Northern Virginia Licensed Professional Counselors

January 2020

Letter from Your Leadership

BY SARAH KEELY – President – president@nvlpc.org

To the Membership:

I am writing regarding the incident which took place this fall resulting in NVLPC’s financial loss. As you are aware through the email sent out at the end of October, NVLPC was the victim of a social engineering attack. For more information regarding this, I refer you to the letter sent out by email and available here.

I want to let you know that despite this set-back, we are financially sound and able to continue to provide the high-quality offerings you’ve come to expect. A few of you have expressed concerns regarding credit card security and I want to reassure you that our website and credit card processing company were not involved in this attack and therefore were not compromised.

Thank you for the thoughtful responses from members expressing concern and compassion for those of us on the board responding to the situation. You remind me what a resilient organization we are.

Sarah KT Keely, LPC
President, NVLPC
www.nvlpc.org

Therapy, Service, and Emotional Support Animals

What does it all mean and how do I respond?

BY REBECCA K. HOGG, LPC, CSAC, NCC

I have worked with therapy dogs professionally for over 2 years. I currently run therapy dog groups several times each month with my clients and volunteer with a local non-profit to participate in therapy dog activities. As such, I have been asked what each of these terms means more times than I can count.

Therapy Animal (TA):
A TA, most commonly a dog or a horse, is an animal that has been trained to provide emotional support to people in hospitals, hospice care,
Therapy, Service, and Emotional Support  
Continued from page 1

rehab, residential treatment programs or schools where people may benefit from a TA's calming presence. This could also be an animal that joins a trained therapist in their office location for individual sessions. The TA has been shown to lower blood pressure and heart rate, reduce anxiety, and increase endorphins and oxytocin.

It is important that the therapist be trained to recognize signs of stress in the animal to ensure safety for the client and should provide a clear understanding of the animal's role in the session. A clear release of information is another critical piece to ensure safety when using an animal as a therapeutic intervention.

The American Kennel Club (AKC) has several therapy dog certifications which a dog can earn. After the dog participates in specific numbers of visits, the animal can achieve varied levels of certification (https://www.akc.org/sports/title-recognition-program/therapy-dog-program). A local organization that provides TA services is People. Animals. Love (https://peopleanimalslove.org). My therapy dog and I have visited several locations, including a local college and a residential treatment center. The dogs with this organization also visit schools, libraries, hospitals, retirement communities, group homes, and many other locations.

Service Animal (SA):
A SA is defined as a working animal, not a pet. The Americans with Disabilities Act (ADA) defines a SA as a dog that has been individually trained to perform specific tasks and to work with people with disabilities. According to the ADA, disabilities can be a “physical, sensory, psychiatric, intellectual, or other mental disability.”

Since the SA receives training to support a specific person for a specific reason and is considered a working animal, when one is seen in public they should not be engaged with socially by petting and other social activities. Additionally, a business cannot legally ask if an animal is a SA; they can ask “What tasks does your dog perform?” Also, remember it is illegal for someone to pretend disability to gain access to a location with their animal. There are many options for obtaining an SA; several links to training organizations can be found at (https://www.akc.org/expert-advice/training/service-dog-training-101).

Emotional Support Animal (ESA):
An ESA can be any domesticated animal allowed in the client’s locality and should follow laws for where the client lives. Since the ESA is a pet, it is important to ensure the animal has obedience training to behave appropriately in public. Also, if emotional support does not seem to be a natural instinct, training to support the client emotionally would necessary. Virginia law does not currently provide any increase in permissions for the ESA in public beyond federal law on housing and airlines.

Therapists may be asked to write letters endorsing ESAs to support clients. Legally, ESAs are only protected regarding no-pet housing and joining the owner in the passenger cabin on airline flights. The rules around flights vary amongst the many airline companies, so be sure to check with the airline being considered. A person should be sure to take their official ESA letter with them when leasing a home and/or preparing to take a flight. Some websites suggest the animal wear a vest with official patches indicating their status as an ESA.

Persons seeking to legally qualify to have an ESA must be considered emotionally disabled by a licensed mental health professional (therapist, psychologist, psychiatrist, etc.), as evidenced by a properly formatted prescription letter. Some airlines and property managers will accept a verification form completed by a family doctor as well.

There are many websites which for a price will provide a person with an official looking letter to prescribe an emotional support animal. However, these websites do not generally provide any

PSYCHOTHERAPY OFFICE FOR RENT


www.nvlpc.org
DSM-5: Does the Cultural Formulation Interview Help or Hinder Multicultural Diagnosis and Assessment?

BY SUSAN BRANCO, PHD, LPC-VA, LCPC-S-MD, ACS, NCC

The Diagnostic and Statistical Manual of Mental Disorders-5 (DSM-5) was released in 2013. Among many changes in this edition, including removal of the axial coding system, alterations in substance abuse diagnosis, and differing definitions for trauma-related disorders, one of the most anticipated additions was the implementation of cross-cultural assessment by way of the Cultural Formulation Interview (CFI) (APA, 2013). How does the CFI aid in diagnosis and evaluation of diverse populations? What are the risks and benefits for clinical counselors using the CFI with various multicultural groups?

