

Sandra Lopez

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Sunset Commission
Austin, Texas

Re: The Texas State Board of Social Worker Examiners and
Recommendation for Behavioral Health
Executive Council (BHEC)

Dear Sunset Commission Members:

I am a Licensed Clinical Social Worker (LCSW) and licensee of the Texas State Board of Social Worker Examiners (TSBSWE). I have been a Social Worker for 38 years having worked in a variety of settings including healthcare, family service, academia, and private clinical practice. Most recently, I served as Clinical Professor at the University of Houston Graduate College of Social Work where I served as faculty for twenty years. I am currently in clinical and consulting practice in the Houston area. I am a Board Approved Supervisor who has provided LCSW supervision to approximately 60 social workers in the Houston area in the last twenty-five years. For the last twenty years, I served as an approved continuing education provider by the TSBSWE, developed the curriculum and taught an approved 40 hour clinical supervision course offered at the University of Houston Graduate College of Social Work as well as in the community. I am a proud longstanding member of the National Association of Social Workers. I have served in the local, state, and national leadership of the National Association of Social Workers including Board member, Vice-President, and President of the Texas State Chapter, and member and Chair of the National Nominations and Leadership Committee, and was a member and Chair of the National Clinical Social Work Council. I have served as co-author of several NASW national publications including the Guidelines to Clinical Supervision.

Because of my longstanding involvement in NASW, my affiliation with the 40 hour clinical supervision course, and my supervisory practice, I routinely receive calls and emails from social work colleagues asking for my guidance and advice when they encounter issues with the TSBSWE. These calls come not only from Houston but from all over the State of Texas. In addition, as a LCSW board approved supervisor, since August, 2017, I have had my own significant encounters with the Board which has impacted the five school social workers I currently supervise. For almost a year, I have noted a worsening operation of the Board with

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significant concerns impacting social work licensees and ultimately the clients they serve across the state. These concerns are too many to share within this correspondence however I will at least highlight those that are reflective of the critical urgency to address these issues.

Lengthy Wait Time for Telephone Calls to the Board

Countless Social Workers I have heard from report they have spent literally hours waiting for someone to answer the telephone at the TSBSWE office. The reported wait time ranges from one hour to two hours in some cases. This raises a critical concern about how any social worker would have the time during their busy work days with clients to initiate a call to the Board. Not to mention it creates such unnecessary stress for social workers whose licenses are an important requirement to their employment. In some situations, social workers have held on for the lengthy time only to have someone state that all staff are in a mandatory meeting, and in others, someone answered and then hung up the phone.

Three social work colleagues contacted me a few weeks ago as they had renewed their social work license in a timely manner and yet spent months waiting to hear back from the Board. This created problems for all three in that their employers were anxiously waiting for their licenses to be renewed. In one case, my healthcare social work colleague was sent home for several days as he awaited word from the Board. At least during this time, he was able to finally make contact with someone at the Board, after a two hour wait, and then received approval for renewal so he could return to work at the hospital.

Lengthy Wait Time for Responses to Submission of Applications

Although the Board has strict requirements for submission of applications within certain time frames, there have been serious delays in social workers' hearing back from the Board on issues that were critically important to their professional employment and service to the community. At all points of the application process from approval to take the LMSW, to seeking approval for the initiation of clinical supervision to pursue the LCSW, to receiving approval for the completed hours, to receiving approval to take the LCSW exam, social workers have experienced significant delays in waiting for responses from the Board. This in essence places things on hold in the professional lives of social workers who may need their license for securing a new job upon graduation, or taking a promotion when they attain their upgraded clinical licensure.

One colleague provided clinical supervision to a social worker and they submitted the verification forms at the end of their two years of supervision as required. It took the Board six months to render a decision and approval for the social worker to proceed in taking the LCSW exam. This caused undue stress to the social worker as she had another position awaiting her in working with traumatized immigrant youth that she could not take and ultimately lost the opportunity of this clinical practice work because she was awaiting this process.

