13, the Government Data Practices Act. This data is transferred from the Board's internal data base system using industry standard application security.

Data Protection

All non-public paper data is kept in locked cabinets and all electronic data are password-protected. In addition, staff has access to non-public data on a "need to know" basis. For example, complaint data, which is confidential under the Government Data Practices Act, is accessible only to staff involved in the investigation and resolution of complaints.

Board members and staff receive regular data practices training, including training provided by the Attorney General, to ensure understanding of the different classifications of data and how it is used.

When a complaint is filed about a licensee's practice, a separate file is maintained because complaint data and licensing data may have a different classification under the Government Data Practices Act. This separation is an additional check to protect against the accidental release of restricted data.

Open Meeting Laws

The dates, places, and times of all meetings are posted in accordance with Minnesota's Open Meeting Law. Meeting notices are posted on the door of the Board's office, online at the Board's website, and on an electronic bulletin board used by all Health Licensing Boards in their building's lobby.

Board members and staff receive training on the Open Meeting Law through training provided by the Attorney General's Office and direction from the Executive Director. In addition, this information is contained in the Board's bylaws governing internal Board operations. Board members and staff are thoroughly trained on what meetings may or must be closed and on what circumstances justify a non-public meeting or portion of meeting. All such decisions are made in consultation with the Attorney General.

Records Retention Policy

The Board maintains record retention in compliance with Chapter 13. Earlier records are maintained on microfilm. Complaint data is now scanned and digitized, allowing the Board to keep more information at a lower cost and in a more secure manner. The Board is also planning to scan and digitize other data, such as licensing data. The main focus of the Board's information technology effort has, to date, been providing online services for applicants, licensees, and the public.

Data Requests

The Board responds to all requests for accessible data promptly and in conformance with the Government Data Practices Act and collects the fee authorized by statute for release of information. Much public data, such as basic licensing data and public data on corrective and disciplinary action taken by the Board, is free and immediately available online via the Board's website.

Section XII. Effect of Federal Intervention and Funding

Criteria (12): The effect of federal intervention or loss of federal funds if the Board is abolished.

Need for State Regulation

Federal agencies rely on the Board of Social Work to license social workers to ensure standards of competency in order to safely and competently provide services to the public and clients served by their agencies. With licensing standards in place at the state level, federal entities are not required to perform the licensing function. There is no national social work license. State licensing promotes a competent workforce, fosters professional services to vulnerable populations, and provides revenue for agencies and employees.

Some of the federal entities and agencies that depend on state licensing and require state credentials in order to provide services to clients include:

- Veterans Health Administration
 - The Veterans Health Administration requires that social workers employed by the Department of Veterans Affairs (VA) be licensed or certified in the state in which they practice within three years of appointment, without exception.
- Indian Health Services Bureau
 - IHS service units / service areas require a social worker with a graduate degree from a school of social work accredited by the Council on Social Work Education (CSWE), with related experience in health care, and licensure or certification in accordance with state or professional standards.

• Medicare, Medicaid, and Other Insurer Funding

 Medicare, Medicaid, and private insurers require social workers and other health care professionals to be licensed in order to be recognized as providers eligible to receive reimbursement for services provided.

• Medicare and Hospice Services

 Section 418.68, 418.72, and 418.88 of the Federal Requirements for Medicare and Hospice Services require a Social Worker to be a member of the multidisciplinary team for the delivery of social work services; the medical services must be provided by the Social Worker, under the direction of a Physician, and are reimbursable; and Social Workers are required to be licensed as required by federal or state laws.

• Joint Commission Accreditation

 Established in 1988, the Joint Commission's Home Care Accreditation Program accredits more than 5,200 organizations. The services are provided directly or through a contracted individual or organization, including the delivery of professional health care services including social work.

• Skilled Nursing Facilities

 Federal law (42 CFR 483.15) requires that all skilled nursing facilities (SNFs) provide "medically related social services to attain or maintain the highest practicable resident physical, mental and psychosocial well-being." Nursing homes with more than 120 beds are required to employ a full-time social worker with at least a bachelor's degree in social work or "similar professional qualifications". A recent, national random sample of nursing home Social Service Directors (n= 299), in facilities with more than 120 beds, indicate that 62% had a degree in social work.

• Department of Defense

• The Army, Navy, and Air Force each have 200-900 social work jobs, which require state licensure.

The table below, *"Number of Social Work Positions by Agency"* displays the number of social work positions in Federal Agencies.

Number of Social Work Positions by Agency					
Agency	Full-Time Permanent Social Work Positions				
Department of Veterans Affairs	13,179				
Department of Defense	3,858				
Department of Health & Human Services	2,716				
Department of Justice	1,061				
Department of Agriculture	446				
Department of the Interior	145				
Department of Transportation	96				

Section XIII. Additional Services and Collaboration

Criteria (13): Additional Activities Not Previously Discussed.

Outreach and Public Education

The Board provides information regarding licensing requirements and standards of practice to the public and stakeholder groups. During FY 2009 to FY 2010 Board members and staff provided approximately 86 public education programs at state and national conferences, and to bachelor and graduate social work academic programs throughout the state. The Board developed the "*Minnesota Social Work Licensure: A Handbook for Students*" and created brochures on topics such as the complaint resolution process, continuing education, supervised practice, and when a social work license is required. In addition, at the request of the Legislature, after 14 months of work, a report was provided to the Legislature in December 2008 regarding the need to increase the number of social workers serving underserved communities. The report also explored alternative options to obtain licensure rather than requiring a standardized examination.