Criticism of previous versions of the DSM included significant concerns with its applicability cross culturally and its general lack of guidance on appropriate assessment interventions that carefully consider cultural influences (Alarcon, et al., 2009). Prior to publication, other critiques of DSM-5 focused on counselor ethical decision-making when using the DSM-5 to diagnose vulnerable populations while suggesting that rather than increasing cultural applicability, it encouraged over-diagnosis with little regard to cultural influence (Miller & Prosek, 2013). Yet, more recent research demonstrated that training in the CFI increased cultural competence amongst psychiatry residents (Mills, et al., 2016) and that, in general, clinicians found the CFI to be a useful tool for gathering culturally-competent information (Lewis-Fernandez, et al., 2017). Further, other studies suggested that the CFI is also beneficial for Spanish-speaking clinicians when administered to Spanish-speaking clientele (Diaz, et al., 2017).

Cultural Formulation Interview

The CFI evolved from the Outline for Cultural Formulation (OCF) from the DSM-IV (Aggarwal, Nicasio, DeSilva, Boiler, Lewis-Fernandez, 2013). A criticism of the OCF was the lack of implementation guidelines for clinicians. In response to this the DSM-5 Cultural Issues Subgroup was developed to revise the OCF into the CFI. The CFI is a set of 16 questions that examines the client's perceptions of his problems utilizing a cultural lens framework. Some examples of CFI questions include, “Why do you think this is happening to you? What do you think are the causes of your problem?” and “For you, what are the most important aspects of your background or identity?” (APA, 2013, p.3). The CFI aims to expand the diagnostic evaluation to more actively include a client's cultural background and worldview.

Implications for Clinical Counselors

The CFI has potential to offer professional counselors the opportunity to supplement their intake process with questions aimed at capturing the cultural content that shapes clients’ perspectives. It is a relatively simple interview to administer and lends itself to additional broaching about topics related to race and culture (Day-Vines, et al., 2007). How are professional counselors in the multiculturally-diverse Northern Virginia region using (or not) the CFI? What are their experiences with perceived benefits and risks? More narrative experiences will lead to increased knowledge about how practicing counselors are utilizing the CFI as well as their perceptions of its utility.

Note: If you are interested in sharing your experiences with the Cultural Formulation Interview please contact Susan Branco at dr.susanbranco@gmail.com.

Continued on page 4
Continued from page 3

References


Continued on page 5

CLINICAL SUPERVISION TRAINING

3-Days ❄️ 20 CE hours ❄️ Including 2 CE hours of Ethics on Day 3
For LPCs, LMFTs, & LSATPs who plan to supervise in Virginia
PRESENTED BY
SHARON WATSON, LPC, LMFT, LSATP, NCC, ACS
JUNE 5, 6, 7, 2020
Friday 9 am – 5 pm • Saturday 9 am – 5 pm • Sunday 9 am – 4 pm
Fairfax Hilton Garden Inn
3950 Fair Ridge Drive, Fairfax, VA 22033

Day 1: CLINICAL SUPERVISION: THEORY AND PRACTICE 7 hours
• Training goals • Definitions • Motivations • Models of supervision • Role differences: administrative vs clinical • Phases in supervision • Tasks & Functions • Modalities • Concepts in the supervisory relationship

Day 2: CLINICAL SUPERVISION: SKILLS AND TECHNIQUES 7 hours
• Supervisory characteristics • Stages of development • Competencies • Resident self-monitoring • Influences in supervision • Supervisor & resident personality traits • Stress & burnout • Multi-cultural & diversity impact

Day 3: CLINICAL SUPERVISION: COMPLEXITIES OF SUPERVISION 6 hours
• Supervision essentials • Process: regulations, contracts, documentation, forms, evaluation • Ethical & legal practice in supervision • Ethics codes • Reducing vicarious responsibility • Supervisory relationship issues

Full 3-day Training: $400 for NVLPC members and $450 for non-members
Individual Days: $150 for NVLPC members and $175 for non-members

Registration will be open soon at www.nvlpc.org

For questions contact Sharon Watson at 703.350.5002 or sharonhazwatson@hotmail.com

NVLPC has been approved by NBCC as an Approved Continuing Education Provider, ACEP No. 6130. Programs that do not qualify for NBCC credit are clearly identified. NVLPC is solely responsible for all aspects of the programs
Integrating the Work of Brenè Brown into your Clinical Practice

1.5 Credit Hours

When: Friday, January 10th. Registration and Networking starts at 9:30 AM, Presentation runs from 10:00 AM to 11:30 AM

Where: Springfield Country Club, 8301 Old Keene Mill Road, Springfield, Virginia 22152

Presenter: Amy Clay, LPC, Certified Daring Way Facilitator - Candidate

Contact: Melat Johnson, Events@NVLPc.org

Registration Information: Online registration is available until: 1/10/2020

Registration Costs: Early bird pricing ends the Sunday before the Event. Regular pricing is until the day before the event.

