

CLINICAL SOCIAL WORKER INTERNSHIP PROGRAM

INTERN means an applicant for licensure as an independent or as a clinical social worker who has not yet completed 3000 hours of supervised postgraduate training, but is in the process of doing so under a program of internship approved by the Board. (NAC 641B.035)

CLINICAL SOCIAL WORK means the application of methods, principles and techniques of case work, group work, community organization, administration, planning, consultation, research and psychotherapeutic methods and techniques to persons, families and groups to help in the diagnosis and treatment of mental and emotional conditions. (NRS 641B.030)

PSYCHOTHERAPEUTIC METHODS AND TECHNIQUES means the methods of treatment that use a specialized, formal interaction between a clinical social worker and a client in which a therapeutic relationship is established and maintained to:

- Understand unconscious processes and intrapersonal, interpersonal and psychosocial dynamics; and,
- Diagnose and treat mental, emotional and behavioral disorders, conditions and addictions. (NAC 641.057)

Clinical Social Worker: Performance of supervised, postgraduate social work in Nevada.

An applicant for licensure as a clinical social worker must complete an internship program consisting of not less than 3, 000 hours of supervised, postgraduate social work. Except as otherwise provided in subsection 2, the required work must be:

- (a) Undertaken in a program that is approved by the board before the applicant begins the program. The program must include, without limitation:
 - (1) An examination, if deemed necessary by the board;
 - (2) An appropriate setting, as determined by the board;
 - (3) Supervision of the applicant by a supervisor who has been approved by the board; and
 - (4) A plan of supervision that has been approved by the board.
- (b) Completed not earlier than 2 years or later than 3 years after the board approves the program. For good cause, the board will grant a specific extension of this period.
- (c) Conducted pursuant to the requirements and standards set forth by the board. For good cause, the board will withdraw its approval of a particular program.

At least 2,000 hours of the supervised, postgraduate clinical social work required by subsection 1 must be in the area of psychotherapeutic methods and techniques to person, families and groups to help in the diagnosis and treatment of mental and emotional conditions. The remaining hours may be completed in others areas of clinical social work. [NAC641B.150 (1,2)]

The applicant must be able to demonstrate:

A. The ability to diagnose, assess, and treat mental and emotional conditions

- Comprehensive psychosocial assessment including knowledge and utilization of Mental Status Exams (MSE)
- Determination of diagnosis, i.e. use of the DSM
- Development of treatment plans with specific goals
- Various clinical intervention approaches
- Document and review of treatment outcomes
- Knowledge of psychopharmacology
- Knowledge of addictions and the related clinical interventions
- Suicidal/homicidal evaluations and interventions
- Abuse/neglect evaluations and interventions
- Experience with a range of clientele

B. The skills and professional conduct necessary for continuing competency

- Establish professional clinical relationships – initiating and sustaining a worker/client relationship based in social work standards of professional conduct that strengthens the client.
- Appropriate “use of self” with clients and colleagues – the separation of personal issues from professional responsibility and relationships
- Commitment to the social work profession and services to clientele
- Application of social work values and ethics
- Knowledge and application of human behavior and the social environment
- Recognize and reinforce the client's prerogative of self-determination
- Utilize supervision for critical review of practice

Internship Policy – Clinical

An *Internship Program* is defined as the contract between a Board eligible **intern**, a Board approved **intern supervisor** and a Board approved internship **site** (agency). Clinical internship applicants must submit an **application** to the Board for approval prior to engaging in any direct practice with clients. The applicant must demonstrate to the Board's satisfaction that the internship position is at an approved site for clinical practice pursuant to NAC 641B.150. The internship program must be an integral part of the agency's philosophy and service delivery.

Additionally, the Board looks at the applicant's practice site for information of the client population, typical presenting problems/diagnoses of the clients and whether the position requires a knowledge of psychopharmacology. An applicant has the burden of demonstrating that a position constitutes clinical social work and is appropriate as a learning setting. The agency, intern and supervisor must be aware that the site(s) is subject to Board review at any time. The agency must give Board permission to conduct site visits. If a site is found not meet the requirements as described above, Board may terminate an internship. The Board will give intern 30 days to close cases. If internship is terminated, intern will immediately notify clients in writing and seek the transfer, referral or continuation of services for the client to minimize possible adverse effects.

