

Volume 14

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Board Office Hours

The Board Office is closed to visitors; board staff is currently working remotely, so please email or leave a voicemail.

Monday	8:30–5 pm
Tuesday	8:30–5 pm
Wednesday	8:30–5 pm
Thursday	8:30–5 pm
Friday	8:30–5 pm
Saturday	Closed
Sunday	Closed

Message From the Board Chair

On behalf of the North Carolina Board of Licensed Clinical Mental Health Counselors (NCBLCMHC), we welcome you to the fall edition of the Board Insider.

IT'S FALL, EVERYONE! As we embark on the new season ready to experience the aroma of pumpkin spice filling the air, it is important that we acknowledge a time of change occurring at the NCBLCMHC. In July of this year, I was passed the baton to serve as Chairman of the North Carolina Board of Licensed Clinical Mental Health Counselors by former Chairman Dr. Mark Schwarze. Dr. Schwarze will continue to serve as a member, demonstrating his commitment to professional service and to the NCBLCMHC.

I would also like to take the time to introduce Dr. Nicole Stargell, who will now serve as the Vice Chairman and Ethics Chair of the NCBLCMHC. Dr. Stargell joined the board in 2023 and brings a wealth of knowledge that strengthens the board's endeavors and initiatives. Additionally, this season we welcomed a new board member, Dr. Vanessa Diggs, an advocate, educator, and service leader who represents Congressional District 9. We have also welcomed an additional board investigator, Dr. Deona Cureton, to help enhance the investigative and ethical process.

The NCBLCMHC serves as the regulatory entity for the State of North Carolina with the primary goal of protecting the public by ensuring clinical mental health counselors and supervisors adhere to sound ethical practices and standards. To carry out those measures, the NCBLCMHC is continuously listening, learning, and implementing measures that will not only improve our licensure process but also provide guidance and support to mental health counselors and supervisors across the state. An example of such includes the newly implemented impairment program, with North Carolina Professionals Health Program (NCPHP), to help support applicants and licensees who are experiencing elements of burnout and impairment.

As a board, we will continue to operate through collaboration, transparency, support, guidance, and efficient gatekeeping. This requires a great deal of time, commitment, and dedication, and we do not do this work alone. I would like to take the time to thank the board staff, led by our Executive Director, Ms. Melonie Davis, and Assistant Executive Director Mrs. Brandice Bell, for their hard work, devotion, and commitment to supporting over 13,000 licensees, supervisors, and countless applicants. Understanding that it may sometimes feel like a thankless job, please know we appreciate you!

To all licensees, supervisors, counselor educators, and applicants, I look forward to our journey together as we work to promote mental wellness and healing and am truly honored and excited to serve as your Chair.

Best,
Dr. Yasmin Gay
LCMHCS, CCJP, LCAS, CRC, CCTP, MAC, CCS




Dr. Yasmin Gay
Board Chair

NCBLCMHC Mission

The mission of the Board under NC GS Article 24 section 90-329 states that it is declared to be the public policy of this State that the activities of persons who render counseling services to the public be regulated to insure the protection of the public health, safety, and welfare.



Passing the Torch: Reflections on Leadership and Looking Ahead

Dr. Mark Schwarze
LCMHCS, NCC, LCAS, CCS
Former Board Chair

Greetings, and I hope everyone is well and safe after the recent devastation of Hurricane Helene. After two years of serving as Chair and one year as the Vice Chair of the North Carolina Board of Clinical Mental Health Counselors (NCBLCMHC), the time has come for me to step aside and pass the torch to new leadership. I am excited to announce Dr. Yasmin Gay as the new Chair of the NCBLCMHC and Dr. Nicole Stargell as the Vice Chair. Their term started July 1, 2024.

Although my time as Chair has ended, my involvement with this remarkable board is far from over. I remain deeply committed to our mission and will serve in the roles of Vice Chair of the Ethics and Legal Review Committee and the Education Review Committee until my term ends June 30, 2026.

