

DEPARTMENT OF STATE
DIVISION OF PROFESSIONAL REGULATION
Statutory Authority: 24 Delaware Code, Section 3006(1) (24 **Del.C.** §3006(1))
24 **DE. Admin. Code** 3000

FINAL

ORDER

3000 Board of Professional Counselors of Mental Health and Chemical Dependency Professionals

Pursuant to 29 **Del.C.** §10118 and 24 **Del.C.** §3006 (A)(1), the Delaware Board of Professional Counselors of Mental Health and Chemical Dependency issues this Order adopting proposed amendments to the Board's Rules. Following notice and a public hearing on April 25, 2012, the Board makes the following findings and conclusions:

Summary of the Evidence

1. The Board posted public notice of the proposed amendments in the March 1, 2012 *Register of Regulations* and in the *Delaware News Journal* and *Delaware State News*. The Board proposed to rework its regulations to better clarify the license requirements of Professional Counselors of Mental Health and Associate Counselors of Mental Health.
2. The Board received no written comments during the month of March 2012. The Board held a public hearing on April 25, 2012 and received no public comments.
3. The Board proposed to add language to clarify the experience needed for licensure as a Professional Counselor of Mental Health and Associate Counselors of Mental Health.

Findings of Fact and Conclusions of Law

4. The public was given notice and an opportunity to provide the Board with comments in writing and by testimony at the public hearing on the proposed amendments to the Board's Rules. No public comment was received and therefore no further revision of the rules need be considered.

5. There being no public comment to consider, the Board hereby adopts the regulation changes as originally published on March 1, 2012.

The effective date of this Order will be ten (10) days from the publication of this Order in the *Register of Regulations* on July 1, 2012.

IT IS SO ORDERED this 23rd day of May, 2012, by the Board of Mental Health and Chemical Dependency Professionals of the State of Delaware.

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|----------------------------------|---------------------------------|
| Lisa Ritchie, President | Tracey Frazier, LCDP |
| Daniel Cherneski, Vice President | Tracy Hansen, LMFT |
| Ruth Banta, Public Member | Julius Mullen, Ph.D., LPCMH |
| Daniel Cooper, LPCMH | William Northery, Ph.D., LMFT |
| Robert Doyle III, Public Member | Elizabeth Vassas, Public Member |
| Greg Drevno, LPCMH | |

3000 Board of Professional Counselors of Mental Health and Chemical Dependency Professionals

1.0 General

- 1.1 Elections – The Board shall elect officers annually at the regular January meeting. The office of President must rotate among the professions regulated and the public members.
- 1.2 Governing Statute – Chapter 30 of Title 24 of the **Delaware Code** governs the Board and the professions under its purview. Licensees should look to the statute first for requirements, then to these regulations for clarification or elaboration. There are critical requirements in the statute that do not appear in these regulations.
- 1.3 Licensee Contact Information – It shall be the responsibility of all licensees to keep the Division of Professional Regulation (Division) informed of any change of address. Renewal notices will be sent to the last address on file with the Division.

2.0 Licensure for Professional Counselors of Mental Health (LPCMH)

2.1 Licensure by Certification Requirements

- 2.1.1 Certification - The applicant for licensure by certification shall be certified by the National Board for Certified Counselors, Inc. (NBCC) as a National Certified Counselor (NCC), by the Academy of Clinical Mental Health Counselors (ACMHC) as a Certified Clinical Mental Health Counselor (CCMHC), or by another certifying organization acceptable to the Board. This certification shall be verified by the "NBCC Certification Form," the "ACMHC Certification Form" or the "Certifying Organization Certification Form," submitted directly to the Board by the certifying organization.
- 2.1.1.1 Certifying organizations acceptable to the Board shall include NBCC, ACMHC, or other certifying organizations that meet all of the following criteria:
- 2.1.1.1.1 The organization shall be a national professional mental health organization recognized as setting national standards of competence in Clinical Mental health Counseling.
- 2.1.1.1.2 The organization shall require the applicant to take a standardized examination designed to test his/her understanding of the principles involved in the mental health specialty for which he/she is being certified. Certification shall be based upon the applicant's attaining the minimum passing score set by the organization.
- 2.1.1.1.3 The organization shall prescribe a code of ethics substantially equivalent to that of the NBCC.
- 2.1.1.1.4 The organization shall require the minimum of a master's degree in Clinical Mental Health Counseling.
- 2.1.1.2 Individuals licensed prior to the effective date of this requirement must maintain certification or membership in the certifying organization, acceptable to the board at the time of their initial licensure in order to qualify for renewal of their license notwithstanding that such certifying organization is no longer deemed acceptable to the board.
- 2.1.2 Graduate Transcript - The applicant's master's degree in Clinical Mental Health counseling required by his/her certifying organization for certification, shall be documented by an official transcript submitted directly to the Board by the accredited educational institution granting the degree. In cases where an applicant's master's degree required remediation by the certifying organization the completion date of remediation courses shall be considered the conferment date of the degree of record for all matters before the Board.
- 2.1.3 Professional Counseling Experience - ~~Professional Counseling experience shall be defined as the accumulation of hours spent providing mental health counseling services in a professional mental health clinical counseling setting, including face-to-face interaction with clients and other matters directly related to the treatment of clients.~~ means the accumulation of hours spent providing face to face professional mental health clinical counseling services with clients and other matters directly related to the treatment of clients, in an setting that is clearly designated to provide professional mental health clinical counseling services and is subject to the Health Insurance Portability and Accountability Act of 1996 (HIPPA). Educational or guidance counseling is not considered clinical mental health counseling. However, professional counseling experience done under the auspicious of a mental health organization providing contracting services to a school or school system may be acceptable to the Board.
- 2.1.3.1 ~~Designated Objective Agent — For purposes of professional counseling experience obtained through self-employment, a designated objective agent shall be a professional colleague, supervisor or other individual with personal knowledge of the extent of the professional practice of the applicant, who certifies or attests to such professional practice. Under no circumstances shall a spouse, former spouse, parent, step-parent, grand-parent, child, step-child, sibling, aunt, uncle, cousin or in-law of the applicant be acceptable as a designated objective agent.~~
- 2.1.3.2 30 graduate semester hours or more attained beyond the master's degree, may be substituted for up to 1,600 hours of the required clinical experience, provided that hours are clearly related to the field of counseling and are acceptable to the Board. Graduate credit hours shall be verified by an official transcript submitted directly to the Board by the accredited educational institution at which the course work was done.
- 2.1.3.32 Supervised clinical experience or post-master's degree alternative shall be verified by the "Professional Experience Reference Form" or the "Verification of Self Employment" form.
- 2.1.4 ~~Supervised Clinical Professional Counseling Experience — Supervised Clinical professional counseling experience shall be the accumulation of hours spent providing mental health counseling services while under the supervision of an approved clinical supervisor. Supervised professional counseling experience~~

acceptable to the Board shall be defined as follows: Experience Applications must provide documentation of completion of 3,200 hours mental health counseling services, as defined in 24 Del.C. §3031(3), as a LACMH over a period of no less than two (2) but no more than four (4) consecutive years.

2.1.4.1 Supervised Clinical professional counseling experience shall consist of 1,600 hours of clinical experience, directly supervised by a LPCMH. Where direct supervision by a LPCMH is not available, a licensed clinical social worker, licensed psychologist or licensed physician specializing in psychiatry may supervise the applicant. Of the required 3,200 hours of total experience, 1,600 hours must have been completed under the professional direct supervision of an individual who meets the requirements of regulations 3.1.1. The 1,600 hours of supervised clinical experience must be fulfilled as follows:

2.1.4.1.1 At least 1,500 of the 1,600 hours must be in the actual provision of face to face direct mental health counseling services. Of the 1,500 hours at least 750 of the hours must be individual face to face client sessions and must include the actual provision of direct mental health counseling services; the additional 750 hours may be individual, group, couple or family counseling services, or some combination of those services:

2.1.4.1.2 One hundred (100) hours of face to face professional direct supervision with the applicant's supervisor. Face to face supervision includes both in person and live video conferencing providing supervision by live video conferencing does not exceed fifty percent (50%) of the total 100 hours of supervision.

2.1.4.1.2.1 Individual Direct Supervision – Individual supervision shall consist of one to one, face to face meetings between LPCMH and LACMH. The entire 100 hour requirement may be fulfilled by individual supervision.