At the national level, Board members and staff actively participate in the Association of Social Work Boards (ASWB), whose mission is to "strengthen the protection of the public by providing support and services to the social work regulatory community to advance competent and ethical practices". Board members have served on the Association's Regulations and Standards Committee, the Model Law Committee, Examination Committee, and others. The Board's Executive Director participates in the Administrators' Forum, has served on the Finance Committee, and received the Board Administrator Award for Outstanding Regulatory Board Service in 2009.

Department of Health

The Department of Health administers one health occupation program which is defined as a Health-Related Licensing Board under Chapter 214. This is the Office of Unlicensed Complementary and Alternative Health Care Practice. The Alcohol and Drug Counselor Licensing Program is now housed within the Board of Behavioral Health and Therapy.

The Department of Health also has certain statutory responsibilities relating to the boards. These are as follows:

- to provide mailing and office supplies services, and at the request of the boards, may provide other facilities and services at a central location upon request of the boards (Minnesota Statutes 214.04)
- to coordinate the development of a credentials policy among the boards (Minnesota Statutes 214.13)
- to serve on the Council of Health Boards when reviewing legislation or legislative proposals relating to the regulation of health occupations, the Council shall include the Commissioner of Health or a designee (Minnesota Statutes 214.025). Additional information regarding the Council of Health Boards is below.

Health Professionals Services Program (HPSP)

Effective July 1, 2001, Minnesota Statutes, Section 214.29 mandated a health professionals' services program. Each Health-Related Licensing Board, including the Emergency Medical Services Regulatory Board under chapter 144E, shall either conduct a health professionals' service program under sections 214.31 to 214.37 or contract for a diversion program under section 214.28.

At present, all Health Licensing Boards, the Office of Unlicensed Complementary and Alternative Health Care Practice programs administered by the Minnesota Department of Health, and the Emergency Medical Services Regulatory Board participate in HPSP.

Volunteer Health Care Provider Program

Effective July 1, 2002, Minnesota Statutes, Section 214.40 required the Administrative Services Unit to create procedures to allow volunteer dentists, dental hygienists, physicians, physician assistants, and nurses to apply for medical professional liability insurance while volunteering at community charitable organizations. This program has been successfully implemented.

Council of Health Boards

The Council consists of one board member from each board and the Executive Directors. The Council meets periodically to discuss issues and concerns affecting all boards. The Council is required to statutorily review emerging issues relating to health occupation regulation, such as proposals to regulate new health occupations, upon referral from the Legislature. The Council was given formal direction when legislation, Minnesota Statutes Chapter 214.025, was enacted on July 1, 2001:

"The Health-Related Licensing Boards may establish a Council of Health Boards consisting of representatives of the Health-Related Licensing Boards and the Emergency Medical Services Regulatory Board. When reviewing legislation or legislative proposals relating to the regulation of health occupations, the Council shall include the Commissioner of Health or a designee."

Since 2003, the Council has received requests from the Legislature to perform occupational reviews and to provide reports to the Legislature regarding legislation related to the following occupations:

- Massage Therapy (2002 and 2009)
- Optometry Prescribing Authority
- Speech Language Pathology
- Dental Assistants
- Denturists
- Naturopaths
- Athletic Trainers
- Laboratory Scientists
- Body Art
- Genetic Counseling

Section XIV. Priority Based Budget

Description of Funding / Budget

State Government Special Revenue Fund – Direct and Indirect Expenditures

The Board is responsible for collecting sufficient revenue from fees to cover both direct and indirect expenditures, which is deposited as non-dedicated revenue into the State Government Special Revenue Fund. From this fund the Board receives a direct appropriation to pay for agency activities such as salaries, rent, costs for disciplinary/contested cases, and operating expenditures. It also pays statewide indirect costs through an open appropriation. The Board does not receive any General Fund appropriations.

The Board has been successful in reducing its fees by 30% since 2006, with Legislative approval. Based on a recommendation of the Board's Special Committee on Board Operations (SCOBO) in 2002, the Board has moved towards a "cost of doing business" fiscal model, rather than the more traditional "build up and spend down" model. This model provides more transparency in fiscal management and greater compliance with the statutory requirement that revenues and expenditures are closely balanced. In addition, this model has allowed the Board to maintain fees, decrease accumulated funds, and continue to provide its core public safety priority services. The goal of this model is to collect fees just sufficient to provide core public safety services and maintain operations, minimize the financial impact on applicants and licensees served, and maintain core services while providing an excellent level of customer service.

The Board's Finance Committee provides an essential oversight function for the Board's fiduciary responsibilities. It meets on a regular basis and provides detailed financial information to the full Board. The Board has been committed for years to minimizing expenditures, through, for example, reducing the frequency of meetings, limiting travel, not filling staff positions lost due to attrition, successfully promoting online services, and moving to paperless meetings.

