

DEPARTMENT OF SAFETY AND HOMELAND SECURITY
OFFICE OF THE SECRETARY
Statutory Authority: 11 Delaware Code, Section 4120A (11 Del.C. §4120A)

FINAL

ORDER

1100 Delaware Sex Offender Management Board

NATURE OF THE PROCEEDINGS

The Delaware Department of Safety and Homeland Security's Sex Offender Management Board (SOMB) initiated proceedings to provide notice to the public of its intent to establish qualifications for those individuals who will be providing sex-offense specific treatment to convicted sex offenders. The Department's proceedings to establish regulations were initiated pursuant to 29 **Delaware Code** Section 10114 and its authority as prescribed by Title 11 of the **Delaware Code**, Chapter 41, Section 20A.

The Department published its notice of proposed regulation changes pursuant to 29 **Delaware Code** Section 10115 in the March 2013 Delaware *Register of Regulations*, requiring written materials and suggestions from the public concerning the proposed regulations to be produced by March 31, 2013 at which time the Department would receive information, factual evidence and public comment to the said proposed changes to the regulations.

SUMMARY OF PROPOSAL

The proposal described below establishes qualifications for those individuals who will be providing sex-offense specific treatment to convicted sex offenders.

Statutory Authority

- 1 **Delaware Code**, Section 4120A (11 **Del.C.** §4120A)

Summary of Proposal

The proposal described below establishes qualifications for those individuals who will be providing sex-offense specific treatment to convicted sex offenders.

Background

Effective July 5, 2007 the Delaware General Assembly passed legislation that created a Sex Offender Management Board. The Board is tasked with developing standards and guidelines for the evaluation, identification, classification, treatment, and continued monitoring of sex offenders at each stage of the criminal justice system. The paramount purpose and goal of the Sex Offender Management Board is to maximize community safety and to ensure that sex offenders are not within the community without comprehensive treatment, constant supervision, and behavioral monitoring.

SUMMARY OF COMMENTS RECEIVED WITH AGENCY RESPONSE

DSHS/SOMB received no public comments regarding the proposed regulation.

FINDINGS OF FACT:

The Department finds that the proposed changes as set forth in the March 2013 *Register of Regulations* should be adopted.

THEREFORE, IT IS ORDERED, that the proposed regulation to establish qualifications for those individuals, who will be providing sex-offense specific treatment to convicted sex offenders, is adopted and shall be effective April 11, 2014.

Lewis D. Schiliro, Secretary, Department of Safety and Homeland Security, March 3, 2014

1100 Delaware Sex Offender Management Board

1.0 Intent and Purpose

The General Assembly hereby declares that the comprehensive evaluation, identification, classification, treatment, and continued monitoring of sex offenders who are subject to the supervision of the criminal justice system is necessary in order to work toward the reduction of recidivism by such offenders. Therefore, the General Assembly hereby creates a

Board which shall develop and standardize the evaluation, identification, classification, treatment, and continued monitoring of sex offenders at each stage of the criminal justice system so that such offenders will curtail recidivistic behavior and the protection of victims and potential victims will be enhanced. The General Assembly hereby recognizes that some sex offenders cannot or will not respond to treatment and that, in creating the Board described in this section, the General Assembly does not intend to imply that all sex offenders can be successful in treatment. Further, the General Assembly mandates that each member agency as outlined below must act in accordance with the standards established by the Board.

2.0 Definitions

“Accountability” means accurate attributions of responsibility, without distortion, minimization, or denial.

“Adult Standards” means the standards and guidelines established to evaluate, monitor, and treat adult convicted sex offenders. Section 1.0 establishes guidelines for pre-sentence investigations. Section 2.0 establishes standards for sex offense specific evaluations. Section 3.0 establishes standards of practice for treatment providers. Section 4.0 establishes the qualifications for both adult and juvenile treatment providers, evaluators, and polygraph examiners. Section 5.0 establishes standards and guidelines for management of sex offenders on probation, parole, and community corrections. Section 6.0 establishes standards of practice for post-conviction sex offender polygraph testing. Section 7.0 establishes guidelines for institutional treatment of sex offenders.

“Assessment” means the collection of facts to draw conclusions which may suggest the proper course of action. Sometimes assessment and evaluation may be used interchangeably but assessment is on-going and includes an analysis of all data including a sex offense specific evaluation.

“ATSA code of ethics” means the Association for Treatment of Sexual Abusers has published a code of ethics for those individuals involved in the evaluation and treatment of sexual offenders. Delaware Sex Offender Management Board approved providers must adhere to these ethics.