When I first accepted the role of Chair, I could never have imagined the challenges and opportunities that lay ahead. Together, we navigated through uncertain times, celebrated achievements, and embraced innovative solutions that have helped position us for continued success. I am proud of all that we have and will accomplish and look forward to continued progress.

I also want to say thank you to our licensees who provided me valuable feedback and opportunities to grow as a leader. It is important that all voices and perspectives are heard and considered. As Chair, I attempted to create a transparent and open board that worked to support licensees while also attending to our primary mission of protecting the public. I know the board will continue to strive for that balance.

Thank you again for the privilege of serving as your Chair. I am excited to see all that we will accomplish together.

Warmly,
Dr. Mark Schwarze

Supporting North Carolina Mental Health Care Recovery Needs in Support of Hurricane Helene Relief Efforts

North Carolina was significantly impacted by Hurricane Helene, especially in the western region of the state. The path of destruction was devastating, leaving many families and communities displaced and staggered by the horrific event. The North Carolina Board of Licensed Clinical Mental Health Counselors is committed to supporting individuals, families, and communities across the state of North Carolina as we recognize there will be obstacles and challenges experienced that will have lasting emotional and psychological effects.

Counselors are efficiently trained to respond during a time of crisis. They utilize a variety of tools, interventions, and resources to help individuals navigate and cope, as many experience measures of grief and loss and a range of psychological and emotional elements. Healing from a traumatic event such as Hurricane Helene is a process, that will require all hands-on deck. The North Carolina Board of Licensed Clinical Mental Health Counselors was provided authorization through Executive Order 318 by Gov. Roy Cooper to increase capacity to expand mental health care needs.

To meet the goal of providing mental health care in response to the wave of disaster brought on by Helene, and to meet the need for additional mental health professionals to treat clients, the NCBLCMHC licensure board will modify enforcement of any legal or regulatory constraints that would prevent or impair the following:

I. Allowing persons to provide clinical mental health counseling if they are licensed in other states, territories, or the District of Columbia, but not licensed in North Carolina. (See instructions below: Counselors must email the board with demographic information and verification of independent licensure in good standing; allowable for in-person and telemental health services).

As we move forward in the wake of Hurricane Helene, the North Carolina Board of Licensed Clinical Mental Health Counselors stands united in its commitment to supporting the emotional and psychological well-being of our communities. By working together and leveraging the expertise of mental health professionals across the state and beyond, we will help individuals and families recover, rebuild, and find strength in the midst of adversity. Let us come together to ensure that no one faces this journey alone.

Please review the following:

1. **Contact the Board:** Licensed Clinical Mental Health Counselors from other states, U.S. territories, or the District of Columbia who wish to provide counseling services in North Carolina must email the North Carolina Board of Licensed Clinical Mental Health Counselors. All emails should be directed to LCMHCinfo@ncblcmhc.org.
2. **Provide Required Information:** In the email, include your demographic information and verification that you hold an independent licensure in good standing in your home state or territory.

You must include: First and last name, state, license number, contact phone number, email address, copy of license verification, indicate start date, and whether you intend to provide in-person or virtual services, or both.

3. **Receive Authorization:** Once your information is verified and you have received written confirmation you will be authorized to provide both in-person and telemental health services in North Carolina.
4. **Begin Providing Services:** Upon approval, you may begin offering clinical mental health counseling services to individuals and communities affected by Hurricane Helene.