Since the inception of online application services, the Board has paid the online credit card transaction fees from the direct operational budget, averaging \$13,000. yearly, rather than assessing the fees to applicants and licensees. This budgeting decision was implemented to promote the utilization of online services and provide an incentive to licensees and applicants. Because this is a direct operational expense, the Board monitors this expense on a yearly basis.

The Board's appropriation of \$921,000 has remained constant for the last several fiscal years. During the 2011 Special Session the Board's appropriation was increased by 12%, contingent upon a licensing bill being enacted by the Legislature; this bill did not pass in the last session.

Board fees must also cover a prorated share of support functions provided outside of the Board itself. These functions include legal support (Attorney General), statewide e-licensing system development and operations (Office of Enterprise Technology), centralized administrative support (Health Boards' Administrative Services Unit), and funding for services to health professionals (Health Professionals Services Program). Other miscellaneous indirect costs are paid by the Board once per fiscal year to Minnesota Management and Budget, the Legislative Auditor, and other state agencies for services provided. Recently, Health-Related Licensing Boards' reserves in the State Government Special Revenue Fund were transferred to the General Fund as noted in the final chart below.

Priority Based Budget

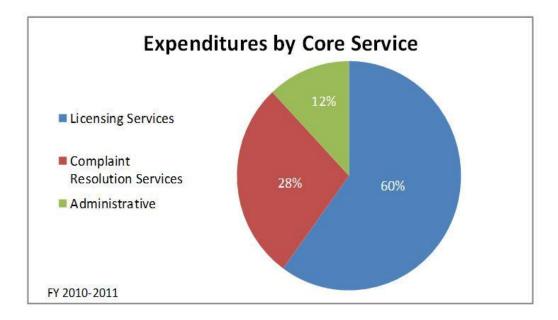
In preparation for the FY 2012 and FY 2013 biennial budgeting process, the Board was required to identify the "core services" it provides, and analyze its expenditures and allocate them by core service. The Board's seven statutory duties under Minnesota Statutes, Section 148E.030, require activities in two primary core service areas, which include licensing and complaint resolution activities. In addition, educating social workers and the public about the Board's legal requirements is an essential function.

Each direct and indirect expenditure was then analyzed and allocated to these two primary core service areas, with 60% of expenditures allocated to licensing services, and 28% to complaint resolution services. All educational and outreach activities were analyzed and assigned to one of the two core service areas. Administrative expenditures, of 12%, were allocated into a separate category.

The outcome data contained in this report demonstrates that the Board is focused on its statutory duties and provides vital public safety duties. These are positive increased outcomes, with fewer resources. Successful, effective, service delivery has occurred while the Board has:

- reduced fees by 30% since 2006,
- maintained its staff complement,
- processed 43% more license applications, issued 25% more licenses, and renewed 33% more licenses,
- investigated and resolved complaints faster,
- processed license and renewal applications faster.

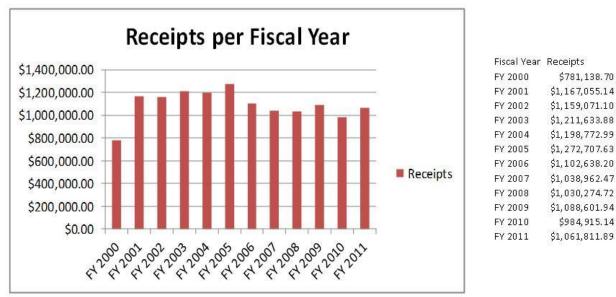
As demonstrated in the pie chart on the following page, "*Expenditures by Core Service*", the Board's priority based budget is 60% in licensing services, 28% in complaint resolution services, and 12% in overall operation services. Almost 90% of the overall Board budget is allocated directly and exclusively to its core public safety services.



Revenues 2000-2011

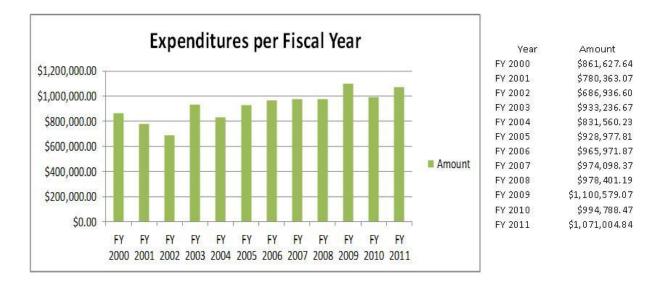
The following table and data identify the revenues collected, which are deposited in the State Government Special Revenue Fund, for fiscal years 2000 - 2011.

The table *"Receipts per Fiscal Year"* illustrates the revenues collected from fees. Revenues peaked during FY 2005, necessitating the 20% fee decrease. An additional 10% fee decrease in 2009 resulted in decreases revenues in FY 2010. The increase in applications and licenses issued caused the slight increase in revenues illustrated in FY 11.



Expenditures 2000-2011

The following data and table *"Expenditures per Fiscal Year"* identify both direct and indirect expenditures for fiscal years 2000 – 2011. Attorney General indirect costs have increased slightly in recent fiscal years.



Funding Other Programs

It is important to note that Board of Social Work funding is required for other programs and services, as noted in the table above. This supportive funding impacts the Board's budget and, at times, is mandated, and the Board is not able to plan proactively to absorb the expenditures of unanticipated additional programs and services beyond the scope of the Board of Social Work.