“Behavior Monitoring” means a variety of methods for checking, regulating, and supervising the behavior of sex offenders

“Case Management” means coordination and implementation of the activities directed towards supervising, treating, and managing the behavior of individual sex offenders

“Clinical Experience” means activities directly related to providing evaluation and/or treatment to individual sex offenders. For example; face to face therapy, report writing, administration, scoring and interpretation of tests, participation on supervision teams, and clinical supervision of therapists treating sex offenders.

“Community Supervision Team” means those individuals involved in the case management of a particular sex offender. The supervision team determines the best course of action to reduce risk while the sex offender is supervised in the community

“Criminal Justice Sanction” means activities or action used to reduce the liberties of sex offenders under community supervision and the sentence of the Court or Board of Parole. Sanctions range from imposition of a curfew to incarceration for violation of probation/parole.

“Denial” means in psychological terms, denial means a defense mechanism used to protect the ego from anxiety-producing information.

“Developmental Disabilities” means chronic disabilities attributable to mental or physical impairments apparent before the age of 22. These disabilities tend to be life-long and result in substantial functional limitations in major life activities such as self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living and economic self-sufficiency.

“Evaluation” means the systematic collection, analysis, and documentation of psychological, behavioral and social information. Sex-offense specific evaluation includes the above information as well as information related to sexual history, arousal patterns, sexual deviance, dysfunction, sexual attitudes and cognition, risk of sexual re-offense, and risk of failure in sex offense specific treatment and supervision.

“Evidence-based practices” means approaches and interventions that have been scientifically tested in controlled studies and proven effective.

“Guardian” means an individual who has legal authority to make decisions on behalf of another.

“Informed Assent” means acquiesce or comply with specific terms or agreement. The use of "assent" in this document recognizes sex offenders are not voluntary clients and their choices are therefore limited.

“Informed Consent” means voluntary agreement or approval to do something in compliance with a request.

“Plethysmograph” means an electronic device used to measure variations in penile tumescence associated with sexual arousal. The tool is used in sex offender treatment to assist in determining deviant sexual arousal. There is a device that measures physiological changes for women as well.

“Polygraph Exam” means an instrument that simultaneously records changes in physiological processes such as heartbeat, blood pressure, and respiration, often used to detect deception. There are three types of post-conviction polygraph tests commonly administered to sex offenders: Specific Issue Examination, Disclosure or Sexual History Examination, and Maintenance Examination.

“Provider List” means a list published by the SOMB of individual treatment providers, evaluators, and polygraph examiners who meet the criteria set forth by the Standards.

“Risk assessment” means the process by which an evaluator, treatment provider, supervision officer, or pre-sentence officer determines risk for sexual re-offense. Appropriate risk assessment includes a review of all pertinent data, behavioral observations, physiological testing, and use of formal risk assessment tools.

“Sex Offender” as used in 11 Del.C. §4120A(b)(2) and §4121(a)(4) means any person who has ever been convicted of an offense as defined in 11 Del.C. §761 and §4121(a)(4), or of any attempt or conspiracy to commit any of the aforementioned offenses. Convictions shall include adjudications of delinquency and persons who enter a plea of guilty, or are found guilty but mentally ill, or not guilty by reason of insanity.

“Sex offense-specific Treatment” means a long term comprehensive set of planned therapeutic experiences and interventions to change sexually abusive thoughts and behaviors. Such treatment specifically addresses the occurrence and dynamics of sexually deviant behavior and utilizes specific strategies to promote change. Sex offense-specific programming focuses on the concrete details of the actual sexual behavior, fantasies, arousal, planning, denial, and rationalizations. The primary treatment modality for sex offense specific treatment is group therapy. Other treatment modalities may be used in conjunction with group therapy.

“Sexual Paraphilias/Sexual Deviance” means a subclass of sexual disorders in which the essential features are "recurrent intense sexually arousing fantasies, sexual urges, or behaviors generally involving (1) nonhuman objects, (2) suffering and humiliation of oneself or one's partner, or (3) children or other non-consenting persons that occur over a period of at least six months and cause clinically significant distress in one or more important areas of functioning.

“SOMB” means the Delaware Sex Offender Management Board

“Supervision Officer” means the Probation or Parole officer assigned to monitor the sex offender while they are serving a sentence in the community.

“Supervision Plan” means a plan developed by the supervision officer in conjunction with the treatment team which outlines specific measurable goals related to success in supervision and reduction in recidivism.

“Treatment Provider” means a person who provides sex offense-specific treatment to sex offenders according to the Standards and Guidelines of this document.