Meet the Board

Dr. Yasmin Gay
Board Chair
LCMHCS
Congressional District 6

Dr. Nicole Stargell
Vice Chair
LCMHC
Congressional District 14

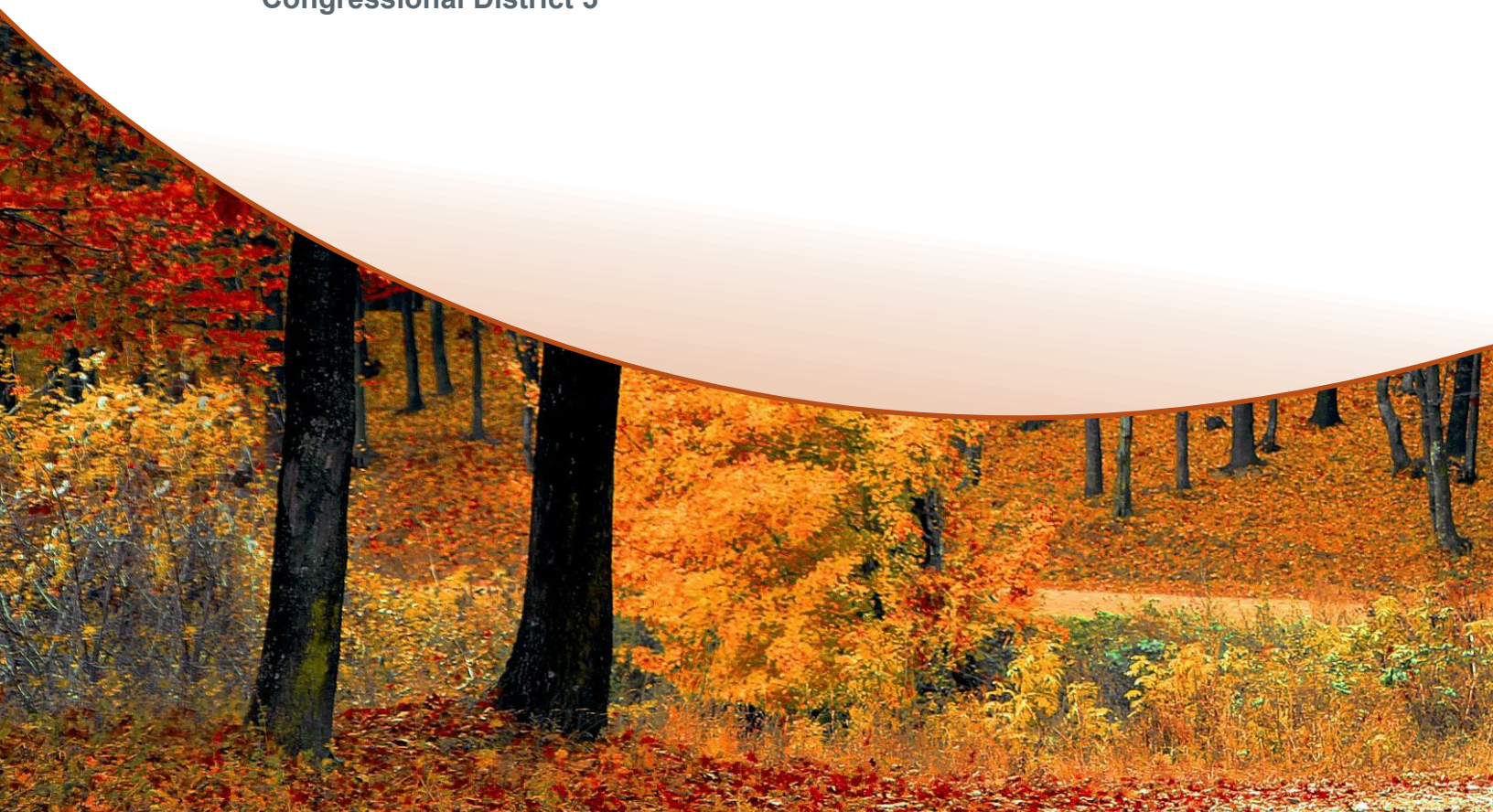
Bruce Garris
Secretary/Treasurer
Congressional District 7

Edward “Neal” Carter
Public Member
Congressional District 1

Dr. Levette Scott
LCMHC
Congressional District 2

Dr. Mark Schwarze
Former Board Chair
LCMHCS
Congressional District 5

Dr. Vanessa Diggs
Public Member
Congressional District 9



Awareness Months

Awareness is Prevention

September

Suicide Awareness Month

The nationwide observance aims to raise awareness about suicide, identify ways to prevent suicide, and remember the lives lost to suicide.