Program	Health Licensing Boards Funding Amount	Board of Social Work Funding Amount
Office of Mental Health Practice (BBHT, MFT, Medical Practice, Nursing, Social Work, Psychology) (2006-2009)	\$268,227.94	\$124,379.89
Transfer to General Fund (all HLBs) (2003-2011)	\$16,362,000.00	\$1,513,067.01
Office of Enterprise Technology (OET) E-Licensing Initiative (all HLBs) (2010)	\$1,663,486.33	\$70,198.50
Total	\$18,293,714.27	\$1,707,645.40

In conclusion, the Board is fiscally responsible and has demonstrated by the data in this report its ability to: successfully provide its core, priority, mandated public protection services; create a priority based budget; control spending; decrease fees by 30% since 2006; and maintain its staff complement.

Appendix A: Board of Social Work Bylaws

Revised and Approved May 20, 2011

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Part 1. General Provisions

Section A. Duty to Adopt Bylaws

Minnesota Statutes, Section 148D.025, subdivision 4, requires the Board to adopt bylaws to govern its proceedings", which applies only to internal Board operating procedures. The Board has been advised by the Attorney General's Office that the provision does not require the Board to adopt formal rules under the Administrative Procedures Act.

Section B. Creation of the Board

The Board of Social Work was created by the Minnesota Legislature in 1987. The requirements for the composition and operation of the board are in the Board's practice act, Minnesota Statutes, sections 148D.025 to 148D.030. Additional requirements are in Minnesota Statutes, Chapter 214, which contains requirements that apply to all health-related licensing boards, including the Board of Social Work.

Section C. Duties of the Board

 Section 148D.030, subdivision 1, requires the Board must perform the duties necessary to promote and protect the public health, safety, and welfare through the licensure and regulation of persons who practice social work in this state. These duties include, but are not limited to:

a) Establishing the qualifications and procedures for individuals to be licensed as social workers;

b) Establishing standards of practice for social workers;

c) Holding examinations or contracting with the Association of Social Work Boards or a similar examination body designated by the board to hold examinations to assess applicants' qualifications;

d) Issuing licenses to qualified individuals pursuant to sections <u>148D.055</u> and <u>148D.060</u>;

e) Taking disciplinary, adversarial, corrective, or other action pursuant to sections

 $\underline{148D.255}$ to $\underline{148D.270}$ when an individual violates the requirements of this chapter;

f) Assessing fees pursuant to sections $\underline{148D.175}$ and $\underline{148D.180}$; and

g) Educating social workers and the public on the requirements of the board.

2) Section 148D.030, subdivision 2, provides that the "Board may adopt and enforce rules to carry out the duties specified in subdivision 1.

Section D. Data Practices

The collection, creation, receipt, maintenance and dissemination of data maintained by the Board are governed by the Minnesota Government Data Practices Act, Minnesota Statutes, Chapter 13.

Part 2. Board Members

Section A. Board Membership

- 1) Minnesota Statutes, section 148D.025, subdivision 2, specifies that the Board consists of 15 members appointed by the governor. The members are:
 - a) 10 social workers licensed under sections 148D.055,
 - b) 5 public members as defined in section 214.02.
- 2) Minnesota Statutes, section 214.02 defines a public member as "a person who is not, or never was, a member of the profession or occupation being licensed or regulated or the spouse of any such person, or a person who does not have or has never had, a material financial interest in either the providing of the professional service being licensed or regulated or an activity directly related to the profession or occupation being licensed or regulated."

Section B. Qualifications of Board Members

- 1) Section 148D.025, subdivision 2, amended in 2009, describes the qualifications required of Board members as follows:
 - a) a social work member must have engaged in the practice of social work in Minnesota for at least one year during the ten years preceding their appointment;
 - b) five members must be licensed social workers at the baccalaureate level; and
 - c) five members must include a licensed graduate social worker, a licensed independent social worker, and at least two licensed independent clinical social workers.
- 2) Eight of the social worker members must be engaged in the practice of social work in the following settings:
 - a) one member must be in a state agency
 - b) one must be in a county agency
 - c) one must be in a private agency
 - d) two must be in a clinical social work setting

- e) one must be an educator engaged in regular teaching duties at an accredited program of social work
- f) one must be in an elementary, middle, or secondary school
- g) one must be employed in a licensed hospital or nursing home licensed under Chapter 144 or 144A.
- 3) In addition, at least five members must have expertise in communities of color, and at least six must reside outside of the 11-county metropolitan area.

Section C. Appointment of Board Members

The appointment of Board members is governed by Minnesota Statutes, section 15.0597.

Section D. Membership Terms

Minnesota Statutes, section 15.0575, subdivision 2 states:

The terms of the members shall be four years with the terms ending on the first Monday in January. The appointing authority shall appoint as nearly as possible one-fourth of the members to terms expiring each year. Members may serve until their successors are appointed and qualify but in no case later than July 1 in a year in which a term expires unless reappointed.