3.0 Qualifications of Treatment Providers and Evaluators

3.1 There are distinct clinical functions within the levels of Full Operating and Associate Level Providers. The following sections outline qualifications for Treatment Providers, and Evaluators.

3.2 Treatment Provider- Full Operating Level. A Full Operating Level Treatment provider may treat sex offenders without supervision and may supervise Associate Level Treatment Providers. To qualify to provide sex offender treatment at the Full Operating Level an individual must meet all the following criteria:

3.2.1 The individual shall have a Masters Degree in a behavioral science related field and shall have completed within the past five (5) years a minimum of two thousand (2000) hours of clinical experience specifically in the areas of evaluation and treatment of sex offenders, at least half of which shall have been face-to-face therapy with adult convicted sex offenders or adjudicated juvenile offenders depending on the population you service (see definition of clinical experience); or

3.2.2 The individual shall have attained the underlying credential of licensure or certification and be in good standing as a physician, psychologist, clinical social worker, professional counselor, marriage and family therapist, or clinical psychiatric nurse specialist; and

3.2.3 The individual shall have completed within the past five (5) years a minimum of one thousand (1000) hours of clinical experience specifically in the areas of evaluation and treatment of sex offenders, at least half of which shall have been face-to-face therapy with adult convicted sex offenders, or adjudicated juvenile offenders depending on the population you service (see definition of clinical experience). Such clinical experience may have been obtained while seeking licensure or after obtaining licensure, but if it was obtained in part or in full after licensure, it is subject to the same requirements for supervision as required for Treatment Providers under these Standards.

3.2.4 The individual shall have had at least eighty (80) hours of documented training specifically related to evaluation and treatment methods described in Sections 2.10, 3.4, and 3.5 of the Adult Standards within the last five years. The individual must demonstrate a balanced training, with fifty (50) of the hours coming from the subject areas listed as sex offense specific training and thirty (30) hours coming from the general

topic areas as described below. Twelve (12) of the required fifty (50) hours shall be specific to developmental disabilities, Fifteen (15) hours of required thirty (30) general topic training hours must be in the area of victimology. Training shall be specific to the population you serve.

3.2.4.1 Sex offense specific training (at least 50 hours required from these areas):

3.2.4.1.1 Prevalence of sexual offending by adults/juveniles victimization rates

3.2.4.1.2 Typologies of adult sex offenders

3.2.4.1.3 Sex offender evaluation and assessment

3.2.4.1.4 Sex offender treatment planning and assessing treatment outcomes

3.2.4.1.5 Community Supervision techniques

3.2.4.1.6 Clinical supervision training

3.2.4.1.7 Treatment modalities, specific recommended applications, justification for use, contra-indicators

3.2.4.1.8 Sex Offender Treatment Techniques including:

3.2.4.1.8.1 Evaluating and reducing denial

3.2.4.1.8.2 Behavioral treatment techniques

3.2.4.1.8.3 Cognitive behavioral techniques

3.2.4.1.8.4 Relapse prevention

3.2.4.1.8.5 Offense cycle

3.2.4.1.8.6 Empathy training

3.2.4.1.8.7 Confrontation techniques

3.2.4.1.8.8 Safety and containment planning

3.2.4.1.9 Offender/offense characteristics Crossover

3.2.4.1.10 Sex offender risk assessment adult and/or juvenile

3.2.4.1.11 Objective measures including:

3.2.4.1.11.1 Polygraph (adult only)

3.2.4.1.11.2 Plethysmograph (adult only)

3.2.4.1.11.3 Abel Assessment (adult only)

3.2.4.1.12 Special sex offender populations including:

3.2.4.1.12.1 Sadists (adult only)

3.2.4.1.12.2 Psychopaths (adult only)

3.2.4.1.12.3 Developmentally disabled

3.2.4.1.12.4 Compulsive

3.2.4.1.12.5 Juvenile

3.2.4.1.12.6 Female

3.2.4.1.13 Family Unification/visitation

3.2.4.1.14 4Pharmacotherapy with sex offenders

3.2.4.1.15 Impact of sex offenses

3.2.4.1.16 Assessing treatment progress

3.2.4.1.17 Support system, family stability, parenting skills

3.2.4.1.18 Sex offender attachment style

3.2.4.1.19 Knowledge of laws, policies and ethical concerns relating to confidentiality, mandatory reporting, risk management and offender participation in treatment.