October

Breast Cancer Awareness Month

As we raise awareness this month, our hearts are with all those who have lost a loved one or been impacted by breast cancer.

November

Early Childhood Mental Health Awareness Month

When referring to early childhood mental health, we are focusing our attention to the positive results of early intervention for children who are experiencing social and emotional challenges.



What You Need to Know About Changes for Licensure Requirements!

The North Carolina Board of Licensed Clinical Mental Health Counselors would like to remind you that starting July 1, 2025, there are new requirements for individuals aspiring to become Licensed Clinical Mental Health Counselor Associates. These changes aim to ensure that our counselors are well-prepared as they begin their careers in the profession. Here's what you need to know about these important updates.

First, all graduate program internship experiences must take place in clinical mental health settings. This means aspiring counselors must gain experience in clinical settings that provide substantial opportunities for assessing, appraising, diagnosing, and treating mental health disorders. Some examples of suitable settings include private practices; college counseling centers; community agencies; managed behavioral health care organizations; hospitals; employee assistance programs; specialty treatment centers; vocational rehabilitation centers; marriage, couples, and family practices; addiction counseling sites; and school-based clinical mental health counseling sites.

The type of work performed during these internships is crucial. Aspiring counselors must engage in direct counseling experience (as defined by the Board). This involves activities such as assessing clients to understand their issues, appraising the seriousness of these issues, diagnosing the problems (like identifying depression or anxiety), and providing treatment to help clients improve.

Upon completing their internship and other requirements, applicants must complete the Verification of Graduate Counseling Experience Form. This form is essential for verifying that they have met all the required criteria. The form requires several pieces of information: the name, title, contact information, and signature of the person verifying the experience; the name of the agency where the experience took place; details about the university supervisor overseeing the experience; the name, title, and credentials of the site supervisor; the total hours of individual and group clinical supervision received; whether the experience was a practicum or internship; the beginning and end dates of the experience; and the total number of direct and indirect hours worked, as defined by the Council for Accreditation of Counseling and Related Educational Programs (CACREP). Additionally, for those applying on or after July 1, 2025, it is necessary to describe the type of clinical mental health setting and detail the counseling experience in assessing, appraising, diagnosing, and treating mental health disorders. The form is available on the Board's website at www.ncblcmhc.org.

These new requirements are designed to ensure that new counselors have the right kind of experience and training to effectively support and treat individuals with mental health challenges. By working in appropriate settings and performing clinically sound work, future counselors will be better prepared to meet the needs of their clients. If you're planning to become a counselor, make sure you understand and follow these new rules to be well-equipped for your future career and the licensure application process.

Key Takeaways Regarding 2025 Rule Changes

Where Do You Need to Complete Your Graduate Internship Experience?

When you are training to become a counselor, you need to get experience in specific places. These places are called clinical mental health settings. Here are some examples of where you can get this experience (This is not an exhaustive list, but rather examples of acceptable sites):

Private Practices
College Counseling Centers
Community Agencies
Managed Behavioral Health Care Organizations
Hospitals
Employee Assistance Programs
Specialty Treatment Centers
Vocational Rehabilitation Centers
Marriage, Couples, and Family Practices
Addiction Counseling Sites
School-Based Counseling Sites

What Kind of Work Will You Do?

For your graduate internship experience, you need to do certain types of work. This is called “direct counseling experience.” It means you have to do things like:

Assess
Appraise
Diagnose
Treat



What Forms Do You Need to Fill Out?

When you have completed your training and are ready to apply for your associate license (LCMHCA), you will need to fill out a form called the Verification of Graduate Counseling Experience Form. This form helps you verify that you have done all the work you were supposed to do. Here is what you need to include on the form (There will be additional forms required):

Person Verifying Your Experience: This is the person who will confirm that you did the work. You need to include their name, title, contact information, and signature.

Where You Worked: You need to indicate where you received your counseling experience.

University Supervisor: This is the person from your university who supervised your work.

Site Supervisor: This is the person at the place where you worked who supervised you. You need to include their name, title, and credentials.