Section E. Compensation

Minnesota Statutes, section 15.075, subdivision 3 states:

Members of the boards may be compensated at the rate of \$55 a day spent on board activities, when authorized by the board, plus expenses in the same manner and amount as authorized by the commissioner's plan adopted under section 43A.18, subdivision 2. Members, who, as a result of time spent attending board meetings, incur child care expenses that would not otherwise have been incurred, may be reimbursed for those expenses upon Board authorization.

Members who are state employees or employees of the political subdivisions of the state must not receive the daily payment for activities that occur during working hours for which they are compensated by the state or political subdivision. However, a state or political subdivision employee may receive the daily payment if the employee uses vacation time or compensatory time accumulated in accordance with a collective bargaining agreement or compensation plan for board activities. Members who are state employees or employees of the political subdivisions of the state may receive the expenses provided for in this subdivision unless the expenses are reimbursed by another source. Members who are state employees or employees of political subdivisions of the state may be reimbursed for child care expenses only for time spent on board activities that are outside their working hours.

Each board must adopt internal standards prescribing what constitutes a day spent on board activities for purposes of making daily payments under this subdivision.

Section F. Board Policy on Per Diems

- 1) A per diem shall be paid for the following activities (limited to one per diem per day):
 - a) Attendance at Board meetings.
 - b) Attendance at committee or task force meetings when acting as a Board representative.
 - c) Attendance at legislative hearings, meetings with legislators, or meetings with other parties relating to legislative activities when acting as a Board representative.
 - d) Attendance at local, state or national association meetings when acting primarily as a Board representative.
 - e) Attendance, participation, and/or presentation at a meeting or conference when invited to attend, participate, or present as a Board representative.
 - f) Attendance at other meetings or activities as approved by the Board.
 - g) Travel time necessary for Board members to participate in the activities listed above.
 - h) Reviewing material in preparation for any of the activities listed above, placing or receiving telephone calls regarding Board business, or other miscellaneous activities related directly to Board business, when the total number of hours spent on these activities exceeds three hours per day or three hours of accumulated time within a one-week period.
- 2) A per diem shall not be paid to Board members who are being compensated by their public, private or nonprofit employer for that day, if the major parts of their Board activities occur during normal work hours for which they are paid by their employer.

Section G. Board Policy on Expenses

The Minnesota Department of Employee Relations establishes expense reimbursement policies which are periodically revised. In addition to those policies, the Board adopts the following supplemental policies.

- 1) Hotel Accommodations
 - a) Board members and staff traveling on Board-approved business are encouraged to stay with family or friends when feasible, if that would save the Board money.
 - b) Board members and staff traveling on Board-approved business will be reimbursed for hotel expenses for themselves only.
 - c) Board members and staff must get the lowest possible hotel rate by asking for a government, AAA, or business discount.
- 2) Food for Board and Committee Meetings
 - a) Staff should purchase minimal and inexpensive food and beverages for Board and committee meetings.
 - b) Board and committee meetings should be scheduled at non-meal times as much as possible.
- Submission of Expense Reports
 Board members and staff shall submit expense reports at least quarterly, to assist staff in budgeting.

Section H. Removal; Vacancies

1) Minnesota Statutes, section 15.075, subdivision 4 states:

A member may be removed by the appointing authority at any time (1) for cause, after notice and hearing, or (2) after missing three consecutive meetings. The chair of the board shall inform

the appointing authority of a member missing three consecutive meetings. After the second consecutive missed meeting and before the next meeting, the secretary of the board shall notify the member in writing that the member may be removed for missing the next meeting. In the case of a vacancy on the board, the appointing authority shall appoint, subject to the advice and consent of the senate if the member is appointed by the governor, a person to fill the vacancy for the remainder of the unexpired term.

2) Minnesota Statutes, section 15.075, subdivision 5 states:

When a membership on a board becomes vacant within three months after being filled through the open appointments process, the appointing authority may, upon notification to the office of secretary of state, choose a new member from the applicants on hand and need not repeat the process.

Section I. Communications

Board members shall refrain from writing letters or engaging in other kinds of communication in the name of the Board, unless such communications have been specifically authorized by the chair or the Board.

Section J. Code of Conduct

- 1) The Board expects of itself and its members ethical and businesslike conduct. This commitment includes proper use of authority and appropriate decorum in group and individual behavior when acting as Board members. The Board values:
 - a supportive and respectful work environment for our members and employees,
 - a diverse and representative work force,
 - a workplace where employees and those we serve are treated fairly and equitably,
 - appreciation, acknowledgment and acceptance of individual differences,
 - employees and Board members who take responsibility for modeling appropriate behavior and assuring respectful behavior of others.
- 2) Board members must represent unconflicted loyalty to the interests of the citizens of Minnesota. This accountability supersedes any conflicting loyalty such as that to advocacy or interest groups and membership on other boards or staffs. This accountability supersedes the personal interest of any member acting as an individual consumer of the Board's services.
- 3) Board members will comply with all pertinent state laws and regulations that are applicable to public officials.
- 4) If a Board member has a conflict of interest in a matter before the Board, including any of the following areas, the member shall declare the conflict and refrain from discussion, and may not vote on the matter. In addition to these restrictions, if the conflict of interest is known in advance and is financial in nature, the member must prepare a written statement describing the matter requiring action or decision and the nature of the potential conflict of interest and deliver a copy of the statement to the Board chair.
 - a) There must be no self-dealing or any conduct of private business or personal services between any member and the Board.