3.2.4.1.20 Ethics

3.2.4.1.21 Philosophy and principles of the Sex Offender Management Board

3.2.4.1.22 Continuing research in the field of adult and/or juvenile sexual offending

3.2.4.2 General topic training areas (at least a total of 30 hours required from these areas, to include 15 hours of victimology):

3.2.4.2.1 Victim issues including impact and treatment

3.2.4.2.2 Knowledge of criminal justice and/or court system, legal parameters and the relationship between the provider and the courts, including expectations related to testifying in court

3.2.4.2.3 Secondary and Vicarious Trauma

3.2.4.2.4 Anger management

3.2.4.2.5 Healthy sexuality and sex education

- 3.2.4.2.6 Learning Theory
- 3.2.4.2.7 Multicultural sensitivity
- 3.2.4.2.8 Understanding transference and counter-transference
- 3.2.4.2.9 Family dynamics and dysfunction including domestic violence
- 3.2.4.2.10 Co-morbid conditions, differential diagnosis
- 3.2.4.2.11 Investigations
- 3.2.4.2.12 Addictions and substance abuse
- 3.2.5 To receive credit for training not identified on this list, it is incumbent on the trainee to write a justification demonstrating relevance to sex offender assessment/ treatment/ management as described in these Standards.
- 3.2.6 In concert with the generally accepted standards of practice of the individual's mental health profession, the individual shall adhere to the Professional Code of Ethics published by the Association for the Treatment of Sexual Abusers (ATSA). It is the responsibility of each provider/evaluator to comply with this Professional Code of Ethics. The provider/evaluator shall demonstrate competency according to the individual's respective professional standards and conduct all treatment in a manner that is consistent with the reasonably accepted standard of practice in the sex offense specific treatment community.
- 3.2.7 Provide satisfactory references as requested by the Sex Offender Management Board. The Sex Offender Management Board may also solicit such additional references as necessary to determine compliance with the Standards. The references shall include other members of the community supervision team.
- 3.2.8 The individual shall never have been convicted of, or plead no contest to, or received a deferred judgment for any offense involving criminal sexual or violent behavior, or a felony that would bring into question the competence or integrity of the individual to provide sex offense specific treatment.
- 3.2.9 At their own expense, the individual will complete an entire criminal history check including Federal information pursuant to the Federal Bureau of Investigation appropriation of Title 11 of Public Law 92-544 (28 U.S.C. 534). The individual will submit to fingerprinting as part of this process.
- 3.2.10 Report any practice that is in significant conflict with the standards.
- 3.2.11 Providers who are approved at the Full Operating Level and wish to supervise Associate Level Treatment Providers or individuals who have not applied, but are earning their clinical hours, shall submit to the Board supervision agreements with all individuals that they supervise within 30 days from the time the supervision began.
- 3.2.12 The supervision agreement should specify the frequency and length of supervision, type of supervision, and shall specify accumulated supervision hours. At least one hour of supervision specific to sex offender treatment/evaluation will be provided for every 30 hours of clinical contact with sex offenders.
- 3.2.13 Full Operating Level Treatment Providers who are supervising individuals who have not made application to the SOMB for listing shall conduct co-therapy group treatment, in the same room with that individual, or shall ensure that a Full Operating Level Treatment Provider is conducting co-therapy groups, in the same room, as well as review and sign off on all treatment plans and reports.
- 3.2.14 Continued Placement on the Provider List. Treatment providers must apply for continued placement on the list every two (2) years by the date provided by the Board. Requirements are as follows:
 - 3.2.14.1 The Full Operating Level Treatment Provider must demonstrate continued compliance with the standards.
 - 3.2.14.2 The individual shall accumulate a minimum of six hundred (600) hours of clinical experience every two years, three hundred (300) hours of which shall be face-to-face therapy with adult convicted sex offenders or adjudicated juvenile offenders depending on the population you service.
 - 3.2.14.3 If the provider has ten (10) or more years of clinical experience, they may be eligible for an exception to the 300 hours of face-to-face clinical experience, as long as they meet the 600 hours requirement, as determined by the Application Review Committee.
 - 3.2.14.4 Treatment Providers shall complete a minimum of forty (45) hours of continuing education every three years in order to maintain proficiency in the field of sex offender treatment and to remain current on any developments in the assessment, treatment, and monitoring of sex offenders. Thirty-five (35) hours shall come from the subject areas listed as sex offense specific training, six (6) of the thirty-five (35) hours shall be specific to developmental disabilities, ten (10) hours coming from the general topic areas, as described in Section 4.1 of the Adult Standards. Four (4) of the 10 hours of training in the general topic areas shall be in the area of victimology. Training shall be specific to the population you serve.