<table>
<thead>
<tr>
<th>Members</th>
<th>Early Bird</th>
<th>Regular</th>
<th>At The Door</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical/General</td>
<td>$ 25</td>
<td>$ 35</td>
<td>$ 45</td>
</tr>
<tr>
<td>Student/Resident/Retired</td>
<td>$ 20</td>
<td>$ 30</td>
<td>$ 40</td>
</tr>
<tr>
<td>Non-Members</td>
<td>All Categories</td>
<td>$ 50</td>
<td>$ 60</td>
</tr>
</tbody>
</table>

Register online at any time.

Checks are only accepted on the day of the event. If you wish to secure a discount, you must register online and pay with a credit card.

Walk-in registrations will be accepted on the day of the event starting at 9:30 AM.

Refund, Cancellation, and Inclement Weather Policies: To cancel, please call or email 48 hours in advance or you will be charged for the event. If NVLPC cancels an event, you will be refunded the cost of the event. During inclement weather NVLPC will host the event as scheduled; events will only be cancelled in circumstances when the federal government shuts down due to inclement weather.

About the event: At this workshop, we will review concepts and processes that are helpful to apply with clients:

- Values Exercise
- Review “BRAVING” (Boundaries, Reliability, Accountability, Vault, Integrity, Nonjudgment, Generosity)
- The Physics of Vulnerability
- Standing in the Arena
- The Physiology of Shame
- Armor in the form of perfectionism, foreboding joy, numbing
- Shame Shields & Shame Resilience
- Wholeheartedness
- Offloading Hurt Strategies (Chandeliering, Bouncing Hurt, Numbing, Stockpiling, High-Centered, the Umbridge)
- Shitty First Draft (SFD)
- Living BIG (Boundaries, Integrity, Generosity)

Go to www.nvlpc.org and your Inbox for the most up-to-date information before heading to an event!

Mixed-methods results from the DSM-5 international field trial. The British Journal of Psychiatry: The Journal of Mental Science, 210(4), 290-297


Continued on page 6
Integrating the Work of Brenè Brown  continued from page 5

About the presenter: Amy Clay, LPC, is a co-owner of Sunstone Counseling and has been in private practice for over 15 years. In her clinical practice, Ms. Clay helps clients overcome a variety of concerns related to the symptoms of anxiety, panic disorder, depression, bipolar disorder, grief/loss, suicidal ideation, shame, low self-esteem, body image, betrayal, and relationship issues. She specializes in women’s issues (pregnancy, perinatal mood disorders, becoming a new mom, and sexuality issues) and couples work (premarital counseling, new parents, low/no sex, repair after an affair, and second marriages – to name a few). She is currently completing Brené Brown’s Daring Way™ training and is a Certified Daring Way Facilitator Clinician-Candidate.

Networking Notice: As part of our networking opportunities, we invite all members to bring their marketing materials to display, and/or to introduce themselves during our 2-minute introductions. Please let us know that you are interested when you RSVP.

NVLPC has been approved by NBCC as an Approved Continuing Education provider, ACEP No. 6130. Programs that do not qualify for NBCC credit are clearly identified. NVLPC is solely responsible for all aspects of the programs.

Upcoming Board Meetings

Friday, Jan 10, 12-2pm – Springfield Country Club, Springfield, VA
Friday, Feb 21, 12-2pm – 1757 Golf Club, Dulles, VA

Contact: Sarah Keely, President@nvlpc.org

Registration Information: Online

About the Events: Board Members, Directors, Committee Chairs and Members, please RSVP for this Board Meeting. No charge, just a “yes/no” response required to RSVP. You must be logged in for the RSVP to work.

Instructions to Print Your CE Certificate

Instructions to print your CE certificate after attending a Breakfast training or Workshop:

1. Log on to www.nvlpc.org. On the left-side menu, hover your cursor over “My Events” and the button for “My Certificates” will pop out. Click “My Certificates.”

2. You will see a tab called “Journal Entries” and underneath a list of NVLPC events you have attended. Click the printer icon to the left of the desired event. This will open a pop-up window with your certificate. (You may have to give your computer browser “permission” to pop up the certificate. Often “pop-ups” are blocked, but it is usually easy to give permission for a particular website.)

3. Make sure your computer is set to print with your printer and click “Print.”

On the website Forum there is an FAQ (Frequently Asked Question) about how to print your certificate, including a brief video. To access, click here.

If you have any questions, please post your question at the Forum.
Integrative Hypnosis in Counseling

1.5 Credit Hours

**When:** Friday, January 24th. Registration and Networking starts at 9:30 AM, Presentation runs from 10:00 AM to 11:30 AM

**Where:** 1757 Golf Club, 45120 Waxpool Road, Dulles, Virginia 20166

**Presenter:** Linda Ritchie, PhD, LMFT, LPC

**Contact:** Melat Johnson, Events@NVLPC.org

**Registration Information:** Online registration is available until: 1/24/2020

**Registration Costs:** Early bird pricing ends the Sunday before the Event. Regular pricing is until the day before the event.