- b) Board members must not use their positions to obtain employment within the agency for themselves, family members or close associates.
- c) Should a Board member be considered for employment by the Board, s/he must temporarily withdraw from Board deliberation, voting and access to private Board information.
- 5) Board members may not attempt to exercise individual authority over the Board or Board staff except as explicitly set forth in Board policies.
 - a) Board members' interactions with the executive director or with staff must recognize the lack of authority in any individual member or group of Board members.
 - b) In their interactions with the public, press or other entities, Board members shall not speak for the Board unless specifically directed by the Board.
- 6) Board members shall not engage in a business or professional activity that the affected Board member might reasonably expect would require or induce the affected Board member to disclose confidential information acquired by reason of the official position.
- 7) Board members shall not appear before the Board while acting as an advocate for him/herself or any other person who has an economic interest. Board members shall not represent, directly or indirectly, any business entity in any action or proceeding against the interest of the Board, or in any litigation in which the Board is a party.
- 8) Board members shall not use the official position to secure a special privilege or exemption for the affected person or others, or to secure confidential information for any purpose other than official duties.
- 9) Board members shall not intentionally or knowingly disclose any confidential information gained by reason of the affected person's position concerning the property, operations, policies or affairs of the Board, or use such confidential information for pecuniary gain.
- 10) Complaints related to violations of this Code of Conduct must be referred to the Executive Committee. The Executive Committee, in consultation with the Attorney General's Office, will determine the appropriate course of action. If the complaint is against a member of the Executive Committee, the member must recuse himself or herself from the committee's deliberations and decisions on the complaint
- 11) A Board member who has a personal or professional relationship with an individual who is the subject of a complaint filed with the Board or the subject of action considered by the Board shall recuse himself or herself from participation in the Board's consideration of the complaint or action.
- 12) Board members shall comply with the Model Code of Conduct adopted by the Federation of Associations of Regulatory Boards (FARB).

Section K. Duties

In order to perform their duties, Board members need to be fully informed on issues relating to the regulation of social workers. Accordingly, Board members are expected to attend at least one conference or training session during each term they serve on the Board.

Part 3. Board Officers

Section A. General

Minnesota Statutes, section 148D.025, subdivision 3, was amended in 2009, and states: "The board must biennially elect from its membership a chair, vice-chair, and secretary-treasurer".

Section B. Elections

- The officers shall be elected by majority vote of the members of the Board at the Board's last regular meeting in each odd-number calendar year. The term of office is from January 1 to December 31, over two calendar years.
- 2) A member may be re-elected for a second non-consecutive term. A member may not serve more than two non-consecutive terms in the same office.
- 3) Vacancies shall be filled by majority vote of the members of the Board for the balance of the twoyear term. An election to fill a vacancy by majority vote does not prohibit the elected member from serving consecutive terms.

Section C. Duties of Chair

The chair shall perform the following duties:

- 1) Preside at meetings of the Board.
- 2) Preside at meetings of the Executive Committee.
- 3) Serve as principal spokesperson for the Board. The chair is the only person authorized to represent the Board except for (i) the executive director and (ii) other Board members who are specifically authorized by the Board to represent the Board on particular issues.
- 4) With the approval of the Board, appoint committees and committee chairs to carry out the duties of the Board.
- 5) Call special meetings of the Board as necessary.
- 6) Call meetings of the Executive Committee.
- 7) With approval of at least one other member of the Executive Committee, take emergency action on behalf of the board. Emergency action must be reported to the Board as soon as possible.
- 8) Inform the governor of a Board member missing three consecutive meetings.

Section D. Duties of Vice Chair

Duties of the Vice Chair include but are not limited to:

- 1) Presiding at Board meetings in the absence of the chair.
- 2) Assisting the chair as requested by the chair or the Board.
- 3) Serving on the Executive Committee.

Section E. Duties of Secretary-Treasurer

Duties of the secretary-treasurer include but are not limited to:

- 1) Reviewing, approving, and signing the official minutes of Board meetings as approved by the Board.
- 2) Serving as chair of the Finance Committee.
- 3) Serving on the Executive Committee.

4) Providing written notification of a member missing two consecutive meetings that the member may be removed for missing the next meeting.

Section F. Removal for Cause

A Board officer may be removed for cause by a majority vote of Board members. The vacancy shall be filled in the manner provided in section B.

Part 4. Meetings

Section A. Regular Board Meetings

The Board shall select regular meeting dates and times for the calendar year following the subsequent calendar year at the Board's last meeting of each calendar year. A schedule of the regular meetings of the Board shall be posted at the Board's office and on the Board's web page. If the Board decides to hold a regular meeting at a time or place different from that which is stated in the regular meeting posting. It shall give, at a minimum, the same notice that is required for special meetings. The frequency may vary depending on the business facing the Board, but will occur not less than six times per year. The chair may cancel any meeting due to inclement weather, hazardous travel conditions or other unforeseen circumstance.

Section B. Special Board Meetings

Special meetings may be called by the chair or the Executive Committee in order to conduct essential business prior to a scheduled meeting. For special meetings, the Board shall post written notice of the date, time, place and purpose of the meeting at the Board's office and on the Board's web page.