Supervision Hours: You need to list how many hours of individual and group supervision you received.

Type of Experience: You need to indicate whether the experience was a practicum or an internship.

Dates of Experience: You need to include the start and end dates of your experience.

Hours Worked: You need to list how many hours of direct and indirect work you did. Direct work is when you are directly helping people. Indirect work is other work related to counseling.

Client Contact Hours: You need to list how many hours you spent directly and indirectly with clients.

Details About Your Experience: For people applying after July 1, 2025, you need to describe what kind of clinical mental health setting you worked in and the kinds of work you did, like assessing, appraising, diagnosing, and treating mental health disorders.

You can find the form and the full administrative rule on the board's website at

www.ncblcmhc.org.

Mark Your Calendars 2024

September 6

Board Hearing

October 10-11

Board Meeting

November 23

Deadline: Receipt of application material to be reviewed at January 2025 board meeting

December 6

Board Hearing

NOTE: If an applicant requires Board review to be licensed at the Board of Directors meeting, all application supporting documents should be in the office prior to the deadline(s) listed above.

Please visit ncblcmhc.org/boardinfo/calendar to view the full board calendar.

NCBLCMHC Holiday Schedule 2024

Thanksgiving Break **Nov. 28–29**

Winter Break **Dec. 23–Jan. 1**

Does Your License Expire in June?

SAVE TIME BY RENEWING ONLINE!

The 2025 license renewal window opens on Jan. 1

Licensure renewal procedures apply to LCMHC Associates, LCMHCs, and LCMHC Supervisors. Renewals may be submitted as early as Jan. 1 of the renewal year. All licensees shall complete the requirements before renewal can be issued.

**Deadline for receipt of renewal is June 20 of the renewal year.
You must renew prior to June 30 to avoid a lapse.**

[Click Here to Renew Now](#) 

Tip: Add a recurring event to your phone's calendar to remind you when renewals are due.

Be sure to keep your contact information updated to avoid missing important emails from the Board.

Accessing your Counselor Gateway

Check the status of your renewal, view your supervision documents, and manage your contact information via the Counselor Gateway Online Portal.

<https://portal.ncblcmhc.org/>

To watch video tutorials on how to navigate the application process, access documents, and complete forms, visit

www.ncblcmhc.org/Resources/Tutorials

The screenshot shows the website's navigation bar with the logo for the North Carolina Board of Licensed Clinical Mental Health Counselors. The main menu includes Board Info, Licensure, Complaints, Laws & Codes, Resources, and a Portal button. A search bar is also present. Below the navigation, a breadcrumb trail shows 'Home > Video Tutorials'. The main heading is 'Video Tutorials'. A large circular seal of the State of North Carolina is visible in the background. Below the heading, a paragraph states: 'In preparation towards your journey for licensure, here are some videos on how to navigate the application process, access documents, and complete forms found in the licensure portal.' Under the heading 'General', three video thumbnails are displayed, each with a play button and a duration. The first video is titled 'Counselor Gateway Tutorial' and has a duration of 03:23; its caption is 'Placing requests'. The second video is also titled 'Counselor Gateway Tutorial' and has a duration of 03:15; its caption is 'Sending online form requests'. The third video is titled 'Counselor Gateway Tutorial' and has a duration of 00:34; its caption is 'How to submit requests'.