2.1.4.1.2.2 Group Supervision – Group supervision shall consist of face to face meetings between LPCMH and no more than six (6) LACMH. No more than 40 hours of group supervision shall be acceptable towards fulfillment of the 100 hour direct supervision requirement.

2.1.4.2 Hours completed under the supervision of an individual who does not meet the requirements of 3.1.1 will not count towards the fulfillment of the 1,500 hours of supervised experience but may count towards the fulfillment of the 1,600 hours of experience not required to be a supervised.

2.1.4.3 Supervision shall be verified by the "Direct Supervision Reference Form," which must be submitted directly to the Board by the approved clinical supervisor. Each supervisor must affirm that the LAMHC is prepared to practice independently without reservations.

2.1.4.4 Supervised professional counseling experience shall consist of 1,600 hours of clinical experience, directly supervised by a LPCMH. Where direct supervision by a LPCMH is not available, an alternative supervisor maybe requested of the Board provided it complies with 3.1.1.

2.1.4.25 Direct Supervision - 1600 hours of direct supervision acceptable to the Board shall mean supervision overseeing the supervisee's application of clinical counseling principles, methods or procedures to assist individuals in achieving more effective personal and social adjustment. At least 100 of the 1600 hours of supervision shall consist of face to face consultation between the supervisor and the supervisee a LPCMH (Supervisor) and a LACMH (Supervisee). Direct supervision may take place in individual and/or group settings, defined as follows:

2.1.4.25.1 Individual Supervision - Individual supervision shall consist of one-to-one, face-to-face meetings between a LPCMH (Supervisor) and LAMCH (Supervisee).

2.1.4.25.2 Group Supervision - Group supervision shall consist of face-to-face meetings between supervisor and no more than six (6) supervisees LPCMH (Supervisor) and not more than six (6) LACMH (Supervisees).

2.1.4.25.3 Supervisory Setting - No more than 40 hours of group supervision shall be acceptable toward the 100-hour requirement. The entire 100-hour requirement may be fulfilled by individual supervision.

2.1.4.6 Application of Rules to Individuals Graduating on or Before June 30, 2012. The Board reserves the right to accept experience obtained under the requirements of the rules in effect prior to these amendments for individual graduating on or before June 30, 2012.

2.2 Licensure by Reciprocity Requirements

2.2.1 Proof of Licensure Status - The applicant shall hold an active professional counseling license in good standing from another state. Verification of licensure status shall be submitted directly to the Board by that state on the "Verification of Licensure or Certification from Another State" form.

2.2.2 Notarized Statement of Prior Licensing Jurisdictions - The applicant shall submit a notarized statement listing all licensing jurisdictions in which he/she formerly practiced and a signed "Release of Information"

granting the Board permission to contact said jurisdictions for verification of disciplinary history and current status.

2.2.3 Determination of Substantial Similarity of Licensing Standards - The applicant shall submit a copy of the statute and rules of licensure from the state issuing his/her license. The burden of proof is upon the applicant to demonstrate that the statute and rules of the licensing state are at least equivalent to the educational, experience and supervision requirements of this State. Based upon the information presented, the Board shall make a determination regarding whether the licensing requirements of the applicant's licensing state are substantially similar to those of Delaware.

2.2.4 LACMH Option - If the Board determines that the requirements of the applicant's licensing state are not substantially similar to those of Delaware with regard only to the experience requirements, the applicant shall be eligible for licensure as an LACMH, in which case he/she shall have four (4) years to complete the supervision requirements. The applicant shall be given full credit for such properly documented experience and/or supervised experience as was required for licensure in his/her licensing state.

2.3 License Renewal

2.3.1 Renewal Date - The LPCMH license shall be renewable biennially on September 30th of even-numbered years. License renewal may be accomplished online at the Division of Professional Regulation's (Division) website. Alternatively, licensees may submit paper renewal documents. Requests for paper renewal forms must be directed to the Division.

2.3.2 Requirements for Renewal are as follows:

2.3.2.1 Certification - The candidate for renewal shall hold current certification in good standing as of the date of licensure renewal in NBCC, ACMHC or other certifying organization acceptable to the Board. This certification shall be verified by attestation. Attestation shall be completed electronically if the renewal is accomplished online. Alternatively, the attestation of certification may be submitted by paper renewal forms. Requests for paper renewal forms must be directed to the Division.

2.3.2.2 Continuing Education (CE)

2.3.2.2.1 Requirement - The candidate for renewal shall have completed no less than 40 clock hours of acceptable CE per two (2) year licensure renewal period. CE requirements for initial licensure periods of less than two (2) years shall be prorated.

2.3.2.2.2 Acceptable CE shall include the following:

2.3.2.2.2.1 CE hours approved by a national mental health organization (such as NBCC, ACMHC, or APA), shall be acceptable. Other training programs may apply for Board approval. CE should be oriented towards enhancement of the knowledge and practice of counseling. Hours are to be documented by a certificate signed by the presenter or by a designated official of the sponsoring organization.

2.3.2.2.2.2 Academic course work, presentation of original papers providing training and clinical supervision may be applied for up to 20 clock hours of the continuing education requirement. These hours are to be documented by an official transcript, syllabus, or a copy of the published paper presented. Under no circumstances may there be less than 20 hours of face-to-face participation in CE as outlined above.

2.3.2.2.3 Make-Up of Disallowed Hours - In the event that the board disallows certain CE clock hours, the candidate for renewal shall have three (3) months after the licensure renewal date to complete the balance of acceptable CE hours required.

2.3.2.3 Hardship – The Board shall have the authority to make exceptions to the CE requirements, in its discretion, upon a showing of good cause. "Good Cause" may include, but is not necessarily limited to: disability, illness, military service, extended absence from the jurisdiction, or exceptional family responsibilities. Request for hardship consideration must be submitted to the Board in writing prior to the end of the licensing period, along with payment of the appropriate renewal fee. A license shall be renewed upon approval of the hardship extension by the Board, but the license shall be subject to revocation if the licensee does not comply with the terms of the hardship exception established by the Board.

2.3.2.4 Verification of CE hours shall be by attestation. Attestation shall be completed electronically if the renewal is accomplished online. Alternatively, the attestation of completion may be submitted by paper renewal forms. Requests for paper renewal forms must be directed to the Division.

2.3.3 Post-Renewal Audit – The Board will conduct random audits of renewal applications to ensure the veracity of attestations and compliance with the CE requirements. Licensees selected for the random audit shall submit CE course attendance verification in the form of a certificate signed by the course presenter or by a

designated official of the sponsoring organization. Licensees shall retain their CE course attendance documentation for each licensure period. Licensees shall retain their CE course attendance documentation for at least one (1) year after renewal. Licensees found to be deficient or found to have falsely attested may be subject to disciplinary proceedings and may have their license suspended or revoked. Licensees renewing during the late renewal period shall be audited.

2.4 Inactive Status

2.4.1 A written request must be submitted to have a license placed on inactive status. Inactive status is effective immediately upon Board approval. The inactive status may continue through the then current licensure period and the following two-year licensure period. An inactive license shall expire at the end of the two-year licensure period unless either (1) the Board grants an extension before the end of the licensure period or (2) the license is returned to active status before the end of the licensure period.

2.4.2 Extension – The Board shall extend the inactive status for an additional two-year licensure period upon timely written request. Inactive licenses expire at the end of the licensure period, so written requests for extension must be received well in advance of the end of the licensure period to avoid expiration.

2.4.3 Return to Active Status – Before the end of the then current two-year licensure period, a license shall be returned to active status upon fulfillment of the following requirements by the licensee:

2.4.3.1 Written Request – Submit a written request to have the license returned to active status.

2.4.3.2 Certification – Provide proof of certification in good standing by NBCC, ACMHC, or another certifying organization acceptable to the Board pursuant to regulation 2.1.1.1.

2.4.3.3 Continuing Education – Provide proof of completion of 40 hours of acceptable CE, obtained within the two (2) year period immediately preceding the request for return to active status.

2.4.3.4 Fee – Pay the licensure renewal fee. No late fee shall be assessed for return to active status.

2.5 Ethics - The practice of all persons licensed as an LPCMH shall conform to the principles of the National Board for Certified Counselors' Code of Ethics (Code). Violation of the Code shall constitute grounds for discipline.