An agency job description must be submitted with the internship application. The job description must include the provision of clinical practice and psychotherapeutic methods, as detailed above. **Any change of position / job must be reported to the Board.** A new job description must be submitted with a request for an internship change. This change must be approved by the Board for the internship to remain active.

The internship site must be in an **agency** that has a clinical program in place that would be appropriate for the educational needs of an internship. If the intern supervisor is **off-site**, the site must be able to designate a clinical supervisor on-site that is a licensed mental health professional. The on-site supervisor must coordinate with the Board approved supervisor regarding intern practice issues and concerns. An intern may not engage in direct practice unless a supervisor or an agency designated licensed mental health professional is available for immediate consultation. Although it is preferable that supervisor be on-site, other provisions for immediate consultation may include, but are not limited to, the use of cellular phones, pagers, and presence of co-therapists or clinical teams particularly when there is a high risk of violence, verbal hostility, or intern isolation during the provision of clinical services.

The intern and supervisor must submit a **plan of supervision** specific to intern abilities and the practice setting which describes how the intern will gain the skills necessary to diagnose, assess and treat mental and emotional conditions and gain the skills and professional conduct necessary for continuing competency.

For the purposes of licensure in Nevada, clinical practice in the area of **psychotherapeutic methods and techniques** includes, but is not limited to, (1) the completion of comprehensive psychosocial assessments, including mental status exams; (2) determination of diagnosis, i.e. using the DSM; (3) development of treatment plans with explicit goals; (4) achievement of goals through the use of one or more intervention approaches, i.e.

brief and long-term psychotherapy, family and group therapies, crisis interventions; (5) documentation and review of treatment outcomes.

The clinical social work intern must understand **concepts relating to risk and safety issues** in clinical situations and how to use safety procedures to protect themselves and their clients. To ensure that the interns are trained in and demonstrate the ability to assess and function safely in emergency situations, the internship supervisor and agency site must address the following:

- That the safety of the client and the intern are addressed through the use of safety and risk assessments and by the establishment of related safety policies and procedures;
- That included in policies and procedures is an emergency protocol for access to the internship supervisor when such situations take place;
- That a plan be developed for assessing an intern's readiness for competent autonomous practice in relation to such safety and risk factors and that this assessment be incorporated into the intern's first quarterly report to the Board.

The agency and intern supervisor will ensure that during the first quarter of the internship (or longer if deemed necessary), **a mental health professional must be available on-site during the provision of direct service by the intern.** If the provision of clinical services occurs off-site, a mental health professional must accompany the intern during the first quarter of the internship or longer if deemed necessary. **The supervisor will make provision for the opportunity of participation and observation of intern's practice regardless of where the services are provided throughout the remainder of the internship program.**

At the conclusion of each quarter, the intern supervisor shall submit a **Quarterly Progress Report**. This report will be reviewed and approved by the Board. Approval of hours is not a guarantee. The Board may **refuse to accept a quarterly or final report** submitted by a supervisor of an intern if the report, (a) does not satisfy the reporting requirements for the forms provided by the Board; (b) does not include such additional information concerning the internship as requested by the Board; or (c) is received by the Board after the date on which the report is due. If the Board refuses to accept a quarterly or final report, the Board will disallow credit for all hours of internship as reported on the report.

The Board may limit hours acceptable at any site if it determines that the intern is not gaining the requisite skills necessary to be licensed as a Clinical Social Worker and require the intern to show competence in specific areas necessary to be a Clinical Social Worker.

State of Nevada
Board of Examiners for Social Workers
4600 Kietzke Lane, #C121, Reno, NV 89502
(775) 688-2555

PLEASE READ BEFORE COMPLETING APPLICATION

Checklist for Clinical and Independent Social Work Internship Programs

Below are listed all the documents required for social work internship programs performed in Nevada. **APPLICANTS MUST ALREADY BE LICENSED AS A "LSW" IN NEVADA.** Each item on this list must be completed and provided.

Failure to provide any of the requested information will result in the application not being processed or being rejected as incomplete. Allow 30 days for processing the application. Please check each item as you complete your packet.