<table>
<thead>
<tr>
<th>Members</th>
<th>Early Bird</th>
<th>Regular</th>
<th>At The Door</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical/General</td>
<td>$ 25</td>
<td>$ 35</td>
<td>$ 45</td>
</tr>
<tr>
<td>Student/Resident/Retired</td>
<td>$ 20</td>
<td>$ 30</td>
<td>$ 40</td>
</tr>
<tr>
<td>Non-Members All Categories</td>
<td>$ 50</td>
<td>$ 60</td>
<td>$ 70</td>
</tr>
</tbody>
</table>

Register online at any time.

Checks are only accepted on the day of the event. If you wish to secure a discount, you must register online and pay with a credit card.

Walk-in registrations will be accepted on the day of the event starting at 9:30 AM.

**Refund, Cancellation, and Inclement Weather Polices:**
To cancel, please call or email 48 hours in advance or you will be charged for the event. If NVLPC cancels an event, you will be refunded the cost of the event. During inclement weather NVLPC will host the event as scheduled; events will only be cancelled in circumstances when the federal government shuts down due to inclement weather.

**About the event:**
Hypnosis is a natural state. All therapists can benefit from hypnotic skills training: to be able to articulate and identify hypnotic phenomenon and harness it for its remarkable applications to learning and test taking, creativity, peak performance, affect and mood regulation, pain management, preparation for surgery, business and personal relationships, healing, and spiritual development.

A hypnotist is a helper with a set of tools that are useful in creative rapid transformation. A skilled hypnotist has learned methods for bypassing the mind’s critical faculty and establishing selective thinking. The hypnotist’s job is to use suggestion to excite the imagination and develop mental expectancy in the subject. Misconceptions about the natural state of hypnosis can elicit a fear response to hypnosis in people who do not understand what hypnosis is and what can be done with hypnosis. Once you recognize how you have already used hypnosis successfully and automatically in the past, you can learn how to use it consciously for greater efficacy in positive outcome for yourself and for your clients.

This presentation will be both didactic and experiential and will focus on increasing the participant’s knowledge of hypnosis and how it might be used to enhance their own clinical skills regardless of their approach to psychotherapy.

Yahoo Group

Did you know NVLPC hosts an email group/listserv just for members who are current in their paid membership?

NVLPC Members, request to join our Yahoo Group [HERE](#)!
Integrative Hypnosis in Counseling continued from page 7

Learning Objectives:
At the conclusion of this session the participant will be able to:

- Provide at least one commonly accepted definition of clinical hypnosis
- Explain at least four hypnosis terms and how they apply to the clinical hypnosis experience
- Define two commonly held misperceptions concerning hypnosis and give an accurate rebuttal for each
- Identify at least two characteristics of hypnotic trance
- Identify at least four hypnotic techniques/applications that are therapeutically useful
- Learn how the concept of trance logic and other hypnotic phenomena can be used therapeutically
- Define the difference between self-hypnosis and hetero-hypnosis
- Discuss standards for professional conduct in using hypnosis clinically
- Experience the phenomena of being in a hypnotic trance state
- Identify the opportunities available for further training

About the presenter:
Dr. Linda G. Ritchie, Ph.D., is a Psychologist, an LPC, an LMFT, and a Certified Hypnotherapist. She is a certified consultant for the American Society for Clinical Hypnosis (ASCH), and a certified hypnosis instructor for the International Certification Board of Clinical Hypnotherapists (ICBCH), among other affiliations.

Dr. Ritchie was an Army officer for 23 years and continues to work extensively with military members and their families. After retiring from the Army, Dr. Ritchie established a private practice, Center for Life Strategies, located in Reston, Virginia. In her practice she focuses on working with people suffering from the “common colds” of mental health – anxiety, panic, phobias, depression, worry, sadness, difficulty sleeping and unexplained fatigue. She uses a combination of classical and Ericksonian hypnosis, Neuro Linguistic Programming (NLP) and cognitive, behavioral and energy psychology to help her clients make the changes in their life they want to make as quickly as possible.

When working with couples, Dr. Ritchie uses the latest research-based methods of communication, conflict resolution, attachment theory and trust building to help couples resolve conflicts quickly and deepen their connection.

Networking Notice: As part of our networking opportunities, we invite all members to bring their marketing materials to display, and/or to introduce themselves during our 2-minute introductions. Please let us know that you are interested when you RSVP.
The Impact of Race and Gender with Clients and in Clinical Supervision

1.5 Credit Hours

When: Friday, February 7th. Registration and Networking starts at 9:30 AM, Presentation runs from 10:00 AM to 11:30 AM

Where: Springfield Country Club, 8301 Old Keene Mill Road, Springfield, Virginia 22152

Presenter: Dr. LaNail Plummer, Ed.D, LPC, ACS, NCC

Contact: Melat Johnson, Events@NVLPC.org

Registration Information: Online registration is available until: 2/7/2020

Registration Costs: Early bird pricing ends the Sunday before the Event. Regular pricing is until the day before the event.