4 DE Reg. 970 (12/1/00)

5 DE Reg. 2109 (5/1/02)

10 DE Reg. 872 (11/01/06)

11 DE Reg. 225 (08/01/07)

11 DE Reg. 1066 (02/01/08)

15 DE Reg. 1055 (01/01/12)

3.0 Licensure for Associate Counselors of Mental Health (LACMH)

3.1 ~~Written Plan – The applicant shall submit a written plan for supervised professional experience, on the “Written Plan for Professional Counseling Experience and Supervision” form, supplied by the Board, and signed by the approved professional supervisor.~~ Experience – LACMH applicants must provide a written plan for acquiring the LPCMH experience requirements contained in regulation 2.1.3 above. The plan must be signed by the applicant’s proposed supervisor. Supervisors must be acceptable to the Board.

3.1.1 To be acceptable to the Board, the supervisor must be:

3.1.1.1 A Delaware LPCMH

3.1.1.2 If a Delaware LPCMH is not available, the LACMH applicant may request approval from the board for the utilization of a professionally licensed professional by the Delaware Board of Mental Health and Chemical Dependency Professionals provided the applicant can document a compelling reason to utilize another licensed professional and the supervisor can demonstrate sufficient competence to supervise a LACMH;

3.1.1.3 If a supervisor licensed by this board is not available, the LACMH applicant may request approval from the board for supervision from a licensed professional counselor of mental health from another state who has held a license in good standing for a minimum of five (5) years in that state, has a certification from the National Board of Certified Counselors, and is pre approved by the Board.

3.1.1.4 Only if one of the above professionals is not available, an individual with any of the following licenses in any state and training in professional mental health counseling supervision can be used: clinical social worker, psychologist practicing in the clinical realm, or physician specializing in psychiatry if the supervisor is pre approved by the Board.

3.1.1.5 If a proposed supervisor is not a professional licensed by the Delaware Board of Professional Counselors of Mental Health and Chemical Dependency Counselors, the proposed supervisor must attest, on a form provided by the Board for this purpose, that he/she has read and is familiar with the requirements for licensure in Delaware, including the applicable statutes, rules and

regulations; that he/she has a minimum of five years of good standing, post licensure experience; and that she/he has the training to provide clinical supervision.

3.2 Licensees must notify the Board in writing, on the Board approved form, within 30 days if there is a change in the clinical supervision. Any supervisor must meet the requirements of 3.1.1. All changes are subject to Board approval. To obtain approval contact the Board office or to the website www.dpr.delaware.gov to obtain the proper form.

3.23 Ethics – The practice of all persons licensed as an LAMCH shall conform to the principles of the National Board for Certified Counselors' Code of Ethics (Code). Violation of the Code shall be grounds for discipline.

4 DE Reg. 970 (12/1/00)

10 DE Reg. 872 (11/01/06)

11 DE Reg. 1066 (02/01/08)

4.0 Licensure for Chemical Dependency Professionals (LCDP)

4.1 Licensure by Certification Requirements

4.1.1 Education – The applicant's master's degree shall be documented by an official transcript submitted directly to the Board by the degree-granting institution.

4.1.2 Experience – Counseling experience shall be defined as the accumulation of 3,200 hours spent providing chemical dependency services in a professional clinical setting, including face-to-face interaction with clients and other matters directly related to the treatment of clients. Supervision shall be verified by the "Supervision Reference Form," which shall be submitted directly to the Board by the approved clinical supervisor.

4.1.3 Certification – To be licensed by certification an applicant must be certified by the National Association for Addictions Professionals (NAADAC) as a National Certified Addictions Counselor (NCAC) or Master Addictions Counselor (MAC), by the Delaware Certification Board (DCB Inc.) as a Certified Alcohol and Drug Counselor (CADC), or by another certifying organization acceptable to the Board.

4.1.3.1 Another certifying organization must meet all of the following criteria to be acceptable to the Board:

4.1.1.3.1 The organization shall be a national professional chemical dependency organization recognized as setting national standards of clinical competency;

4.1.1.3.2 The organization shall require the applicant to take and pass a standardized examination designed to test his understanding of the principles involved in the chemical dependency specialty for which he is being certified; and

4.1.1.3.3 The organization shall prescribe a code of ethics substantially equivalent to NAADAC's.

4.1.3.2 At the time of initial licensure, licensees must provide evidence of active certification in good standing by an organization acceptable to the Board. If a licensee is certified by an organization that thereafter is deemed not acceptable by the Board, the licensee must obtain certification from an acceptable organization to qualify for licensure renewal.

4.2 Licensure by Reciprocity Requirements

4.2.1 Licensure Status – Verification of an applicant's possession of a current LCDP in good standing from another state, the District of Columbia, or U.S. territory must be submitted directly to the Board by that state, the District of Columbia, or U.S. territory.

4.2.2 Prior Licensing Jurisdictions – The applicant must submit a notarized statement listing all licensing jurisdictions in which he previously practiced and must submit a signed "Release of Information" granting the Board permission to contact those jurisdictions for verification of disciplinary history and current status.

4.2.3 Substantial Similarity of Licensing Standards – Applicants must submit the statute, rules, and regulations governing chemical dependency licensure requirements for the state in which they are currently licensed and through which they are seeking reciprocity. The burden of proof is on the applicant to demonstrate that the licensing standards of that state are substantially similar to Delaware's standards. The Board will make a determination of substantial similarity based on the information presented. If applicants are actively licensed in multiple states, only one state's licensure requirements need to be substantially similar for the applicant to obtain Delaware licensure by reciprocity.

4.2.4 No Substantial Similarity of Licensing Standards – Applicants from states whose licensing standards are not substantially similar to Delaware's standards may receive reciprocal licensure if they have held their license in good standing for at least five (5) years and are certified pursuant to regulation 4.1.3.

4.3 License Renewal

4.3.1 Renewal Date – The LCDP shall be renewable biennially on or before September 30th of even-numbered years. License renewal may be accomplished online at the Division of Professional Regulation's (Division)

website. Alternatively, licensees may submit paper renewal documents. Requests for paper renewal forms must be directed to the Division.

4.3.2 Requirements for Renewal are as follows:

4.3.2.1 Certification – As of the renewal date, licensees must be certified by and in good standing with DCB Inc., NAADAC, or by another certifying organization acceptable to the Board pursuant to regulation 4.1.3. Certification shall be verified by attestation. Attestation shall be completed electronically if the renewal is accomplished online. Alternatively, the attestation of certification may be submitted by paper renewal forms. Requests for paper renewal forms must be directed to the Division.

4.3.2.2 Continuing Education (CE) – Licensees must complete at least 40 acceptable CE hours during the previous licensure period in order to renew their license. LCDP CE hours approved by a chemical dependency organization, including but not limited to DCB Inc. and NAADAC, shall be acceptable. Other training programs may apply for Board approval. Acceptable CE's are oriented towards enhancement, knowledge, and practice of chemical dependency counseling. CE requirements for initial licensure periods of less than two (2) years shall be prorated.

4.3.2.2.1 Verification – Verification of CE hours shall be by attestation. Attestation shall be completed electronically if the renewal is accomplished online. Alternatively, the attestation of completion may be submitted by paper renewal forms. Requests for paper renewal forms must be directed to the Division.

4.3.2.2.2 Hardship – The Board shall have the authority to make exceptions to the CE requirements, in its discretion, upon a showing of good cause. "Good Cause" may include, but is not limited to: disability, illness, military service, extended absence from the jurisdiction, or exceptional family responsibilities. Requests for hardship consideration must be submitted to the Board in writing prior to the end of the licensing period, along with payment of the appropriate renewal fee. A license shall be renewed upon approval of the hardship extension by the Board, but the license shall be subject to revocation if the licensee does not comply with the Board's terms for the hardship exception.

4.3.3 Post-Renewal Audit – The Board will conduct random audits of renewal applications to ensure the veracity of attestations and compliance with the renewal requirements. Licensees selected for the random audit shall submit CE course attendance verification in the form of a certificate signed by the course presenter or by a designated official of the sponsoring organization. Licensees shall retain their CE course attendance documentation for each licensure period and for at least one (1) year after renewal. Licensees found to be deficient or found to have falsely attested may be subject to disciplinary proceedings and may have their license suspended or revoked. Licensees renewing during the late renewal period shall be audited.

4.4 Inactive Status

4.4.1 A written request must be submitted to have a license placed on inactive status. Inactive status is effective immediately upon Board approval. The inactive status may continue through the then current licensure period and the following two-year licensure period. An inactive license shall expire at the end of the two-year licensure period unless either (1) the Board grants an extension before the end of the licensure period or (2) the license is returned to active status before the end of the licensure period.