- 3.2.14.4.1 To receive credit for training not identified on this list, it is incumbent on the trainee to write a justification demonstrating relevance to sex offender assessment/treatment/management as described in these standards.
 - 3.2.14.5 Provide satisfactory references as requested by the Sex Offender Management Board. The Sex Offender Management Board may also solicit such additional references as necessary to determine compliance with the Standards. The references shall include other members of the community supervision team.
 - 3.2.14.6 The individual shall never have been convicted of, plead no contest to, or received a deferred judgment for any offense involving criminal sexual or violent behavior, or a felony that would bring into question the competence or integrity of he individual to provide sex offense specific treatment.
 - 3.2.14.7 At their own expense, the individual will complete an entire criminal history check including Federal information pursuant to the Federal Bureau of Investigation appropriation of Title 11 of Public Law 92-544 (28 U.S.C. 534). The individual will submit to fingerprinting as part of this process.
 - 3.2.14.8 Report any practice that is in significant conflict with the Standards.
- 3.3 Treatment Provider- Associate Level. An Associate Level Treatment Provider may treat sex offenders under the supervision of a Full Operating Level Treatment Provider under these standards. To qualify to provide sex offender treatment at the Associate Level an individual must meet all the following criteria:
 - 3.3.1 The individual shall have a baccalaureate degree or above in a behavioral science.
 - 3.3.2 The individual shall have completed within the past five (5) years a minimum of six hundred (600) hours of supervised clinical experience. Five hundred (500) hundred hours of supervised clinical experience specifically in the area of treatment of sex offenders. At least half (250) of these hours must be in face-to-face therapy with convicted or adjudicated sex offenders depending on the population you serve. In addition at least one hundred sixty (160) of these face-to-face hours must have been in co-therapy, in the same room, with a Full Operating Level Treatment Provider.
 - 3.3.3 The individual must have received at least one hundred (100) hours of face-to-face clinical supervision by a Full Operating Level Treatment Provider. The supervision must be reasonably distributed over the time in which the above clinical experience was being obtained (approximately one (1) hour of supervision for each 10 hours of clinical experience).
 - 3.3.4 Treatment providers shall complete a minimum of fifty (50) hours of continuing education every five (5) years to maintain proficiency in the field of sex offender treatment and to remain current on any developments in the assessment, treatment, and monitoring of sexual offenders. Forty (40) hours shall come from the subject areas listed as sex offense specific training, twelve (12) of the forty hours shall be specific to developmental disabilities, ten (10) hours coming from the general topic areas, as described in section 4.1. Four (4) of the ten (10) hours of training in the general topic areas shall be in the area of victimology. Training shall be specific to the population you serve.
 - 3.3.5 To receive credit for training not identified on this list, it is incumbent on the trainee to write a justification demonstrating relevance to sex offender assessment/treatment/management as described in these standards.
 - 3.3.6 In concert with the generally accepted standards of practice of the individual's mental health profession, the individual shall adhere to the Professional Code of Ethics published by the Association of Treatment of Sexual Abusers (ATSA). It is the responsibility of each provider/evaluator to comply with this Professional Code of Ethics. The provider/evaluator shall demonstrate competency according to the individual's respective professional standards and conduct all treatment in a manner that is consistent with the reasonably accepted standard of practice in the sex offense specific treatment community.
 - 3.3.7 Provide satisfactory references as requested by the Sex Offender Management Board. The Sex Offender Management Board may also solicit such additional references as necessary to determine compliance with the Standards. The references shall include other members of the community supervision team.
 - 3.3.8 The individual shall never have been convicted, plead no contest, or received a deferred judgment for an offense involving criminal sexual or violent behavior, or a felony that would bring into question the competence or integrity of the individual to provide sex offense specific treatment.
 - 3.3.9 At their own expense, the individual will complete an entire criminal history check including Federal information pursuant to the Federal Bureau of Investigation appropriation of Title 11 of Public Law 92-544 (28 U.S.C. 534). The individual will submit to fingerprinting as part of this process.
 - 3.3.10 Individuals who are approved as Full Operating Level Juvenile Treatment Providers may be approved at the Associate Operating Level to treat adults under these standards if they meet the following requirements:

- 3.3.10.1 The individual must be supervised by an adult Full Operating Level Treatment Provider under these standards.
- 3.3.10.2 Must have one hundred (100) hours of clinical face-to-face contact with convicted adult sex offender.
- 3.3.10.3 Must meet standards in section 4.1 training requirements.
- 3.3.10.4 Must meet the requirements identified in Standard 4.11 for continued placement on the list.
- 3.3.11 Movement to Full Operating Level. Associate Level Treatment Providers wanting to move to Full Operating Level status must complete and submit documentation of all of the requirements listed in Section 4.0-4.7 of the Adult Standards as well as a letter from the applicant's supervisor indicating the applicant's readiness to move to Full Operating Level status.
- 3.3.12 Continue Placement. Associate Level Treatment Providers must apply for continued placement on the list every two (2) years by the date provided by the Board. Requirements are as follows:
 - 3.3.12.1 The Associate Level Treatment Provider must demonstrate continued compliance with Standards.
 - 3.3.12.2 The individual shall accumulate a minimum of four hundred (400) hours of clinical experience every two years, 200 hours of which shall be face-to-face clinical experience with convicted/ adjudicated sex offenders.
 - 3.3.12.3 The individual shall obtain a minimum of one hour of face-to-face supervision, from an individual listed at the Full Operating Level under these standards. For every thirty (30) hours of clinical contact with sex offenders. This standard pertains both to those seeking licensure who have not yet met the licensing requirement of the state and to those who intend to provide treatment at the Associate Level for an indefinite period of time.
 - 3.3.12.4 Associate Level Treatment Providers shall complete a minimum of forty-five (45) hours of continuing education every two years in order to maintain proficiency in the field of sex offender treatment and to remain current on any developments in the assessment, treatment, and monitoring of sex offenders. Thirty-five (35) hours shall come from the subject areas listed as sex offense specific training, six (6) of the thirty-five (35) hours shall be specific to developmental disabilities, ten (10) hours coming from the general topic areas, as described in Section 4.1 of the Adult Standards, four (4) of the ten (10) hours of training in the general topic areas shall be in the area of victimology. Training shall be specific to the population you serve.
 - 3.3.12.5 To receive credit for training not identified on this list, it is incumbent of the trainee to write a justification demonstrating relevance to sex offender assessment/treatment/management as described in these standards.
 - 3.3.12.6 Provide satisfactory references as requested by the Sex Offender Management Board. The Sex Offender Management Board may also solicit such additional references as necessary to determine compliance with the standards. The references shall include other members of the community supervision team.
 - 3.3.12.7 The individuals shall never be convicted of, plead no contest to, or received a deferred judgment for any offense involving criminal sexual or violent behavior, or a felony that would bring into question the competence or integrity of the individual to provide sex offense specific treatment.
 - 3.3.12.8 At their own expense, the individual will complete an entire criminal history check including Federal information pursuant to the Federal Bureau of Investigation appropriation of Title 11 of Public Law 92-544 (28 U.S.C. 534). The individual will submit to fingerprinting as part of this process.
 - 3.3.12.9 Report any practice that is in significant conflict with the standards.
- 3.4 Evaluator- Full Operating Level. An evaluator at the Full Operating Level may evaluate sex offenders without supervision and may supervise an evaluator operating at the Associate Level. To qualify to provide sex offender evaluations at the Full Operating Level an individual must meet all the following criteria.
 - 3.4.1 The individual must be listed as a Full Operating Treatment Provider and complete all requirements as listed in Sections 4.0-4.11 of the Adult Standards.
 - 3.4.2 An evaluator shall have completed a minimum of forty (40) sex-offense specific evaluations as defined in section 2.000 of these standards within the last five years.
 - 3.4.3 The individual shall have had at least eighty (80) hours of documented training specifically related to evaluation and treatment methods described in sections 2.000 and 3.000, and including training in the area of victimology, within the last five years. The individual must demonstrate a balanced training, with twenty (20) of the hours coming from the subject areas listed as sex offense specific training and forty (40) hours specifically regarding the evaluation of adult or juvenile sex offenders and twenty (20) hours coming