<table>
<thead>
<tr>
<th>Members</th>
<th>Early Bird</th>
<th>Regular</th>
<th>At The Door</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical/General</td>
<td>$ 25</td>
<td>$ 35</td>
<td>$ 45</td>
</tr>
<tr>
<td>Student/Resident/Retired</td>
<td>$ 20</td>
<td>$ 30</td>
<td>$ 40</td>
</tr>
<tr>
<td>Non-Members</td>
<td>All Categories</td>
<td>$ 50</td>
<td>$ 60</td>
</tr>
</tbody>
</table>

Register online at any time.

Checks are only accepted on the day of the event. If you wish to secure a discount, you must register online and pay with a credit card.

Walk-in registrations will be accepted on the day of the event starting at 9:30 AM.

Refund, Cancellation, and Inclement Weather Policies: To cancel, please call or email 48 hours in advance or you will be charged for the event. If NVLPC cancels an event, you will be refunded the cost of the event. During inclement weather NVLPC will host the event as scheduled; events will only be cancelled in circumstances when the federal government shuts down due to inclement weather.

About the event: As participants in this training, we will:

- Review and implement the professional responsibility of ethical multicultural counseling practices
- Examine and understand the lived experience of Black Women through the exploration of themes
- Explore 33 strategies in working with Black Women in clinical settings.

About the presenter: Dr. LaNail R. Plummer, LCPC (MD), LPC (DC), NCC, is an Approved Clinical Supervisor (ACS), and a Board Certified-TeleMental Health Counselor (BC-TMH). She is committed to improving the lifestyle of many through the aspects of mental health and character development. Through the values of integrity and awareness, Dr. Plummer believes that emotional, spiritual and cultural healing is attainable.

Dr. Plummer and her team of counselors specialize in Child Centered Play Therapy, Cognitive Behavioral Therapy, Rational Emotive Behavioral Therapy and Solution Focused Therapy. As a graduate of Howard University & Marymount University, Dr. Plummer and her team ensure...
## Calendar of Events 2019-2020

<table>
<thead>
<tr>
<th>Date</th>
<th>Speakers</th>
<th>Title of Event</th>
<th>Location</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>9/13/19</td>
<td>Susan Branco, PhD, LPC-VA, LCPC-S-MD, ACS, NCC</td>
<td>Managing and Responding to Microaggressions in the Counseling Session</td>
<td>West</td>
<td>10:00-11:30am</td>
</tr>
<tr>
<td>10/11/19</td>
<td>Matthew Stevens, Navy Chaplain, LPC</td>
<td>Spiritual Screening and Mental Health Counseling</td>
<td>East</td>
<td>10:00-11:30am</td>
</tr>
<tr>
<td>10/25/19</td>
<td>Michelle May, LPC, NCC</td>
<td>Intensive Short-term Dynamic Psychotherapy</td>
<td>West</td>
<td>10:00-11:30am</td>
</tr>
<tr>
<td>11/8/19</td>
<td>Dr Faith James, LPC, CSAC</td>
<td>To Credential or Not to Credential: Navigating the Contracting and Credentialing Process</td>
<td>West</td>
<td>10:00-11:30am</td>
</tr>
<tr>
<td>11/15/19</td>
<td>Erika Carlson, LCSW &amp; Rachel Cherian, LCSW</td>
<td>Mini-Expo and Fall Workshop: Applying DBT in your Clinical Practice</td>
<td>Fairfax</td>
<td>9:30-3:00</td>
</tr>
<tr>
<td>12/20/19</td>
<td>Amy Fortney-Parks, PhD, LPC, ACS</td>
<td>Road to Licensure</td>
<td>West</td>
<td>10:00-11:30am</td>
</tr>
<tr>
<td>1/10/20</td>
<td>Amy Clay, LPC, NCC</td>
<td>Brené Brown</td>
<td>East</td>
<td>10:00-11:30am</td>
</tr>
<tr>
<td>1/24/20</td>
<td>Linda Ritchie, Ph.D, LMFT, LPC</td>
<td>Integrative Hypnosis in Counseling</td>
<td>West</td>
<td>10:00-11:30am</td>
</tr>
<tr>
<td>2/7/20</td>
<td>LaNail R. Plummer, Ed.D, LPC (DC), LCPC (M), NCC, ACS</td>
<td>The Impact of Race and Gender with Clients and in Clinical Supervision</td>
<td>East</td>
<td>10:00-11:30am</td>
</tr>
<tr>
<td>3/6/20</td>
<td>Timothy Elliott, LCSW</td>
<td>Supporting Gender and Sexual Identity</td>
<td>East</td>
<td>10:00-11:30am</td>
</tr>
<tr>
<td>4/24/20</td>
<td>Mary Alice Fisher, PhD</td>
<td>Spring Ethics Workshop: Beginnings and Endings: Avoiding Some of the Ethical Pitfalls.</td>
<td>Fairfax</td>
<td>TBD</td>
</tr>
<tr>
<td>5/15/20</td>
<td>Joanne Thomas, LPC</td>
<td>Making the Transition from Resident in Counseling to LPC-Now What?</td>
<td>East</td>
<td>10:00-11:30am</td>
</tr>
</tbody>
</table>