4.4.2 Extension – The Board shall extend the inactive status for an additional two-year licensure period upon timely written request. Inactive licenses expire at the end of the licensure period, so written requests for extension must be received well in advance of the end of the licensure period to avoid expiration.

4.4.3 Return to Active Status – Before the end of the then current two-year licensure period, a license shall be returned to active status upon fulfillment of the following requirements by the licensee:

4.4.3.1 Written Request – Submit a written request to have the license returned to active status.

4.4.3.2 Certification – Provide proof of certification in good standing by DCB Inc., NAADAC, or another certifying organization acceptable to the Board pursuant to regulation 4.1.3.

4.4.3.3 Continuing Education – Provide proof of completion of 40 hours of acceptable CE, obtained within the two (2) year period immediately preceding the request for return to active status.

4.4.3.4 Fee – Pay the licensure renewal fee. No late fee shall be assessed for return to active status.

4.6 Ethics – The Board hereby adopts the current version of the National Association for Addictions Professionals (NAADAC) Code of Ethics (Code). The practice of all persons possessing an LCDP shall conform to the principles of the Code. Violation of the Code shall constitute grounds for discipline.

11 DE Reg. 1066 (02/01/08)

5.0 License for Marriage and Family Therapists (LMFT)

5.1 Licensure by Examination Requirements

5.1.1 LAMFT Required - Successful LMFT applicants must hold an active License for Associate Marriage and Family Therapists (LAMFT).

Limited Exception - Individuals who have completed the experience requirements of regulation 5.1.2 and hold an acceptable degree under regulation 6.2, may apply for an LMFT without first obtaining an LAMFT. LMFT applicants under this exception must submit documentation of their experience pursuant to the requirements of regulation 5.1.2 and their educational background pursuant to regulation 6.2. If the submitted documentation is acceptable to the Board, the applicant will receive permission to take the Association of Marital and Family Therapy Regulatory Boards (AMFTRB) exam. If approved to take the exam, an applicant under this exception will receive an LMFT once the Board receives proof that the applicant has passed the exam. A score of 70% or greater is required to pass the exam.

5.1.2 Experience - Applicants must provide documentation of completion of 3,200 hours of marriage and family therapy services, as defined in 24 Del.C. §3051(d), over a period of no less than two (2) but no more than four (4) consecutive years.

5.1.2.1 Of the required 3,200 hours total experience, 1,600 hours must have been completed under the supervision of an individual who meets the requirements of regulation 6.3.1. The 1,600 hours of supervised experience must be fulfilled as follows:

5.1.2.1.1 500 hours of couple and family therapy,

5.1.2.1.2 500 hours of individual therapy,

5.1.2.1.3 500 hours of couple and family or individual therapy or some combination of the two, and

5.1.2.1.4 100 hours of face-to-face clinical supervision with the applicant's supervisor.

5.1.2.2 Hours completed under the supervision of an individual who does not meet the requirements of 6.3.1 will not count toward fulfillment of the required 1,600 hours of supervised experience but may count toward fulfillment of the 1,600 hours of experience not required to be supervised.

5.2 Licensure by Reciprocity Requirements

5.2.1 Licensure Status - Verification of an applicant's possession of a current marriage and family therapy license in good standing from another state, the District of Columbia, or U.S. territory must be submitted directly to the Board by that state, the District of Columbia, or U.S. territory.

5.2.2 Prior Licensing Jurisdictions - The applicant must submit a notarized statement listing all licensing jurisdictions in which he previously practiced and a signed "Release of Information" granting the Board permission to contact those jurisdictions for verification of disciplinary history and current status.

5.2.3 Substantial Similarity of Licensing Standards - Applicants must submit the statute, rules, and regulations governing marriage and family therapy licensure for the state in which they are currently licensed and through which they are seeking reciprocity. The burden of proof is on the applicant to demonstrate that the licensing standards of that state are substantially similar to Delaware's standards. The Board will make a determination of substantial similarity based on the information presented.

5.2.4 No Substantial Similarity of Licensing Standards - Applicants from states whose licensing standards are not substantially similar to Delaware's standards may receive reciprocal licensure if they have held their license in good standing for at least five (5) years and have passed the AMFTRB exam.

5.3 License Renewal

5.3.1 Renewal Date – The LMFT shall be renewable biennially on or before September 30th of even-numbered years. License renewal may be accomplished online at the Division of Professional Regulation's (Division) website. Alternatively, licensees may submit paper renewal documents. Requests for paper renewal forms must be directed to the Division.

5.3.2 Continuing Education (CE) Requirements

5.3.2.1 Purpose – The CE requirement is intended to maintain licensees' professional competence in the practice of marriage and family therapy.

5.3.2.2 Licensees must complete at least 40 acceptable CE hours during the previous licensure period in order to renew their license. CE requirements for initial licensure periods of less than two (2) years shall be prorated.

5.3.2.3 Acceptable CE includes:

5.3.2.3.1 CE courses approved by a national mental health or substance abuse treatment organization or their local affiliates, such as the American Association for Marriage and Family Therapy (AAMFT), the International Family Therapy Association (IFTA), the National Board for Certified Counselors, Inc. (NBCC), Academy of Clinical Mental Health Counselors (ACMHC), or the

American Psychological Association (APA) are acceptable, regardless of course content, and do not need to be approved by the Board.

5.3.2.3.2 Any course that would achieve the purpose of the CE requirement, explained in regulation 5.3.2.1 above, is acceptable and does not require Board review and approval. Courses that do not clearly achieve the purpose of CE require Board approval. Licensees should request Board approval in advance of attendance. Requests for approval may be submitted afterward, but there is no guarantee of approval. These hours must be documented by a course agenda, syllabus, or other brief documentation that would allow the Board to assess the appropriateness of the course content. Only licensees may request course approvals. Sponsoring organizations may not request course approvals.

5.3.2.3.3 Teaching academic or CE courses, presentation of original papers, or the writing of a peer-reviewed article may account for up to 20 CE hours. An official transcript, agenda, or syllabus must be provided to document course hours and content. A copy of the published paper presented must be provided to document hours and content. Only the hours worked in preparation and delivery of the items contained in 5.3.2.3.2 will be counted.

5.3.2.3.4 CE obtained through independent or home study, including online CE, may only account for a maximum of 50% of the CE requirement.

5.3.3 Hardship – The Board shall have the authority to make exceptions to the CE requirements, in its discretion, upon a showing of good cause. "Good Cause" may include, but is not limited to: disability, illness, military service, extended absence from the jurisdiction, or exceptional family responsibilities. Requests for hardship consideration must be submitted to the Board in writing prior to the end of the licensing period, along with payment of the appropriate renewal fee. A license shall be renewed upon approval of the hardship extension by the Board, but the license shall be subject to revocation if the licensee does not comply with the terms of the hardship exception established by the Board.

5.3.4 Verification - Verification of CE hours shall be by attestation. Attestation shall be completed electronically if the renewal is accomplished online. Alternatively, the attestation of completion may be submitted by paper renewal documents. Requests for paper renewal forms must be directed to the Division of Professional Regulation.

5.3.5 Post-Renewal Audit - The Board will conduct random audits of renewal applications to ensure the veracity of attestations and compliance with the CE requirements. Licensees selected for the random audit shall submit CE course attendance verification in the form of a certificate signed by the course presenter or by a designated official of the sponsoring organization. Licensees shall retain their CE course attendance documentation for each licensure period. Licensees shall retain their CE course attendance documentation for at least one (1) year after renewal. Licensees found to be deficient or found to have falsely attested may be subject to disciplinary proceedings and may have their license suspended or revoked. Licensees renewing during the late renewal period shall be audited.

5.4 Inactive Status – Licensees may be placed in inactive status upon written request to the Board.

5.4.1 A written request must be submitted to have a license placed on inactive status. Inactive status is effective immediately upon Board approval. The inactive status may continue through the then current licensure period and the following two-year licensure period. An inactive license shall expire at the end of the two-year licensure period unless either (1) the Board grants an extension before the end of the licensure period or (2) the license is returned to active status before the end of the licensure period.

5.4.2 Extension – The Board shall extend the inactive status for an additional two-year licensure period upon timely written request. Inactive licenses expire at the end of the licensure period, so written requests for extension must be received well in advance of the end of the licensure period to avoid expiration.