- from the general topic areas as described in Section 4.1 of the Adult Standards. Training shall be specific to the population you serve.
- 3.4.4 To receive credit for training not identified on this list, it is incumbent on the trainee to write a justification demonstrating relevance to sex offender assessment/ treatment/ management as described in these Standards.
 - 3.4.5 In concert with the generally accepted standards of practice of the individual's mental health profession, the individual shall adhere to the Professional Code of Ethics published by the Association for the Treatment of Sexual Abusers (ATSA). It is the responsibility of each provider/evaluator to comply with this Professional Code of Ethics. The provider/evaluator shall demonstrate competency according to the individual's respective professional standards and conduct all treatment in a manner that is consistent with the reasonably accepted standard of practice in the sex offense specific treatment community.
 - 3.4.6 Provide satisfactory references as requested by the Sex Offender Management Board. The Sex Offender Management Board may also solicit such additional references as necessary to determine compliance with the Standards. The references shall include other members of the community supervision team.
 - 3.4.7 The individual shall never have been convicted of, or plead no contest to, or received a deferred judgment for any offense involving criminal sexual or violent behavior, or a felony that would bring into question the competence or integrity of the individual to provide sex offense specific treatment.
 - 3.4.8 At their own expense, the individual will complete an entire criminal history check including Federal information pursuant to the Federal Bureau of Investigation appropriation of Title 11 of Public Law 92-544 (28 U.S.C. 534). The individual will submit to fingerprinting as part of this process.
 - 3.4.9 Report any practice that is in significant conflict with the standards.
 - 3.4.10 Evaluators shall comply with section 2.000 Standards for sex-offense specific evaluations.
 - 3.4.11 Providers who are approved at the Full Operating Level and wish to supervise Associate Level Evaluators or individuals who have not applied, but are earning their clinical hours, shall submit supervision agreements with all individuals that they are supervising within 30 days from the time supervision began.
 - 3.4.12 The supervision agreement should specify the frequency and length of supervision, type of supervision, and shall specify accumulated supervision hours and that at least one hour (1) of supervision specific to sex offender treatment/evaluation will be provided for every thirty (30) hours of clinical contact with sex offenders.
 - 3.4.13 Full Operating Level Evaluators who are supervising individuals who have not made application to the SOMB for listing shall review and sign off on all evaluations.
 - 3.4.14 Continued Placement on the Provider List. Evaluators must apply for continued placement on the list every 2 years by the date provided by the Board. Requirements are as follows:
 - 3.4.14.1 The evaluator must demonstrate continued compliance with the Standards.
 - 3.4.14.2 The individual may maintain as a Full Operating Level Treatment Provider and Evaluator. In this case, the individual shall accumulate a minimum of 400 hours of clinical experience every two years, 200 hours of which shall be face-to-face consultation or therapy with sex offenders. This evaluator shall complete a minimum of ten (10) sex-offense specific evaluations in a two year period.
 - 3.4.14.3 The individual shall have had at least forty (45) hours of documented training specifically related to evaluation and treatment methods described in sections 2.000 and 3.000, and including training in the area of victimology, within the last five years. The individual must demonstrate a balanced training, with fifteen (15) of the hours coming from the subject areas listed as sex offense specific training six (6) of the fifteen (15) shall be specific to developmental disabilities, twenty (20) hours specifically regarding the evaluation of adult or juvenile sex offenders, and ten (10) hours coming from the general topic areas as described in Section 4.1 of the Adult Standards. Training shall be specific to the population you serve.
 - 3.4.14.3.1 To receive credit for training not identified on this list, it is incumbent of the trainee to write a justification demonstrating relevance to sex offender assessment/treatment/management as described in these standards.
 - 3.4.15 Provide satisfactory references as requested by the Sex Offender Management Board. The Sex Offender Management Board may also solicit such additional references as necessary to determine compliance with the standards. The references shall include other members of the community supervision team.
 - 3.4.16 The individuals shall never be convicted of, plead no contest to, or received a deferred judgment for any offense involving criminal sexual or violent behavior, or a felony that would bring into question the competence or integrity of the individual to provide sex offense specific treatment.