Our Events and Workshop Chairs are working on finalizing details with presenters for some of the events. As the information becomes available, additional information will be provided through future newsletters and the website. Always check the website for the most updated information and registration links.

NVLPC has been approved by NBCC as an Approved Continuing Education Provider, ACEP No. 6130. Programs that do not qualify for NBCC credit are clearly identified. NVLPC is solely responsible for all aspects of the programs.

www.nvlpc.org
The Supervision Corner

BY SHARON WATSON, LPC, LMFT, LSATP, NCC, ACS - Supervision Chair - supervision@nvlpc.org

More Updates

Petition Results: In the November newsletter, I discussed the petition received by the Board of Counseling for rule-making requesting that residents in counseling be allowed to directly bill for services. This was the determination:

“In accordance with Virginia law, the petition was filed with the Register of regulations and published on September 30, 2019 with comment requested until October 25, 2019. The petition and all comment received in support or opposition were reviewed at the Board meeting on November 25, 2019. The Board decided to take no action based on its concern that direct billing by residents is contrary to the reimbursement policy of DMAS and other third party payors, and that it might incentivize residents to engage in independent practice without appropriate supervision.”

There were 70 comments in response to this petition with an overwhelming majority in favor of allowing residents to directly bill clients for services which would allow residents to receive payment directly from their clients. But apparently the justifications voiced by many licensed clinicians and residents were not enough to make the case for changing the regulation. If you would like to read the comments you can go to: https://www.townhall.virginia.gov/L/comments.cfm?petitionid=308

My opinion is that the two reasons given by the Board to “take no action” seem spurious. First, the petition was not a request asking that residents be allowed to take insurance or Medicaid payments. In fact, I have been told by the Board that they have no purview over insurance reimbursement for clinical services for residents or licensed counselors. Second, I’m concerned that it seems the Board is making an assumption that residents will intentionally disregard the regulations and practice without supervision if they are allowed to take payment. Wouldn’t it be better to discipline those who do not follow the regulations rather than to restrict those who would follow the regulations? (Note: these are my opinions and not those of NVLPC.)

Regulation changes: In case you didn’t notice it, there was a new set of regulations published 10-16-2019 for LPC licensure. The major change was the addition of this paragraph under “Residency Requirements”:

7. Supervised practicum and internship hours in a CACREP-accredited doctoral counseling program may be accepted for up to 900 hours of the residency requirement and up to 100 of the required hours of supervision provided the supervisor holds a current, unrestricted license as a professional counselor.

Typically, with a new set of regulations, the Board edits and updates the application and verification forms. That’s painful for those of us who make templates for the forms to use with residents because it means a new set of templates must be made. However, it appears that with these updates the forms were NOT changed and are still dated 4-2018.

But wait…there’s more!!! There are major changes in effect as of December 23, 2019.

This is the current announcement on the Board of Counseling homepage regarding new Emergency Regulations:

*The Virginia General Assembly required the Board of Counseling to promulgate regulations for the issuance of a temporary license to Residents in Counseling, Marriage and Family Therapy and Substance Abuse Treatment.*

Continued on page 12
The Board developed emergency regulations which will be effective December 23, 2019. View these Emergency Regulations

The Board has developed a chart and FAQ to help assist residents and their supervisors identify the changes and the requirements for a Licensed Resident in Counseling, Marriage and Family Therapy and Substance Abuse Treatment.

Links to the comparison chart and FAQs are below:
Resident in Counseling comparison chart and FAQs
Resident in Marriage and Family comparison chart and FAQs
Resident in Substance Abuse Treatment comparison chart and FAQs

Key Regulations changes for Resident in Counseling, Marriage and Family Therapy and Substance Abuse Treatment effective December 23, 2019.

1. Residents will be issued a temporary license once meeting the minimum requirements outlined in the Regulations.
2. Once temporarily licensed as a Resident in Counseling, Marriage and Family Therapy or Substance Abuse Treatment, a resident will not be required to submit an application if adding/changing worksites or supervisors.
3. A supervisory contract must be established prior to providing clinical services and before counting hours toward licensure. Supervisory contract is an agreement that outlines the expectations and responsibilities of the supervisor and resident in accordance with regulations of the board.
4. Licensed residents must renew their license each year and are required to complete three (3) hours of continuing education (CE) hours in ethics, standards of practice or laws governing behavioral science professions in Virginia.
5. Residents will be required to pass the established examination for licensure within six (6) years from the date of initial issuance of their resident license.
6. The Verification of Supervision form completed and signed by the supervisor must be notarized.
7. Random audits will be conducted to verify the licensed resident is meeting the minimum requirements which would include verification of a signed supervisory contract.
8. Licensed residents will be responsible for ensuring supervisor(s) have met the supervisor requirements and are listed on the Supervisor Registry.
9. Previously approved residents will be issued and mailed a license in the month of January 2020.