5.4.3 Return to Active Status – Before the end of the then current two-year licensure period, a license shall be returned to active status upon fulfillment of the following requirements by the licensee:

5.4.3.1 Written Request – Submit a written request to have the license returned to active status.

5.4.3.2 Continuing Education – Provide proof of completion of 40 hours of acceptable CE, obtained within the two (2) year period immediately preceding the request for return to active status.

5.4.3.3 Fee – Pay the licensure renewal fee. No late fee shall be assessed for return to active status.

5.5 Ethics - The Board hereby adopts the current version of the American Association for Marriage and Family Therapy (AAMFT) Code of Ethics ("Code"). The practice of all persons possessing an LMFT or LAMFT shall conform to the principles of the Code. Violation of the Code shall constitute grounds for discipline.

11 DE Reg. 225 (08/01/07)

11 DE Reg. 1066 (02/01/08)

6.0 Licensure for Associate Marriage and Family Therapists (LAMFT)

- 6.1 Examination - Successful LAMFT applicants must pass the Association of Marital and Family Therapy Regulatory Boards (AMFTRB) exam. No LAMFT applicant may take the exam without prior approval of the Board. Board approval is based on fulfillment of the requirements in regulation 6.2 (proof of acceptable education) and regulation 6.3 (submission of a plan to acquire the requisite experience). LAMFT applicants must fulfill those requirements to receive permission to take the exam. If approved to take the exam, an applicant will receive an LAMFT once the Board receives proof that the applicant has passed the exam. A score of 70% or greater is required to pass the exam.
- 6.2 Education - An applicant's education must be documented by an official transcript submitted directly to the Board by the degree-granting institution.
 - 6.2.1 All successful applicants must possess either:
 - 6.2.1.1 A graduate degree in marriage and family therapy (MFT) from a graduate program accredited by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE),
 - 6.2.1.2 A graduate degree in marriage and family therapy from a non-COAMFTE accredited graduate program acceptable to the Board, or
 - 6.2.1.3 A graduate degree from a nationally accredited college or university in an allied field which is acceptable to the Board. Acceptable allied fields are limited to: counseling, social work, psychology, and psychiatry.
 - 6.2.2 To be acceptable to the Board, a graduate degree under regulations 6.2.1.2 or 6.2.1.3 above must be based on at least 45 credit hours which must include the following:
 - 6.2.2.1 Three (3) credit hours in each of the 10 core content areas for a total of 30 credit hours. The 10 core content areas are:
 - 6.2.2.1.1 Marriage and Family Therapy Models and Theories
 - 6.2.2.1.2 Diagnosis and Treatment of Mental and Emotional Disorder
 - 6.2.2.1.3 Psychopathology
 - 6.2.2.1.4 Gender, Culture, and Ethnic Diversity in marriage and family therapy
 - 6.2.2.1.5 Sexual Issues In Marriage and Family Therapy
 - 6.2.2.1.6 Family Therapy Theory & Techniques
 - 6.2.2.1.7 Couple Therapy Theory and Techniques
 - 6.2.2.1.8 Ethical, Legal and Professional Issues in marriage and family therapy
 - 6.2.2.1.9 Research Methods and Evaluation
 - 6.2.2.1.10 Clinical Supervised Experience in marriage and family therapy
 - 6.2.2.2 Nine (9) credit hours earned by serving an internship. The internship must have included at least 300 hours of direct client counseling, 150 hours of which must have been spent on couples and family therapy.
 - 6.2.2.3 Six (6) credit hours in electives.
- 6.3 Experience - LAMFT applicants must provide a written plan for acquiring the LMFT experience requirements contained in regulation 5.1.2 above. The plan must be signed by the applicant's proposed supervisor. Supervisors must be acceptable to the Board.
 - 6.3.1 To be acceptable to the Board, a supervisor must be either:
 - 6.3.1.1 a Delaware-licensed marriage and family therapist,
 - 6.3.1.2 an individual holding the "approved supervisor" designation from the American Association for Marriage and Family Therapy (AAMFT),
 - 6.3.1.3 a candidate for the AAMFT "approved supervisor" designation who is acceptable to the Board,
 - 6.3.1.4 a licensed marriage and family therapist from another state who has held a license in good standing for a minimum of five (5) years in that state and has passed the AMFTRB exam, or
 - 6.3.1.5 only if one of the above is not available, an individual with the following license from any state: clinical social worker, psychologist, professional counselor of mental health, or physician specializing in psychiatry with training in marriage and family therapy supervision.
 - 6.3.2 Licensees must notify the Board in writing, on the Board-approved form, within 30 days if their supervisor changes. Any supervisor must meet the requirements in 6.3.1. All changes are subject to Board approval. Contact the Board office or website for the proper form.

7.0 Application; Fee, Affidavit, and Time Limit

- 7.1 Fees - Applicants for initial licensure shall submit a completed "Application for Licensure," accompanied by a non-refundable application fee. Applicants for licensure renewal must pay a non-refundable renewal fee. Applicants for late licensure renewal (within one year after expiration) must pay a non-refundable late-renewal fee. All fees are set by the Division of Professional Regulation.
- 7.2 Affidavit - Applicants shall submit a signed, notarized "Affidavit" affirming that the applicant:
 - 7.2.1 has not violated any rule or regulation set forth by the Delaware Board of Mental Health and Chemical Dependency Professionals;
 - 7.2.2 has not been the recipient of any administrative penalties from any jurisdiction in connection with licensure, registration or certification as a professional mental health provider,
 - 7.2.3 does not have any impairment related to drugs, alcohol, or a finding of mental incompetence by a physician that would limit the applicant's ability to safely act as an LPCMH, LACMH, LCDP, LMFT, or LAMFT, respectively;
 - 7.2.4 that he/she has not been convicted of and has no pending criminal charge or charges relating to any crime that is substantially related to the provision of professional mental health counseling, chemical dependency counseling or marriage and family therapy; and
 - 7.2.5 has not been penalized for any willful violation of any code of ethics or professional mental health counseling standard.
- 7.3 Time Limit for Completion of Application - Any application not completed within one (1) year shall be considered null and void.

4 DE Reg. 970 (12/01/00)

9 DE Reg. 1106 (01/01/06)

10 DE Reg. 872 (11/01/06)

11 DE Reg. 225 (08/01/07)

11 DE Reg. 1066 (02/01/08)

8.0 [Reserved]

4 DE Reg. 970 (12/1/00)

10 DE Reg. 872 (11/01/06)

11 DE Reg. 225 (08/01/07)

9.0 Disciplinary Proceedings and Hearings

- 9.1 Disciplinary proceedings against any licensee may be initiated by an aggrieved person by submitting a complaint in writing to the Director of the Division of Professional Regulation as specified in 29 **Del. C.** §8807(h)(1)-(3).
 - 9.1.1 A copy of the written complaint shall be forwarded to the administrative assistant for the Board. At the next regularly scheduled Board meeting, a contact person for the Board shall be appointed and a copy of the written complaint given to that person.
 - 9.1.2 The contact person appointed by the Board shall maintain strict confidentiality with respect to the contents of the complaint and shall not discuss the matter with other Board members or with the public. The contact person shall maintain contact with the investigator or deputy attorney general assigned to the case regarding the progress of the investigation.
 - 9.1.3 In the instance when the case is being closed by the Division, the contact person shall report the facts and conclusions to the Board without revealing the identities of the parties involved. No vote of the Board is necessary to close the case.
 - 9.1.4 If a hearing has been requested by the Deputy Attorney General, a copy of these Rules and Regulations shall be provided to the respondent upon request. The notice of hearing shall fully comply with 29 **Del.C.** Sec. 10122 and 10131 pertaining to the requirements of the notice of proceedings. All notices shall be sent to the respondent's address as reflected in the Board's records.
 - 9.1.5 At any disciplinary hearing, the respondent shall have the right to appear in person or be represented by counsel, or both. The Respondent shall have the right to produce evidence and witnesses on his or her behalf and to cross examine witnesses. The Respondent shall be entitled to the issuance of subpoenas to compel the attendance of witnesses and the production of documents on his or her behalf.
 - 9.1.6 No less than 10 days prior to the date set for a disciplinary hearing, the Department of Justice and the respondent shall submit to the Board and to each other, a list of the witnesses they intend to call at the hearing. Witnesses not listed shall be permitted to testify only upon a showing of reasonable cause for such omission.

- 9.1.7 If the respondent fails to appear at a disciplinary hearing after receiving the notice required by 29 **Del.C.** §10122 and 10131, the Board may proceed to hear and determine the validity of the charges against the respondent.