- 3.4.17 At their own expense, the individual will complete an entire criminal history check including Federal information pursuant to the Federal Bureau of Investigation appropriation of Title 11 of Public Law 92-544 (28 U.S.C. 534). The individual will submit to fingerprinting as part of this process.
- 3.4.18 Report any practice that is in significant conflict with the standards.
- 3.5 Evaluator Associate Level. An evaluator at the Associate Level may evaluate sex offenders under the supervision of an evaluator approved at the Full Operating Level. An evaluator at the Associate Level is an individual who has completed fewer than 40 sex-offense specific evaluations in the last five years. To qualify to provide sex offender evaluation at the Associate Level an individual must meet all the following criteria:
 - 3.5.1 The applicant must be listed as an Associate Level or Full Operating Level Treatment Provider.
 - 3.5.2 The individual must have received at least fifty (50) hours of face-to-face clinical supervision by a Full Operating Level Treatment Provider. The supervision must be reasonably distributed over the time in which the above clinical experience was being obtained (approximately one (1) hour of supervision for every 10 hours of clinical experience).
 - 3.5.3 The individual shall have had at least forty (40) hours of documented training specifically related to evaluation and treatment methods described in sections 2.000 and 3.000, and including training in the area of victimology, within the last five years. The individual must demonstrate a balanced training, with ten (10) of the hours coming from the subject areas listed as a sex offense specific training and twenty (20) hours specifically regarding the evaluation of adult or juvenile sex offenders and ten (10) hours coming from the general topic areas as described in Section 4.1 of the Adult Standards. Training shall be specific to the population you serve.
 - 3.5.3.1 To receive credit for training not identified on this list, it is incumbent of the trainee to write a justification demonstrating relevance to sex offender assessment/treatment/management as described in these standards.
 - 3.5.4 Provide satisfactory references as requested by the Sex Offender Management Board. The Sex Offender Management Board may also solicit such additional references as necessary to determine compliance with the standards. The references shall include other members of the community supervision team.
 - 3.5.5 The individuals shall never be convicted of, plead no contest to, or received a deferred judgment for any offense involving criminal sexual or violent behavior, or a felony that would bring into question the competence or integrity of the individual to provide sex offense specific treatment.
 - 3.5.6 At their own expense, the individual will complete an entire criminal history check including Federal information pursuant to the Federal Bureau of Investigation appropriation of Title 11 of Public Law 92-544 (28 U.S.C. 534). The individual will submit to fingerprinting as part of this process.
 - 3.5.7 Report any practice that is in significant conflict with the standards.
 - 3.5.8 Movement to Full Operating Level Evaluator. Associate Level Treatment Providers wanting to move to Full Operating Level status must complete and submit documentation of all of the requirements listed in section 4.25, as well as a letter from the applicant's supervisor indicating the applicant's readiness to move to Full Operating Level Status.
 - 3.5.9 Continued Placement. Associate Level evaluators must apply for continued placement on the list every two years by the date provided by the board. Requirements are as follows:
 - 3.5.9.1 The evaluator must demonstrate continued compliance with the standards.
 - 3.5.9.2 The evaluator at the Associate Level shall maintain listing as an Associate Level or Full Operating Level Treatment Provider and shall complete a minimum of ten (10) sex-offense specific evaluations in the two year period.
 - 3.5.9.3 The individual shall have had at least forty (40) hours of documented training specifically related to evaluation and treatment methods described in sections 2.000 and 3.000, and including training in the area of victimology, within the last five years. The individual must demonstrate a balanced training, with ten (10) of the hours coming from the subject areas listed as sex offense specific training, six (6) of the ten (10) hours shall be specific to developmental disabilities, twenty (20) hours specifically regarding the evaluation of adult or juvenile sex offenders, and ten (10) hours coming from the general topic areas as described in Section 4.1 of the Adult Standards. Training shall be specific to the population you serve.
 - 3.5.9.3.1 To receive credit for training not identified on this list, it is incumbent of the trainee to write a justification demonstrating relevance to sex offender assessment/treatment/management as described in these standards.
 - 3.5.9.4 Provide satisfactory references as requested by the Sex Offender Management Board. The Sex Offender Management Board may also solicit such additional references as necessary to

determine compliance with the standards. The references shall include other members of the community supervision team.

3.5.9.5 The individuals shall never be convicted of, plead no contest to, or received a deferred judgment for any offense involving criminal sexual or violent behavior, or a felony that would bring into question the competence or integrity of the individual to provide sex offense specific treatment.

3.5.9.6 At their own expense, the individual will complete an entire criminal history check including Federal information pursuant to the Federal Bureau of Investigation appropriation of Title 11 of Public Law 92-544 (28 U.S.C. 534). The individual will submit to fingerprinting as part of this process.

3.5.9.7 Report any practice that is in significant conflict with the standards.

3.6 Grandfathering

3.6.1 Individuals who currently work with sex offenders in a counseling capacity but whom do not meet the criteria set forth in these standards on the date that they are adopted have two (2) years from the date of adoption to gain the knowledge, experience and/or degree necessary to provide services to sex offenders either as a full operating level provider or an associate level provider.

3.6.2 To be considered for Grandfathering, the individual must complete an application with the SOMB providing information on work experience, education hours, current position and required letters of recommendation.

3.6.3 To be eligible for the grandfathering process, the candidate must have the following credentials and experience:

3.6.3.1 A minimum of a Bachelor's degree in a behavioral science field of study (e.g. psychology, counseling, psychiatric nursing etc.)

3.6.3.2 Documentation of at least two (2) years of individual or group counseling experience with a minimum of 500 hours within the past three years specific to working with sex offenders.

3.6.3.3 Documentation of clinical supervision from a clinician in the behavioral health field. Supervision from a Fully Operating Treatment Provider should begin at the time application is made for Grandfathering and continue until the candidate receives their approval to provide treatment to sex offenders.

3.6.3.4 Three (3) references are required; two of which must be familiar with your professional qualifications and at least two (2) of the individuals must be members of a Community Supervision Team and/or Multidisciplinary Teams in which you participate. If you are applying as an adult and juvenile provider, please provide references that can speak about your ability to work with both populations.