Both the Intern and the Supervisor must sign this checklist and include it with submission of the internship application documents.

The following documents must be received before the Board will review a requested internship program:

Application for License - Clinical Social Worker or Independent Social Worker.

Application fee (\$40.00) and clinical or independent license fee (\$100) – **total \$140.00.**

Application for Social Work Internship Program.

Job description of the individual internship position.

Supervision Agreement (Must have specific dates listed for term of agreement, Article III).

Supervisor's Plan for the Internship Program (**to be composed and signed by Supervisor and Intern**).

If supervisor is not employed by the agency where internship practice will be performed, a **letter** from the agency granting him or her access to the files for the purpose of supervision **and** permission to observe clinical services performed by the intern, **must be included**. Additionally, for clinical internships only, the name of an agency designated licensed mental health professional must be provided (see enclosed clinical internship policy).

Fingerprint cards (2), waiver, and a money order payable to the **NV DPS** in the amount of \$36.25 need to be returned to the Board for processing. **Fees incorrectly submitted will be rejected.**

State of Nevada, Board of Examiners for Social Workers

Application for License

Please read instructions before completing this form. Use blue or black ink.

Independent Social Worker

Clinical Social Worker

General Information

Present Legal Name: _____
Last First Middle

List any other name(s) ever used: _____

Mailing Address: _____
Street City State Zip

Telephone (____) _____ Social Security Number: _____ Date of Birth: _____

Are you currently, or have you ever been licensed, registered or certified as a social worker in another state(s)?

No Yes If "yes," which state(s) _____

Have you ever taken an ASWB examination? No Yes If "yes," date taken _____
If "yes," which level? Master's Advanced Generalist Clinical

Have you completed 3000 postgraduate hours specific to the license you are applying for Yes No

What other professional Nevada state licenses or certifications do you currently hold? _____

Are you seeking a provisional license? No Yes

If "yes," to take ASWB exam or, to obtain a social work degree

Citizenship: U.S. Citizen Alien Registration Number _____ Other _____
Submit a copy of birth certificate, passport, certificate of naturalization or alien registration card with application.

Employment History: List ten (10) years of work history in chronological order beginning with most recent (explain any gaps in employment). Add additional sheets if necessary.

Employer Address Telephone

Position Supervisor Dates of Employment

Duties

Employer Address Telephone

Position Supervisor Dates of Employment

Duties

Employer Address Telephone

Position Supervisor Dates of Employment

Duties

Board Use Only

Date Received _____ Check # _____ Amount _____

Education:

A copy of a certified transcript showing the degree awarded must be received directly from the school.

Name of School	Location	Major	Degree Date	Degree Awarded
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

	Yes	No
1. Have you ever been convicted of a felony?		
2. Have you ever been arrested or convicted of, or charged with a criminal or civil offense and/or convicted of, or charged with possession, distribution or use of a controlled substance or dangerous drug?		
3. Have you ever been denied a license or certification or been denied approval to take a licensing examination?		
4. Have you ever been the subject of an administrative action or proceeding relating to a professional license or certification?		
5. Have you ever surrendered a professional license or certification voluntarily or otherwise?		
6. Have you ever been charged with unprofessional conduct or professional incompetence?		
7. Do you have a medical condition that in any way impairs or limits your ability to deliver essential social work services?		
8. Do you use any chemical substance(s) (including prescriptions) which in any way impairs or limits your ability to deliver essential social work services?		
If the answer to any of the above questions is "yes," a signed statement of explanation must be attached. Copies of any documents that identify the circumstances or contain an order, or agreement, or other disposition are required.		

Child Support Information: Please check the appropriate answer. *It is mandatory that you answer this question.*

- _____ a. I am not subject to a court order for the support of child.
- _____ b. I am subject to a court order for the support of one or more children and am in compliance with the order or am in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.
- _____ c. I am subject to a court order for the support of one or more children and am **not** in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.

I have read all questions, answers and statements and know the content thereof. I hereby certify under the penalty of perjury that the information furnished on this document is true and correct.

I hereby authorize the Board of Examiners for Social Workers, its agents and employees, to conduct any investigation(s) of my business, professional, social and moral background, qualifications and reputation, as it may deem necessary, proper or desirable. No liability of any sort or kind shall attach itself to the said Board of Examiners for Social Workers, its members, or employees or by reason of the use of the authorization.