9.2 Hearing procedures

- 9.2.1 The Board may administer oaths, take testimony, hear proofs and receive exhibits into evidence at any hearing. All testimony at any hearing shall be under oath.
- 9.2.2 Strict rules of evidence shall not apply. All evidence having probative value commonly accepted by reasonably prudent people in the conduct of their affairs shall be admitted.
- 9.2.3 An attorney representing a party in a hearing or matter before the Board shall notify the Board of the representation in writing as soon as practicable.
- 9.2.4 Requests for postponements of any matter scheduled before the Board shall be submitted to the Board's office in writing no less than three (3) days before the date scheduled for the hearing. Absent a showing of exceptional hardship, there shall be a maximum of one postponement allowed to each party to any hearing.
- 9.2.5 A complaint shall be deemed to "have merit" and the Board may impose disciplinary sanctions against the licensee if at least four members of the Board find, by a preponderance of the evidence, that the respondent has committed the act(s) of which he or she is accused and that those act(s) constitute grounds for discipline pursuant to 24 **Del.C.** §515.
- 9.2.6 Any decision by the Board to suspend or revoke a license shall be made public by publishing notice of the suspension or revocation in at least two (2) Delaware newspapers of general circulation. Such publication shall take place following the Board's execution of the final order.

4 DE Reg. 970 (12/1/00)

10 DE Reg. 872 (11/01/06)

10.0 Voluntary Treatment Option for Chemically Dependent or Impaired Professionals

- 10.1 If the report is received by the chairperson of the regulatory Board, that chairperson shall immediately notify the Director of Professional Regulation or his/her designate of the report. If the Director of Professional Regulation receives the report, he/she shall immediately notify the chairperson of the regulatory Board, or that chairperson's designate or designates.
- 10.2 The chairperson of the regulatory Board or that chairperson's designate or designates shall, within 7 days of receipt of the report, contact the individual in question and inform him/her in writing of the report, provide the individual written information describing the Voluntary Treatment Option, and give him/her the opportunity to enter the Voluntary Treatment Option.
- 10.3 In order for the individual to participate in the Voluntary Treatment Option, he/she shall agree to submit to a voluntary drug and alcohol screening and evaluation at a specified laboratory or health care facility. This initial evaluation and screen shall take place within 30 days following notification to the professional by the participating Board chairperson or that chairperson's designate(s).
- 10.4 A regulated professional with chemical dependency or impairment due to addiction to drugs or alcohol may enter into the Voluntary Treatment Option and continue to practice, subject to any limitations on practice the participating Board chairperson or that chairperson's designate or designates or the Director of the Division of Professional Regulation or his/her designate may, in consultation with the treating professional, deem necessary, only if such action will not endanger the public health, welfare or safety, and the regulated professional enters into an agreement with the Director of Professional Regulation or his/her designate and the chairperson of the participating Board or that chairperson's designate for a treatment plan and progresses satisfactorily in such treatment program and complies with all terms of that agreement. Treatment programs may be operated by professional Committees and Associations or other similar professional groups with the approval of the Director of Professional Regulation and the chairperson of the participating Board.
- 10.5 Failure to cooperate fully with the participating Board chairperson or that chairperson's designate or designates or the Director of the Division of Professional Regulation or his/her designate in regard to the Voluntary Treatment Option or to comply with their requests for evaluations and screens may disqualify the regulated professional from the provisions of the Voluntary Treatment Option, and the participating Board chairperson or that chairperson's designate or designates shall cause to be activated an immediate investigation and institution of disciplinary proceedings, if appropriate, as outlined in subsection 10.8 of this section.
- 10.6 The Voluntary Treatment Option may require a regulated professional to enter into an agreement which includes, but is not limited to, the following provisions:
- 10.6.1 Entry of the regulated professional into a treatment program approved by the participating Board. Board approval shall not require that the regulated professional be identified to the Board. Treatment and

evaluation functions must be performed by separate agencies to assure an unbiased assessment of the regulated professional's progress.

- 10.6.2 Consent to the treating professional of the approved treatment program to report on the progress of the regulated professional to the chairperson of the participating Board or to that chairperson's designate or designates or to the Director of the Division of Professional Regulation or his/her designate at such intervals as required by the chairperson of the participating Board or that chairperson's designate or designates or the Director of the Division of Professional Regulation or his/her designate, and such person making such report will not be liable when such reports are made in good faith and without malice.
- 10.6.3 Consent of the regulated professional, in accordance with applicable law, to the release of any treatment information from anyone within the approved treatment program.
- 10.6.4 Agreement by the regulated professional to be personally responsible for all costs and charges associated with the Voluntary Treatment Option and treatment program(s). In addition, the Division of Professional Regulation may assess a fee to be paid by the regulated professional to cover administrative costs associated with the Voluntary Treatment Option. The amount of the fee imposed under this subparagraph shall approximate and reasonably reflect the costs necessary to defray the expenses of the participating Board, as well as the proportional expenses incurred by the Division of Professional Regulation in its services on behalf of the Board in addition to the administrative costs associated with the Voluntary Treatment Option.
- 10.6.5 Agreement by the regulated professional that failure to satisfactorily progress in such treatment program shall be reported to the participating Board's chairperson or his/her designate or designates or to the Director of the Division of Professional Regulation or his/her designate by the treating professional who shall be immune from any liability for such reporting made in good faith and without malice.
- 10.6.6 Compliance by the regulated professional with any terms or restrictions placed on professional practice as outlined in the agreement under the Voluntary Treatment Option.
- 10.7 The regulated professional's records of participation in the Voluntary Treatment Option will not reflect disciplinary action and shall not be considered public records open to public inspection. However, the participating Board may consider such records in setting a disciplinary sanction in any future matter in which the regulated professional's chemical dependency or impairment is an issue.
- 10.8 The participating Board's chairperson, his/her designate or designates or the Director of the Division of Professional Regulation or his/her designate may, in consultation with the treating professional at any time during the Voluntary Treatment Option, restrict the practice of a chemically dependent or impaired professional if such action is deemed necessary to protect the public health, welfare or safety.
- 10.9 If practice is restricted, the regulated professional may apply for unrestricted licensure upon completion of the program.
- 10.10 Failure to enter into such agreement or to comply with the terms and make satisfactory progress in the treatment program shall disqualify the regulated professional from the provisions of the Voluntary Treatment Option, and the participating Board shall be notified and cause to be activated an immediate investigation and disciplinary proceedings as appropriate.
- 10.11 Any person who reports pursuant to this section in good faith and without malice shall be immune from any civil, criminal or disciplinary liability arising from such reports, and shall have his/her confidentiality protected if the matter is handled in a nondisciplinary matter.
- 10.12 Any regulated professional who complies with all of the terms and completes the Voluntary Treatment Option shall have his/her confidentiality protected unless otherwise specified in a participating Board's rules and regulations. In such an instance, the written agreement with the regulated professional shall include the potential for disclosure and specify those to whom such information may be disclosed.

11.0 Crimes substantially related to the provision of mental health counseling and chemical dependency counseling:

- 11.1 Conviction of any of the following crimes, or of the attempt to commit or of a conspiracy to commit or conceal or of solicitation to commit any of the following crimes, is deemed to be substantially related to the provision of mental health counseling and chemical dependency counseling in the State of Delaware without regard to the place of conviction:
 - 11.1.1 Menacing. 11 Del.C. §602(a).
 - 11.1.2 Aggravated menacing. 11 Del.C. §602(b).
 - 11.1.3 Reckless endangering in the first degree. 11 Del.C. §604
 - 11.1.4 Abuse of a pregnant female in the second degree. 11 Del.C. §605.
 - 11.1.5 Abuse of a pregnant female in the first degree. 11 Del.C. §606.