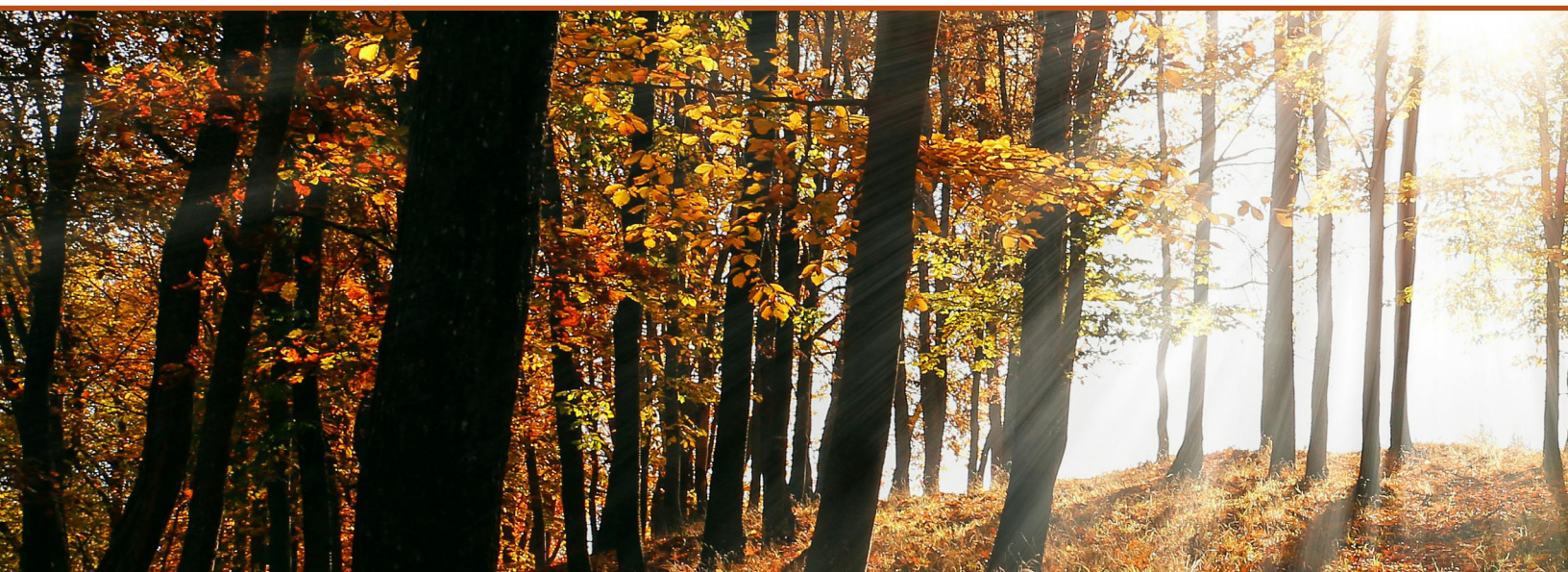
Counseling Children & Adolescents: Minor Consent and Confidentiality in North Carolina

Dr. Nicole Stargell LCMHC, LSC, NCC, BC-TMH

A signed professional disclosure statement documents initial informed consent in the counseling relationship, and counselors also document ongoing informed consent throughout the counseling relationship. Professional disclosure statement templates can be accessed on the North Carolina Board for Licensed Clinical Mental Health Counselors website. In general, clients need to be 18 years of age in order to consent to counseling in our state, with rare exception. In addition to parent or guardian consent, counselors should also document assent from a minor client in which they confirm the youth has been informed about the counseling process in developmentally appropriate ways. Although only one parent or legal guardian is legally required to consent for treatment of a minor client in North Carolina, it can be helpful to gain consent from both parents (whenever available) to clarify whether there has ever been a court order or custody agreement that would require both parents to consent. Counselors should also request documentation that allows a legal guardian to bring a minor to counseling, if applicable.

A common ethical complaint we see at the Board is that a parent with legal rights is upset they have not been made aware that their child is receiving counseling. Oftentimes, counselors in such a situation have upheld their legal duty to get consent from one parent who has adequate rights, but they have not upheld their ethical duty to “establish, as appropriate, collaborative relationships with parents/guardians to best serve clients” (ACA, 2014, B.5.b.). When parents feel alienated or fear that the counseling relationship has created a bias in the youth, they may file a complaint with the Board. It is best to proactively communicate with parents in order to avoid such challenges.