Section C. Closed Board Meetings

- The Board shall close the portion of a meeting in which the Board discusses allegations or charges against an individual subject to the authority of the Board. If the Board concludes that discipline of any nature may be warranted, further meetings or hearings must be open. A meeting must also be open if requested by the individual who is the subject of the meeting.
- The Board shall close the portion of a meeting in which the Board exercises quasi-judicial functions involving disciplinary proceedings, pursuant to Minnesota Statutes, section 13D.01, subdivision 2 (2).
- 3) The Board may close the portion of a meeting in which the Board evaluates the performance of an individual subject to the authority of the Board, and shall identify the person prior to closing the meeting. At the next open meeting, the Board shall summarize its conclusions regarding the evaluation. The meeting must be open if requested by the individual who is the subject of the meeting.
- 4) Prior to closing any meeting, the Board shall state on the record the specific grounds permitting the meeting to be closed and describe the subject to be discussed.

Section D. Quorum for Board Meetings

The presence of a majority of the voting Board members constitutes a quorum at Board meetings. No official business may be acted on without a quorum. When a quorum is present at any meeting, the Board may take action on items by a majority of the voting members present.

Section E. Minutes of Board Meetings

Minutes will be kept of all Board meetings and will be submitted to the Board for approval at the Board's next meeting. The minutes are effective after having been approved by the Board and signed by the secretary-treasurer, and will be posted to the Board's website.

Section F. Open Meeting Law

All meetings of the Board, its committees, and advisory committees are subject to the Minnesota Open Meeting Law, Minnesota Statutes, Chapter 13D, and shall be open to the public, unless closure is required or authorized by law. Observers at all meetings will be given an opportunity to provide input for Board consideration.

Section G. Meetings via Phone and Interactive Television

Based on MN 2009 Session Laws, changes to Chapter 80 [13D.015] the following open meeting policies contained in the bylaws are modified.

- 1) The Board may hold regular or special board meetings by telephone or other electronic means. It is the Board's intent to hold in-person meetings when possible.
- 2) The Board may hold regular or special board meetings, which include Executive or closed session by telephone or other electronic means, subject to the Board's ability to control the public lines on which the public are participating.
- 3) Board members shall not participate in Executive or closed session via telephone or electronic means.
- 4) A Board committee or task force meeting may be conducted by telephone or other electronic means.

If a meeting is conducted by telephone or electronic means the following conditions must be met:

- all members of the committee or task force participating in the meeting, wherever their physical location, can hear one another and can hear all discussion and testimony;
- all members of the public present at the meeting location of the committee or task force can hear all discussion and all votes of the members of the committee or task force and participate in testimony;
- at least one member of the committee or task force is physically present at the meeting location and;
- all votes are conducted by roll call, so each member's vote on each issue can be identified and recorded.

Each member of the committee or task force participating in a meeting by telephone or other electronic means is considered present at the meeting for purposes of determining a quorum and participating in all proceedings.

If telephone or another electronic means is used to conduct a meeting, the Board, to the extent practical, shall allow a person to monitor the meeting electronically from a remote location. The Board may require the person making a connection to pay for documental marginal costs that the Board incurs as a result of the additional connection.

If telephone or another electronic means is used to conduct a meeting, the Board will post the notice on its website at least 10 days before the meeting; the location of the meeting; that some members may participate by electronic means; monitoring the meeting from a remote location is possible, to the extent practical; and there may be a cost to the person making a connection.

5) Board members may participate in all proceedings of any meeting via interactive television pursuant to Minnesota Statutes, Section 13D.02.

Section H. Roberts Rules of Order, Newly Revised

Proceedings of the Board, committees, panels, and advisory committees are governed by Roberts Rules of Order, Newly Revised, except as superseded in these bylaws and applicable law.

Part 5. Committees

Section A. General

Board committees, including ad hoc committees, consist of Board members and may include members of the Advisory Committee, and members of the public, as appointed by the chair of the Board. Advisory committees consist of Board members and appointed members of the public. Unless required by law, public members of advisory committees shall not be compensated, even for expenses.

Section B. Executive Committee

- 1) The Executive Committee is comprised of the Board chair, vice chair, and secretary-treasurer. The chair of the Board is the chair of the Executive Committee.
- 2) The duties of the Executive Committee include but are not limited to the following:
 - a) At the request of the chair of the committee, meeting between meetings of the Board to address matters identified by the chair. As appropriate, the committee shall make recommendations to the Board.
 - b) Regularly reviewing and making recommendations to the Board on amendments to the bylaws.
 - c) Conducting annual performance reviews of the executive director.

Section C. Legislation and Rules Committee

The Legislation and Rules Committee consists of the members appointed by the chair of the Board. The chair of the Board shall designate one member to serve as chair. The committee shall review policy issues relating to legislation and rules and, as appropriate, make recommendations to the Board.

Section D. Finance Committee

The Finance Committee consists of the members appointed by the chair of the Board. The committee shall be chaired by the secretary-treasurer of the Board. The committee shall review policy issues relating to budget and finance and, as appropriate, make recommendations to the Board.