11.1.6 Assault in the third degree. 11 **Del.C.** §611.

11.1.7 Assault in the second degree. 11 **Del.C.** §612.

11.1.8 Assault in the first degree. 11 **Del.C.** §613.

11.1.9 Abuse of a sports official; felony. 11 **Del.C.** §614.

11.1.10 Assault by abuse or neglect. 11 **Del.C.** §615.

11.1.11 Terroristic threatening. 11 **Del.C.** §621(a) and (b).

11.1.12 Unlawfully administering drugs. 11 **Del.C.** §625.

11.1.13 Unlawfully administering controlled substance or counterfeit substance or narcotic drugs. 11 **Del.C.** §626.

11.1.14 Criminally negligent homicide. 11 **Del.C.** §631.

11.1.15 Manslaughter. 11 **Del.C.** §632.

11.1.16 Murder by abuse or neglect in the second degree. 11 **Del.C.** §633.

11.1.17 Murder by abuse or neglect in the first degree. 11 **Del.C.** §634.

11.1.18 Murder in the second degree. 11 **Del.C.** §635.

11.1.19 Murder in the first degree. 11 **Del.C.** §636.

11.1.20 Promoting suicide. 11 **Del.C.** §645.

11.1.21 Abortion. 11 **Del.C.** §651.

11.1.22 Self abortion. 11 **Del.C.** §652.

11.1.23 Issuing abortifacient articles. 11 **Del.C.** §653.

11.1.24 Sexual harassment. 11 **Del.C.** §763.

11.1.25 Indecent exposure in the second degree. 11 **Del.C.** §764.

11.1.26 Indecent exposure in the first degree. 11 **Del.C.** §765.

11.1.27 Incest. 11 **Del.C.** §766.

11.1.28 Unlawful sexual contact in the third degree. 11 **Del.C.** §767.

11.1.29 Unlawful sexual contact in the second degree. 11 **Del.C.** §768.

11.1.30 Unlawful sexual contact in the first degree. 11 **Del.C.** §769.

11.1.31 Rape in the fourth degree. 11 **Del.C.** §770.

11.1.32 Rape in the third degree. 11 **Del.C.** §771.

11.1.33 Rape in the second degree. 11 **Del.C.** §772.

11.1.34 Rape in the first degree. 11 **Del.C.** §773.

11.1.35 Sexual extortion. 11 **Del.C.** §776.

11.1.36 Bestiality. 11 **Del.C.** §777.

11.1.37 Continuous sexual abuse of a child. 11 **Del.C.** §778.

11.1.38 Dangerous crime against a child. 11 **Del.C.** §779.

11.1.39 Female genital mutilation. 11 **Del.C.** §780.

11.1.40 Unlawful imprisonment in the second degree. 11 **Del.C.** §781.

11.1.41 Unlawful imprisonment in the first degree. 11 **Del.C.** §782.

11.1.42 Kidnapping in the second degree. 11 **Del.C.** §783.

11.1.43 Kidnapping in the first degree. 11 **Del.C.** §783A.

11.1.44 Acts constituting coercion. 11 **Del.C.** §791.

11.1.45 Arson in the third degree. 11 **Del.C.** §801.

11.1.46 Arson in the second degree. 11 **Del.C.** §802.

11.1.47 Arson in the first degree. 11 **Del.C.** §803.

11.1.48 Cross or religious symbol burning. 11 **Del.C.** §805.

11.1.49 Trespassing with intent to peer or peep into a window of another. 11 **Del.C.** §820.

11.1.50 Burglary in the third degree. 11 **Del.C.** §824.

11.1.51 Burglary in the second degree. 11 **Del.C.** §825.

11.1.52 Burglary in the first degree. 11 **Del.C.** §826.

11.1.53 Robbery in the second degree. 11 **Del.C.** §831.

11.1.54 Robbery in the first degree. 11 **Del.C.** §832.

11.1.55 Carjacking in the second degree. 11 **Del.C.** §835.

11.1.56 Carjacking in the first degree. 11 **Del.C.** §836.

11.1.57 Theft; felony. 11 **Del.C.** §841.

11.1.58 Theft; false pretense. 11 **Del.C.** §843.

11.1.59 Theft; false promise. 11 **Del.C.** §844.

11.1.60 Extortion. 11 **Del.C.** §846.

11.1.61 Misapplication of property. 11 **Del.C.** §848.

11.1.62 Theft of rented property; felony. 11 **Del.C.** §849.

11.1.63 Receiving stolen property. 11 **Del.C.** §851

11.1.64 Identity theft. 11 **Del.C.** §854.

11.1.65 Forgery. 11 **Del.C.** §861.

11.1.66 Possession of forgery devices. 11 **Del.C.** §862.

11.1.67 Falsifying business records. 11 **Del.C.** §871.

11.1.68 Tampering with public records in the second degree. 11 **Del.C.** §873.

11.1.69 Tampering with public records in the first degree. 11 **Del.C.** §876.

11.1.70 Offering a false instrument for filing. 11 **Del.C.** §877.

11.1.71 Issuing a false certificate. 11 **Del.C.** §878.

11.1.72 Bribery. 11 **Del.C.** §881.

11.1.73 Bribe receiving. 11 **Del.C.** §882.

11.1.74 Defrauding secured creditors. 11 **Del.C.** §891.

11.1.75 Fraud in insolvency. 11 **Del.C.** §892.

11.1.76 Interference with levied-upon property. 11 **Del.C.** §893.

11.1.77 Issuing a bad check; felony. 11 **Del.C.** §900.

11.1.78 Unlawful use of credit card; felony. 11 **Del.C.** §903.

11.1.79 Reencoder and scanning devices. 11 **Del.C.** §903A.

11.1.80 Criminal impersonation. 11 **Del.C.** §907.

11.1.81 Criminal impersonation, accident related. 11 **Del.C.** §907A.

11.1.82 Criminal impersonation of a police officer. 11 **Del.C.** §907B.

11.1.83 Unlawfully concealing a will. 11 **Del.C.** §908.

11.1.84 Securing execution of documents by deception. 11 **Del.C.** §909.

11.1.85 Fraudulent conveyance of public lands. 11 **Del.C.** §911.

11.1.86 Fraudulent receipt of public lands. 11 **Del.C.** §912.

11.1.87 Insurance fraud. 11 **Del.C.** §913.

11.1.88 Health care fraud. 11 **Del.C.** §913A.

11.1.89 Home improvement fraud. 11 **Del.C.** §916.

11.1.90 New home construction fraud. 11 **Del.C.** §917.

11.1.91 Misuse of computer system information. 11 **Del.C.** §935.

11.1.92 Bigamy. 11 **Del.C.** §1001.

11.1.93 Bigamous marriage contracted outside of the State. 11 **Del.C.** §1002.

11.1.94 Dealing in children. 11 **Del.C.** §1100.

11.1.95 Abandonment of child. 11 **Del.C.** §1101.

11.1.96 Endangering the welfare of a child. 11 **Del.C.** §1102.

11.1.97 Endangering the welfare of an incompetent person. 11 **Del.C.** §1105.

11.1.98 Unlawfully dealing with a child. 11 **Del.C.** §1106.

11.1.99 Sexual exploitation of a child. 11 **Del.C.** §1108.

11.1.100 Unlawfully dealing in child pornography. 11 **Del.C.** §1109.

11.1.101 Possession of child pornography. 11 **Del.C.** §1111.

11.1.102 Sexual offenders; prohibitions from school zones. 11 **Del.C.** §1112.

11.1.103 Sexual solicitation of a child. 11 **Del.C.** §1112A.

11.1.104 Criminal non-support and aggravated criminal non-support. 11 **Del.C.** §1113.

11.1.105 Bribery. 11 **Del.C.** §1201

11.1.106 Receiving a bribe; felony. 11 **Del.C.** §1203.

11.1.107 Improper influence. 11 **Del.C.** §1207.

- 11.1.108 Perjury in the third degree. 11 **Del.C.** §1221.
- 11.1.109 Perjury in the second degree. 11 **Del.C.** §1353.
- 11.1.110 Perjury in the first degree. 11 **Del.C.** §1223.
- 11.1.111 Making a false written statement. 11 **Del.C.** §1233.
- 11.1.112 Terroristic threatening of public officials or public servants. 11 **Del.C.** §1240.
- 11.1.113 Hindering prosecution. 11 **Del.C.** §1244.
- 11.1.114 Compounding a crime. 11 **Del.C.** §1246.
- 11.1.115 Abetting the violation of driver's license restrictions; felony. 11 **Del.C.** §1249.
- 11.1.116 Escape after conviction. 11 **Del.C.** §1253.
- 11.1.117 Assault in a detention facility. 11 **Del.C.** §1254.
- 11.1.118 Promoting prison contraband; felony. 11 **Del.C.** §1256.
- 11.1.119 Use of an animal to avoid capture felony. 11 **Del.C.** §1257A.
- 11.1.120 Sexual relations in a detention facility. 11 **Del.C.** §1259.