Dated Signature of Applicant

Notary Seal

Subscribed and sworn to before me this _____
day of _____
Month / Year

Signature of Notary

Notary Public for State of _____

My commission expires _____

To Be Completed by Intern Supervisor

Name _____
Last First Middle

Address _____
Street City State Zip

Work Phone (_____) _____ Other Phone (_____) _____

Nevada Social Work License Number _____

Employer _____

Address _____
Street City State Zip

Position Title _____ Hire Date _____

If this is your first time as an intern supervisor, please attach a copy of your current resume and list the names, addresses and telephone numbers of three (3) references that are able to critique your qualifications as a social worker and supervisor of social worker interns.

Are you able to demonstrate at least three (3) years of experience as a licensed clinical social worker or independent social worker? Yes No

Have you completed an intern supervisor training workshop in the last five years? Yes No

If you are supervising an applicant seeking a license as a clinical social worker, are you able to demonstrate that your current practice consists of not less than 15 hours per month of clinical practice in the area of psychotherapeutic methods and techniques? N/A Yes No

If supervising an applicant seeking a license as an independent social worker, are you able to demonstrate your current practice consists of not less than 15 hours per month of independent practice? N/A Yes No

Do you or have you ever had any business or personal relationship with the applicant? Yes No

Do you have or have you ever had a client relationship with the applicant? Yes No

Number of social work interns currently under your supervision _____

Supervisors should be cognizant of the responsibility for supervising clinical and independent interns. Supervisors may be subject to disciplinary action by the Board and/or held civilly liable by the courts for the practice of interns under their supervision.

Social Work Intern Signature

Date

Intern Supervisor Signature

Date

Any change of internship sites or supervisors must be pre-approval

Supervision Agreement

ARTICLE I Parties

This agreement is made by and between _____ and _____
Intern Supervisor
hereafter referred to as Intern and Supervisor respectively.

ARTICLE II Purpose

The purpose of this agreement is the provision of internship supervision for the practice of clinical social work or independent social work in Nevada as defined by Nevada Revised Statutes 641B.

ARTICLE III Term

This agreement is effective from _____ and will remain in effect until _____.
month/day/year month/day/year
unless terminated by Intern or Supervisor after 30 days advance written notice. Duration and termination of internships and internship supervision are subject to conditions specified in Chapter 641B of Nevada Revised Statute and Nevada Administrative Code.

ARTICLE IV Internship Content and Process

Content

Intern and Supervisor agree the content of the internship learning experience will adhere to the Nevada Board of Examiners for Social Workers "Learning Objectives for Clinical and Independent Social Work Internships" as published and made a part of and attached to this agreement. (Appendix I)

Process

Intern and Supervisor agree the process of the internship learning experience will comply with Nevada Administrative Code 641B.140 through 641B.170 which are attached and made part of this agreement. (Appendix II)

Intern and Supervisor agree to establish a face-to face supervision schedule as specified below:

_____ hour(s) per _____.

ARTICLE V Internship Site (s)

Agency Name _____ Telephone (____) _____

Address _____
Street City State Zip

Agency Name _____ Telephone (____) _____

Address _____
Street City State Zip

Supervisor and Intern agree and declare internship supervision and internship site comply with Nevada Revised Statute and Nevada Administrative Code prohibiting the private and independent practice of clinical social work for interns.

ARTICLE VI Compensation for Supervision

Intern agrees to pay Supervisor \$_____ per hour for supervision provided during the agreement period.

ARTICLE VII Special Provisions (Optional)

ARTICLE VIII General Provisions

This agreement supersedes any and all other agreements, oral or written, between Intern and Supervisor hereto with respect to the rendering of supervision of Intern by Supervisor. This document contains all of the covenants and agreements between Intern and Supervisor with respect to representations, inducements, promises or agreements, orally or otherwise, made by any party, or anyone acting on behalf of any party, which are not embodied herein, and that no other agreement, statement or promise not contained in the agreement shall be void or binding.