Additionally, a custody agreement might exist, and it is possible that a counselor is not aware it exists if only one parent is consenting to counseling. This mistake moves beyond an ethical pitfall and becomes a legal violation. It is the counselor’s responsibility to ask for any documentation that would require consent from both parents, and it is the counselor’s responsibility to uphold such an agreement. Counselors should

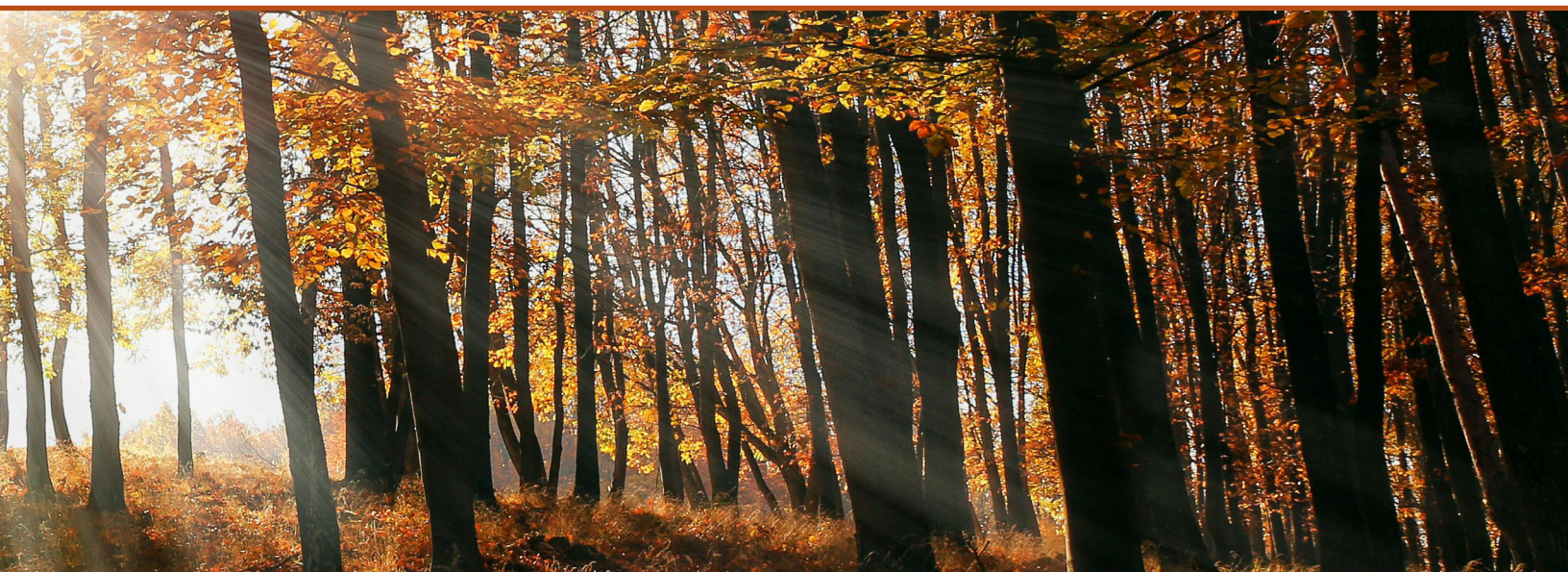


always abide by any court order or custody agreement to understand the rights each parent has. Additionally, counselors should inform parents or legal guardians if any such court order makes it more likely that information from the counseling relationship will have to be shared with a third party; for example, if court-ordered counseling requires a regular summary of services. Counselors who do not feel competent to offer such services should seek consultation, supervision, or appropriate referrals for the family.

Once proper consent is obtained, a counselor should work to form a strong and trusting therapeutic relationship with a minor client while balancing ongoing informed consent with the parents or legal guardians. As stated in the professional disclosure statement, a counselor will disclose private information from the youth in order to protect the minor from serious and foreseeable harm; however, counselors should look for ways to keep parents or legal guardians informed of the counseling progress while also upholding the minor client's confidentiality. One strategy that might be helpful is asking the parents or legal guardian to join the last 10 minutes of each session so that the youth can tell them what was worked on that day. This serves to keep parents informed while empowering the youth to control the information shared.