In these cases, the significant delay in hearing back from the Board often has hindered or prevented these social workers from undertaking their normal course of business or in accepting opportunities or promotions which basically is restraint of trade.

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Earlier I mentioned that I encountered significant issues with the Board while providing clinical supervision to a group of five school social workers. I believe our experience best highlights some of the serious concerns of delay with the Board. We began the LCSW supervision on August 1, 2017, and we submitted the five supervisee applications well within the thirty day requirement. In September, I checked with my five supervisees and no one had heard back from the Board as to whether the supervision plan had been approved. In late September, while I was actually teaching the clinical supervision course, I asked a faculty member to take the lead while I stepped out to call the Board to check on the status of our applications. The life of a school social worker does not allow for someone to take the luxury of time to be on a call for one to two hours and so I volunteered to call on our behalf. I spent 1 hour and a half waiting for someone to answer. When I finally got a live person on the call, they simply informed me that they were currently reviewing applications from June and that they would likely not review August submitted applications for another month to two months. I was appalled that they were so far behind in the processing of applications. Finally, my supervisees started hearing from the Board in the last week of November, 2017 at which time they were all turned down as their role was not considered “clinical”. This was shocking to me as I had previously supervised social workers from these same work settings and their plans were approved two years earlier. All five supervisees submitted addendums to their job description capturing those work activities that highlighted their clinical practice work with assessment, diagnosis, and short-term treatment with students in their school sites. These addendums were submitted in the first week of December, 2017. As of mid-April, we finally heard that three of the five received approval and we still await decisions on two. All in all, for the three who were approved, this process has taken almost nine months to secure an approval of their supervision which began August 1, 2017. This is absolutely appalling to think that a state licensing board would be so inefficient in processing professional licensing matters.

Recommendations

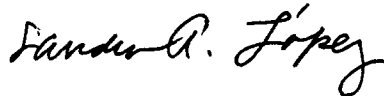
It is quite evident that the Texas State Board of Social Worker Examiners is not operating as well as it should as a licensing board. I attribute this largely to its positioning as part of the Health and Human Services Commission where it has no line item available to support staff who could adequately respond to the licensing needs of the over 25,000 licensed social workers around the state of Texas. Social Work practice in Texas deserves to be addressed in a more efficient manner as the public will ultimately benefit from the strengthening of our practice. I strongly support the recommendation to create a Behavioral Health Executive Council (BHEC) as proposed by the National Association of Social Workers - Texas Chapter, Texas Counseling Association, Texas Association for Marriage Family Therapy, and the Texas Society for Clinical Social Work. This proposed Behavioral Executive Council would be made up of those disciplines that represent the behavioral health community--licensed professional counselors, licensed marriage and family therapy, licensed social workers, and psychology. Most importantly, it is not enough to simply create this structure as the inner operations and decision-making around professional issues will be critical to the overall effectiveness of this Council. I believe this valuable work must be guided by representation of the social work profession as well

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as the other professional groups in reviewing best standards and practices for respective professions. Although we all are represented under the umbrella of behavioral health, there are clear and distinct differences in our defined role and our practices. It is thus important for these professional disciplines to have independent boards to support a stronger understanding of their individual professional practice issues. It is also imperative to have each discipline have representation of a member from their licensed profession that 1) can have membership on the Council, 2) play a role as active participant to the significant discussions, and 3) function as a voting member of the Council. This is the only way that we can effectively assure that the Behavioral Health Executive Council is reflective of the core issues that each profession represents and that we can protect the public and promote the highest standards for each of the behavioral health professions. Ultimately, by the forming of a BHEC, the public can be assured that the care and services they receive across Texas are provided by highly qualified, well trained, and properly licensed professionals.

I therefore urge the Sunset Commission to adopt the Behavioral Health Executive Council as proposed by the National Association of Social Workers – Texas Chapter, Texas Counseling Association, Texas Association for Marriage and Family Therapy and the Texas Society for Clinical Social Work. I sincerely appreciate the opportunity to provide testimony to the Sunset Commission and would welcome any further questions regarding the concerns I have addressed here.

Sincerely,



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