Any modification of this agreement will be effective only if in writing, signed by Interns and Supervisor, submitted to and approved by the Nevada State Board of Examiners for Social Workers. Such modifications must be in compliance with applicable Nevada Revised Statutes and Nevada administrative Code.

If any action at law or in equity, including an action for declaratory relief, is brought to enforce or interpret the provisions of this agreement, the prevailing party will be entitled to reasonable attorney's fees, which may be set for that purpose, in addition to any other relief that the party may be entitled.

This agreement shall be governed by and constructed in accordance with the laws of the State of Nevada.

Executed at _____ On _____
City/State Month/ Day/Year

Intern

Supervisor

Notary Seal

Subscribed and sworn to before me this _____
date of _____
Month/Year
Notary Public for the State of _____
My Commission Expires _____

Signature of Notary Public

**State of Nevada
Board of Examiners for Social Workers
4600 Kietzke Lane, #C121, Reno, NV 89502
(775) 688-2555**

Appendix I

**General Learning Objectives for Clinical and Independent
Social Work Internship Programs**

Supervision is an educational process with the objective of enhancing the intern's professional development. The ultimate goal of the clinical or independent social work internship is the attainment of the intern's competency for self-directed practice. The following learning objectives are considered by the Board of Examiners for Social Workers to be minimal standards for the internship experience. The content of the internship and supervision will vary contingent upon many variables including the baseline skills and knowledge of the intern and supervisor, the internship agency's mission, agency policy and procedures and the intern's conscious use of self for professional growth and development.

Orientation:

1. Agency history, funding sources and mission statement.
2. Working knowledge of the internship agency's program plan which identifies services delivered to clients.
3. The social worker's role within the agency.
4. Working knowledge of the agency organizational chart which details various staff positions, lines of authority and communication.
5. Working knowledge of agency budget process and fiscal system.
6. Specific role responsibilities of interns in the agency.
7. Purpose of supervision, agreement with intern supervisor and internship supervision structure.
8. Accountability of agency to board or public authority.
9. Sanction of agency to provide human services and agency limitations.
10. Basic policies and procedures of the internship agency.
11. Agency process for program planning and policy-making.
12. Agency personnel practices and work performance standards.
13. Working knowledge of agency referral sources.
14. Agency's role in community network and agency's responsibility to develop community awareness of unmet human needs.

Administration:

1. Application of social work goals, values and ethics when fulfilling administrative responsibilities to clients, agency and community.
2. Working knowledge Chapter 641B of Nevada Revised Statutes and Nevada Administrative Code.
3. Establish intern compatibility with agency, agency goals and practices.
4. Time management skills.
5. Strategies for decision making.

6. Determination of priorities for work assigned.
7. Application of agency policy and procedures to specific learning experiences.
8. Developing intern's relationship to colleagues in the agency.
9. Appropriate agency social behavior on the job.
10. Use of agency forms, statistics and records.
11. The requirements of confidentiality; agency and criminal penalties.
12. Adjustment to work load and agency performance expectations.
13. Participation in staff meetings.
14. Accountability and documentation for services provided by intern.
15. Ethical and cultural considerations in public relations.
16. Program evaluation and planning.
17. Evaluation of intern work performance.

Educational Content:

1. Stimulation of intern's commitment to the social work profession and services to clientele.
2. Application of social work values, ethics and knowledge base to practice as demonstrated by review of records and direct observation of intern's service delivery.
3. Stimulation of spirit of inquiry.
4. Application and knowledge of human behavior and the social environment.
5. Development and management of the professional relationship and its differential use with clients and client systems.
6. Develop skills in assessment of individuals, families, groups, communities and effective problem amelioration.
7. Develop diagnostic, assessment and treatment skills for mental disorders (CLINICAL SOCIAL WORK INTERNS ONLY).
8. Develop ability to respond to client strengths and weaknesses in a therapeutic manner.
9. Recognize and reinforce the client's prerogative of self-determination.
10. Utilize supervision for critical review of practice.
11. Practice conscious use of self in service delivery.
12. Identification of intern's method of learning.
13. Develop ability to network with other professionals and laypersons.
14. Knowledge of the unique historical basis of the social work profession.
15. Use of consultation in social work practice.

NOTE: The term "agency" means any and/or all public or private entities providing social work services.