Section E. Compliance Committee and Compliance Panels

The Compliance Committee consists of the members appointed by the chair of the Board. The chair of the board shall designate one member to serve as chair. The committee shall review policy issues relating to compliance and, as appropriate, make recommendations to the Board.

A compliance panel consists of not less than two members, appointed by the chair of the Board. The chair of the Board may determine to convene more than one compliance panel. The chair shall designate one member to serve as chair of the panel. The panel shall meet in closed session to review staff investigations of complaints and, as appropriate, make recommendations to the Board.

Section F. Nominating Committee

The Nominating Committee consists of the members appointed by the chair of the Board. The chair of the board shall designate one member to serve as chair.

At the second-to-the-last regular Board meeting in each calendar year, the Nominating Committee shall begin work to bring forward a slate of officers. The Nominating Committee shall report its nominees at the Board's last regular meeting in each calendar year, including at least one person to be a candidate for the position of chair during the following calendar year, at least one person to be a candidate for the position of secretary-treasurer for the following calendar year, at which time the Board's officers will be elected in accordance with Part 3, Section B. The Nominating Committee will also develop and implement strategies to inform the citizens of the state about opportunities to serve as a member of the Board.

Section G. Advisory Committee

The Advisory Committee consists of the members appointed by the chair of the Board. The members shall consist of representatives of social work associations and at least one member of the board. The committee shall elect one member to serve as chair. The committee shall review policy issues of interest to social work associations and, as appropriate, make recommendations to the Board.

Section H. Communication Education and Outreach Committee

The Communication Education and Outreach Committee consist of the members appointed by the chair of the Board. The Executive Director will designate staff to serve on the committee. The chair of the board shall designate one member to serve as chair. The committee shall increase the awareness of the Board as a regulatory agency and its mission, determine target audiences and tailor education, outreach and relationship building accordingly. The committee will strive to create a coordinated, consistent public education campaign utilizing all appropriate forms of communication medium. As appropriate, the committee may make recommendations to the Board. The committee will meet as needed.

Section I. Applications Review Committee

The Applications Review Committee consists of board members with clinical expertise appointed by the chair of the Board. The Applications Review Committee will review clinical coursework required for eligibility for the Licensed Independent Clinical Social Worker (LICSW) license when an academic institution, including a CSWE graduate degree program or an accredited institution of higher learning, or continuing education provider cannot attest to the applicant meeting the requirements to the satisfaction of the Board, make licensure eligibility decisions, and as appropriate, make recommendations to the Board. The committee may review other requirements as the need arises.

Section J. Ad Hoc Committees

Upon majority vote of the members present at a meeting, the Board may create ad hoc committees to address issues specified by the Board. An ad hoc committee consists of the members appointed by the chair of the Board. The chair of the Board shall appoint one Board member to serve as chair. The committee shall review the issues specified by the Board and, as appropriate, make recommendations to the Board.

Part 6. Board Staff

Section A. Executive Director

- Minnesota Statutes, section 148D. 025, subdivision 5, states: "The board shall appoint and employ an executive director who is not a member of the board. The employment of the executive director shall be subject to the terms described in section <u>214.04</u>, <u>subdivision 2a</u>."
- 2) The executive director and any other employee of the Board who is covered by the State of Minnesota's Managerial Plan shall automatically receive a cost-of-living pay increase when it is made available by the state.
- 3) The executive director shall not cause or allow any practice, activity, decision or organizational circumstance which is either imprudent or in violation of commonly accepted government or professional ethics, law or state policy.
- 4) It is the policy of the Board to provide a work environment that ensures equal opportunities and mutual respect for all employees, and to place the dignity of these employees, as well as the citizens we serve, in the highest regard.
- 5) Information and advice to the Board will have no significant gaps in timeliness, completeness or accuracy.
- 6) There shall be no conflict of interest in awarding purchases or other contracts.
- 7) All Board authority delegated to staff is delegated through the executive director, so that all authority and accountability of staff can be phrased-- insofar as the Board is concerned--as authority and accountability of the executive director.
- 8) The executive director is authorized to make all decisions, take all actions and develop all activities that are true to the Board's policies. The Board may, by extending its policies, "undelegate" areas of the executive director's authority, but will respect the executive director's choices so long as the delegation continues. This does not prevent the Board from obtaining information about activities in the delegated areas.

- 9) No individual Board member, officer or committee (except the Executive Committee) has authority over the executive director. Information may be requested, but if such request, in the executive director's judgment, requires a material amount of staff time, it may be refused.
- 10) As the Board's single official link to the operating organization, the executive director is accountable for all organizational performance and exercises all authority transmitted into the organization by the Board. Executive director performance will be considered to be synonymous with organizational performance as a total.

Section B. Other Staff

The executive director shall appoint other members of the staff.

Section C. Staff Organization

The executive director shall be responsible for designing, changing and operating an effective staff organization.

Section D. Complaints About Staff

A Board member who has a complaint about the performance of Board staff should present the matter to the chair of the Board. If the complaint is about Board staff other than the executive director, the chair may refer the matter to the executive director. If the complaint is about the executive director, the chair may refer the matter to the Executive Committee.

Part 7. Adoption of Bylaws; Amendments

- 1) The bylaws take effect upon approval by two-thirds of Board members.
- 2) Amendments of these bylaws may be made by a two-thirds vote of Board members.