In reviewing the Resident in Counseling comparison chart, it also appears that residents will be able to take the licensure exam at any time during their residency:

“The NCMCHE Examination must be passed within six (6) years from the date of initial issuance of the resident license. A licensed resident can take the examination at any point during the residency without Board pre-approval.”

I will be reviewing the comparison charts and FAQs before the next newsletter, so if you have any questions that you’d like to have addressed in a future Supervision Corner article, let me know.

Continued on page 13
Dear Members of NVLPC:

I regret to inform you that the Northern Virginia Licensed Professional Counselors (“NVLPC”) association has been victimized by a social engineering attack. Approximately $11,000 was wired to an off-shore account as the result of a targeted phishing attack perpetrated against NVLPC.

We are not aware of any confidential or personal identifying information that was compromised or of any account information that was revealed to the attackers. NVLPC has reported the incident to the appropriate law enforcement agencies and is working with our financial institution partners in an attempt to recover the lost funds.

NVLPC has undertaken a full review of its financial policies and information security policies. NVLPC is actively working with it's attorneys and advisors to ensure NVLPC policies are as comprehensive as reasonably possible.

I will provide updates as more information is available. If you have any questions regarding this matter, please contact our legal counsel, Mr. A. Charles Dean at the law firm of Gross, Romanick, Dean & DeSimone, P.C. at adean@grddlaw.com.

Thank you for your understanding of this situation.

Sincerely,
Sarah KT Keely, LPC
President, NVLPC

October 28, 2019

Student Essays from 2019 Competition

Since 2013, the Northern Virginia Licensed Professional Counselors (NVLPC) has solicited essays from active student members enrolled in a masters or doctoral counseling program. Annually, NVLPC student members are given the opportunity to submit a 600-word essay on the work they plan to do in continuing their growth and development in the field of counseling. The author of the winning essay receives a $1000 scholarship.

This year there were seven NVLPC student candidates who shared their stories and goals towards future careers in the counseling field. The 2019 winning essay, by Debbie Rackham, was published in the July, 2019, issue of this newsletter.

This month we are proud to publish two more of the submitted essays, by Wendy Rood and Harleigh Humphries. Additional essays will be published in coming issues. Thank you to all who participated in this competition. We wish you the best in your continued endeavor to pursue your education in the field of counseling.

Continued on page 14
Student Essay By Wendy Rood

Everyone gets sick. It’s a fact of life. Sometimes, however, an acute or chronic illness can be both physically and emotionally overwhelming. The physical ailment gets the focus, but I believe that the psychosocial aspects would optimally be dealt with, too. There is a connection between all of them. Helping people with whatever aspect of their illness troubles them is something I would like to explore as part of my career.

Being sick can cause emotional reasons to seek counseling. There can be confusion, fear, anger, and possibly grief at diagnosis. Sometimes the symptoms are hard to withstand. Some people need to vent about what they’re going through. Some people just want things to go back to normal, or at least appear normal. I have personally seen the ways that physical and mental health affect each other. My daughter has a syndrome that causes constant pain. I have diabetes. Although these ailments are very different, the biopsychosocial interplay is evident for each of us. In my daughter’s case, I see how emotionally draining it is to try to get through the school day acting like she’s fine, which is what makes her least anxious at school. Yet because she looks normal externally, some students and teachers doubt she’s actually in pain. Home and therapy are the two places that she releases her pent-up emotions. In my case, my blood glucose levels can sometimes affect my feelings: high blood sugar can make me cranky; low makes me spacey.

Sickness influencing emotions makes sense to most people. However, feelings can impact our bodies as well. Stress causes a release in cortisol. Cortisol causes insulin resistance, which then causes higher blood sugars (Curry, 2019, pp. 59-60). I’ve experienced this first-hand. After a traumatic experience, I had to triple my insulin usage in order to normalize blood glucose levels. My child’s doctors actually prescribed mindfulness and easing stress for her condition. It’s not that her pain is “in her head.” Instead, alleviating emotional tension and anxiety can bring down inflammation that worsens the pain. Ideally, for many, illness would be treated physically, cognitively, and emotionally as a healthcare triad.

I am currently at an early point in my counseling program and am still learning about the different ways I could assist people in their mental health journey. Some things that I am interested in studying as it applies to this topic are: cognitive-behavioral therapy, group therapy, mindfulness and relaxation techniques, positive coping skills, and resilience theory. I’m sure there are additional things I don’t yet know about. At the very least, I know that just listening to someone and supporting them can be helpful. I look forward to learning as much as possible and assisting individuals as they deal with their medical condition. Whether the problem is acute or chronic, anyone could benefit from receiving counseling during illness.