- 11.1.121 Bribing a witness. 11 **Del.C.** §1261.
- 11.1.122 Bribe receiving by a witness. 11 **Del.C.** §1262.
- 11.1.123 Tampering with a witness. 11 **Del.C.** §1263.
- 11.1.124 Interfering with child witness. 11 **Del.C.** §1263A.
- 11.1.125 Bribing a juror. 11 **Del.C.** §1264.
- 11.1.126 Bribe receiving by a juror. 11 **Del.C.** §1265.
- 11.1.127 Tampering with a juror. 11 **Del.C.** §1266.
- 11.1.128 Misconduct by a juror. 11 **Del.C.** §1267.
- 11.1.129 Tampering with physical evidence. 11 **Del.C.** §1269.
- 11.1.130 Criminal contempt of a domestic violence protective order. 11 **Del.C.** §1271A.
- 11.1.131 Riot. 11 **Del.C.** §1302.
- 11.1.132 Hate crimes. 11 **Del.C.** §1304.
- 11.1.133 Aggravated harassment. 11 **Del.C.** §1312.
- 11.1.134 Stalking. 11 **Del.C.** §1312A.
- 11.1.135 Cruelty to animals; felony. 11 **Del.C.** §1325.
- 11.1.136 Unlawful trade in dog or cat by-products. 11 **Del.C.** §1325A.
- 11.1.137 Animals; fighting and baiting prohibited; felony. 11 **Del.C.** §1326.
- 11.1.138 Maintaining a dangerous animal. 11 **Del.C.** §1327.
- 11.1.139 Abusing a corpse. 11 **Del.C.** §1332.
- 11.1.140 Trading in human remains and associated funerary objects. 11 **Del.C.** §1333.
- 11.1.141 Violation of privacy. 11 **Del.C.** §1335.
- 11.1.142 Bombs, incendiary devices, Molotov cocktails and explosive devices. 11 **Del.C.** §1338.
- 11.1.143 Adulteration. 11 **Del.C.** §1339.
- 11.1.144 Promoting prostitution in the third degree. 11 **Del.C.** §1351.
- 11.1.145 Promoting prostitution in the second degree. 11 **Del.C.** §1352.
- 11.1.146 Promoting prostitution in the first degree. 11 **Del.C.** §1353.
- 11.1.147 Permitting prostitution. 11 **Del.C.** §1355.
- 11.1.148 Obscenity. 11 **Del.C.** §1361.
- 11.1.149 Obscene literature harmful to minors. 11 **Del.C.** §1365.
- 11.1.150 Outdoor motion picture theatres. 11 **Del.C.** §1366.
- 11.1.151 Possessing a destructive weapon. 11 **Del.C.** §1444.
- 11.1.152 Unlawfully dealing with a dangerous weapon; felony. 11 **Del.C.** §1445.
- 11.1.153 Possession of a deadly weapon during commission of a felony. 11 **Del.C.** §1447.
- 11.1.154 Possession of a firearm during commission of a felony. 11 **Del.C.** §1447A.
- 11.1.155 Possession and purchase of deadly weapons by persons prohibited. 11 **Del.C.** §1448.
- 11.1.156 Receiving a stolen firearm. 11 **Del.C.** §1450.
- 11.1.157 Theft of a firearm. 11 **Del.C.** §1451.
- 11.1.158 Giving a firearm to person prohibited. 11 **Del.C.** §1454.

- 11.1.159 Engaging in a firearms transaction on behalf of another. 11 **Del.C.** §1455.
- 11.1.160 Possession of a weapon in a Safe School and Recreation Zone. 11 **Del.C.** §1457.
- 11.1.161 Removing a firearm from the possession of a law enforcement officer. 11 **Del.C.** §1458.
- 11.1.162 Organized Crime and Racketeering. 11 **Del.C.** §1504.
- 11.1.163 Victim or Witness Intimidation. 11 **Del.C.** §§3532 & 3533.
- 11.1.164 Abuse, neglect, mistreatment or financial exploitation of residents or patients. 16 **Del.C.** §1136(a), (b) and (c).
- 11.1.165 Prohibited acts A under the Uniform Controlled Substances Act. 16 **Del.C.** §4751(a), (b) and (c).
- 11.1.166 Unlawful delivery of non controlled substance. 16 **Del.C.** §4752A.
- 11.1.167 Trafficking in marijuana, cocaine, illegal drugs, methamphetamines, Lysergic Acid Diethylamide (L.S.D.), designer drugs, or 3,4-methylenedioxymethamphetamine (MDMA). 16 **Del.C.** §4753A (a)(1)-(9).
- 11.1.168 Prohibited acts under the Uniform Controlled Substances Act. 16 **Del.C.** §4756(a)(1)-(5) and (b).
- 11.1.169 Distribution to persons under 21 years of age. 16 **Del.C.** §4761.
- 11.1.170 Purchase of drugs from minors. 16 **Del.C.** §4761A
- 11.1.171 Distribution, delivery, or possession of controlled substance within 1,000 feet of school property; penalties; defenses. 16 **Del.C.** §4767
- 11.1.172 Distribution, delivery or possession of controlled substance in or within 300 feet of park, recreation area, church, synagogue or other place of worship. 16 **Del.C.** §4768
- 11.1.173 Drug paraphernalia-Manufacture and sale; delivery to a minor; felony. 16 **Del.C.** §§4771 and 4774.
- 11.1.174 Operation of a vessel or boat while under the influence of intoxicating liquor and/or drugs; third and fourth offenses. 23 **Del.C.** §2302(a) and §2305 (3) and (4).
- 11.1.175 Obtaining benefit under false representation. 31 **Del.C.** §1003.
- 11.1.176 Reports, statements and documents. 31 **Del.C.** §1004.
- 11.1.177 Kickback schemes and solicitations. 31 **Del.C.** §1005.
- 11.1.178 Conversion of payment. 31 **Del.C.** §1006.
- 11.1.179 Driving a vehicle while under the influence or with a prohibited alcohol content; third and fourth offenses. 21 **Del.C.** §4177 (3) and (4).
- 11.1.180 Duty of driver involved in accident resulting in injury or death to any person; felony. 21 **Del.C.** §4202.
- 11.1.181 Prohibited trade practices against infirm or elderly. 6 **Del.C.** §2581
- 11.1.182 Prohibition of intimidation [under the Fair Housing Act]; 6 **Del.C.** §4619
- 11.1.183 Auto Repair Fraud victimizing the infirm or elderly. 6 **Del.C.** §4909A
- 11.1.184 Unauthorized Acts against a Service Guide or Seeing Eye Dog 7 **Del.C.** §1717
- 11.1.185 Interception of Communications Generally; Divulging Contents of Communications. 11 **Del.C.** §2402.
- 11.1.186 Breaking and Entering, Etc. to Place or Remove Equipment. 11 **Del.C.** §2410.
- 11.1.187 Divulging Contents of Communications. 11 **Del.C.** §2422.
- 11.1.188 Installation and Use Generally of pen trace and trap and trace devices. 11 **Del.C.** §243.
- 11.1.189 Attempt to Intimidate. 11 **Del.C.** §3534.
- 11.1.190 Failure of child-care provider to obtain information required under §8561 or for those providing false information; felony. 11 **Del.C.** §8562.
- 11.1.191 Providing false information when seeking employment in a public school. 6 **Del.C.** §8572.
- 11.1.192 Filing False Claim [under Victims' Compensation Fund]. 11 **Del.C.** §9016.
- 11.1.193 Alteration, Theft or Destruction of Will. 12 **Del.C.** §210.
- 11.1.194 Failure of Physician to file report of abuse of neglect pursuant to 16 **Del.C.** §903.
- 11.1.195 Coercion or intimidation involving health-care decisions and falsification, destruction of a document to create a false impression that measures to prolong life have been authorized; felony. 16 **Del.C.** §2513 (b).
- 11.1.196 [Failure to make] Reports of Persons who are Subject to Loss Consciousness. 24 **Del.C.** §1763.
- 11.1.197 Abuse, neglect, exploitation or mistreatment of infirm adult. 31 **Del.C.** §3913(a), (b) and (c).
- 11.2 Crimes substantially related to provision of mental health counseling and chemical dependency counseling shall be deemed to include any crimes under any federal law, state law, or valid town, city or county ordinance, that are substantially similar to the crimes identified in this rule.

8 DE Reg. 1456 (04/01/05)

15 DE Reg. 1055 (01/01/12)

16 DE Reg. 105 (7/01/12) (Final)