Counselors may also have to disclose private information when legal requirements demand that confidential information must be revealed. This may be more common in high-conflict divorce cases. Unless we are specifically trained to assess a parent's fitness, we should not offer our opinion about whether a parent should have custody of a minor. Additionally, we should be specifically trained and competent before offering any opinions that extend beyond factual information; for example, it would be appropriate to disclose that a youth has been attending counseling for six months and that the counselor is working with them on relationship concerns and emotional regulation. It would not be appropriate to assert that a youth developed such concerns due to a specific reason (e.g., a parent's behavior, the divorce of their parents) unless we are specifically trained to make that sort of assessment and interpretation. Counselors should disclose only factual information and should seek appropriate release from parents or guardians to disclose any such information. Even if subpoenaed, a counselor should seek a release of information and provide the minimum information being requested.

Overall, counselors should be aware of the rights of parents and guardians and should proactively seek to form trusting working relationships with youth and their caregivers. Counselors should ensure that they have made an effort to understand a minor client's relationship with both parents and should proactively involve both biological parents unless there is a custody agreement that indicates otherwise. Although only one parent is required to consent for counseling a minor in our state, seeking input from both parents can reduce the potential for an ethical oversight.



Don't Miss Important Messages About Your License!

Reminder to LCMHSs!

Quarterly Supervision Reports (QSRs) **MUST** be submitted in a timely manner. Doing so helps to ensure that supervision is properly documented and that your supervision contract was approved. QSRs cannot be submitted by the supervisee; they must be submitted by the supervisor.

Quarterly report due dates are:

- Q1 (Jan. 1–March 31) report must be submitted by April 30
- Q2 (April 1–June 30)..... report must be submitted by July 31
- Q3 (July 1–Sept. 30) report must be submitted by Oct. 31
- Q4 (Oct. 1–Dec. 31) report must be submitted by Jan. 31

The board does not require the submission of hours on QSRs.
All hours are to be reported to the board on Final Supervision Reports (FSRs).

Note:

All supervisors are required to submit QSRs and FSRs. Parties agree to submit these documents as a part of the supervision contract submitted to the Board. These documents must not be withheld for any reason. Issues that may arise during the supervision relationship must be reported on QSRs and submitted to the Board.



What's New

2025 Renewal Clarifications for LCMHC Supervisors

Currently, LCMHC Supervisors must submit an additional ten (10) contact hours of continuing education focused on clinical supervision. This is in addition to the required forty (40) hours, bringing the total to fifty (50) hours of continuing education.

Starting with the 2025 renewal cycle and moving forward, LCMHC Supervisors will only need to submit a total of forty (40) contact hours. However, of those forty hours, ten (10) must be related to clinical supervision. There are no changes to the approved providers, content areas, types of activities, or documentation requirements.

What has changed?

Previously, LCMHC Supervisors had to complete forty (40) contact hours plus ten (10) additional hours specific to supervision (for a total of 50). Beginning with 2025 renewals, this is reduced to forty (40) hours total, with ten (10) hours specifically focused on supervision.

What has not changed?

- **Approved continuing education providers**
- **Required content areas for CEUs**
- **Types of activities to meet requirement for supervision**
- **Documentation requirements to demonstrate supervision has occurred**
- **Requirement to meet the minimum continuing education in order to renew**

Just for Fun!

Puzzles are a healthy way to relieve stress, reduce anxiety, improve focus, and relax.
Decompress with this word find.

Self-Care Word Scramble Game

Unscramble the words below. Each one is related to self-care!

nexraailot

iettaodimn

hyairdotn

naujlro

sfnsuinedlm

aretheb

eixeescr

epsel

itunionrt

atigetdru

Good Luck!

ANSWERS ON NEXT PAGE

WORD SCRAMBLE ANSWERS

1. relaxation 2. meditation 3. hydration 4. journal 5. mindfulness
6. breathe 7. exercise 8. sleep 9. nutrition 10. gratitude



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Toll free: 844-622-3572 or 336-217-6007 | **Email:** LCMHCinfo@ncblcmhc.org
ncblcmhc.org