References

Diabetes Forecast. 72(1), 58-61.

Student Essay By Harleigh Humphries

Western Loudoun County seems to be known for horses, wineries, and terrible VDOT winter road management. While I may not be well-versed in de-icing roads or growing grapes, I do know horses. Horses have been an integral part of my life and are not only my passion, my job, but also my therapy.

I attended Virginia Tech for my undergraduate degree in Animal and Poultry Science thinking I’d find something that would combine horses and a career, but found myself looking forward into the future saying, “How can I make my living training and selling horses when I’m 70 years old? Is that really that fulfilling for me?” It was a question that I constantly pondered.

With Virginia Tech’s Corps of Cadets program and my own interpersonal connections to the military, I met many active duty services members as well as veterans. Quite a few, dare I say too many, were haunted by the memories they carried with them from their combat days, months in boot camp, or even evenings spent in the barracks. Too many times did I hear the wartime stories, too many times did I watch as drugs and alcohol soothed the symptoms, too many times was I woken up in a headlock by my ex-boyfriend’s night terrors, and too many times did I sit frozen with uncertainty, sadness, and confusion. I wanted so badly to help but found myself paralyzed with no idea how to. Finally, something clicked.

Horses have always been my safe place. There is nothing better than walking into the barn after a stressful day to knickers and neighs. The repetitive and rhythmic pacing of cleaning stalls allows me to sharpen my mindfulness skills. Nothing is more satisfying that watching a shimmering coat gleam in the sunshine after meticulous brushing and adding that

Continued on page 15
little bit of elbow grease. Sitting atop 1,000 pounds of muscle and only using minimal cues from your legs and hands to control the power is so moving. When I realized what therapy I received from horses, I knew there had to be a way to incorporate it for others. More importantly, I had found my perfect combination of career, purpose, and giving back.

After adding up all of the components, I found the Equine Assisted Growth and Learning Association (EAGALA) and knew instantly that this was a program I needed to be a part of. Once I read the certification requirements, I quickly searched for counseling Master’s programs, and here I am now, coming into my last 13 months of graduate school through Northwestern University.

I could write out all the statistics and research on equine therapy, like how it has been shown that it reduces symptoms of trauma, decreases anxiety, depression, and behavioral dysregulation. I could talk about how even the Northern Nevada Correctional Center uses inmates to gentile the wild horses as part of their rehabilitation program. Or I could list out all 353 registered EAGALA centers in the United States, showing the need and reception of the practice. What matters most is the impact this therapy has on people.

Since that lightbulb moment happened, not a day has gone by where I’m not planning for my future practice. I’ve spent hours reading articles on trauma treatments, and how children with autism are having such success with this therapy. This drive to combine my passion of horses and a way to give back to those who have given us so much and receive little help in return is something that not only excites me but has given my life a whole new direction and inspirational “spur forward.”

**Student Essays from 2019 Competition continued from page 14**

<table>
<thead>
<tr>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EXECUTIVE BOARD</strong></td>
</tr>
<tr>
<td>President</td>
</tr>
<tr>
<td>Vice President</td>
</tr>
<tr>
<td>By-Laws Recruitment</td>
</tr>
<tr>
<td>Secretary</td>
</tr>
<tr>
<td>Treasurer, Interim</td>
</tr>
<tr>
<td>Past President</td>
</tr>
<tr>
<td><strong>DIRECTORS</strong></td>
</tr>
<tr>
<td>Communications</td>
</tr>
<tr>
<td>Newsletter</td>
</tr>
<tr>
<td>Advertising</td>
</tr>
<tr>
<td>Website</td>
</tr>
<tr>
<td>Yahoo Groups</td>
</tr>
<tr>
<td>Events</td>
</tr>
<tr>
<td><strong>Events-East</strong></td>
</tr>
<tr>
<td><strong>Events-West</strong></td>
</tr>
<tr>
<td><strong>Workshops</strong></td>
</tr>
<tr>
<td><strong>Membership</strong></td>
</tr>
<tr>
<td><strong>Multicultural</strong></td>
</tr>
<tr>
<td><strong>Networking Groups</strong></td>
</tr>
<tr>
<td><strong>Education</strong></td>
</tr>
<tr>
<td><strong>NBCC Liaison</strong></td>
</tr>
<tr>
<td><strong>Resident-in-Counseling</strong></td>
</tr>
<tr>
<td>Support East</td>
</tr>
<tr>
<td>Support West</td>
</tr>
<tr>
<td><strong>Student Development</strong></td>
</tr>
<tr>
<td><strong>Supervision</strong></td>
</tr>
<tr>
<td><strong>ADMIN/SUPPORT</strong></td>
</tr>
<tr>
<td>Administrative Asst</td>
</tr>
</tbody>
</table>