

CHAPTER 4747
BOARD OF BEHAVIORAL HEALTH AND THERAPY
ALCOHOL AND DRUG COUNSELOR LICENSING

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4747.0030 DEFINITIONS.

Subpart 1. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 2. [Repealed, L 2012 c 197 art 2 s 45]

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Subp. 4. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 5. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 6. **American sign language.** "American sign language" means the natural, visual language of deaf people, with its own syntax and grammatical structure.

Subp. 7. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 8. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 9. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 10. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 11. [Repealed, L 2005 c 147 art 5 s 26]

Subp. 12. **Deaf.** "Deaf" means a hearing loss of such severity that the individual must depend primarily upon visual communication such as writing, lip reading, manual communication, and gestures.

Subp. 13. **Deafblind.** "Deafblind" means a combination of vision and hearing loss that interferes with acquiring information from the environment to the extent that compensatory strategies and skills are necessary to access that or other information.

Subp. 14. **Disability.** "Disability" means a condition or characteristic causing a person to:

A. have a physical, sensory, or mental impairment that materially limits one or more major life activities;

B. have a record of such an impairment; or

C. be regarded as having such an impairment.

Subp. 15. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 16. [Repealed, L 2005 c 147 art 5 s 26]

Subp. 17. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 18. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 19. **Hard-of-hearing.** "Hard-of-hearing" means a hearing loss resulting in a functional loss, but not to the extent that the individual must depend primarily upon visual communication.

Subp. 20. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 21. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 22. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 23. **Late-deafened.** "Late-deafened" means persons who were born with normal hearing, but at some point lost their hearing through illness or accident.

Subp. 24. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 25. [Repealed, L 2003 1Sp14 art 5 s 30]

Subp. 26. **Qualified interpreter.** "Qualified interpreter" means a neutral person who is readily able to facilitate communication between two languages and accurately translate spoken, written, or sign language communication between a client and a licensee.

Subp. 27. **Sign language.** "Sign language" means American Sign Language or any form of manual communication used to communicate with persons who are deaf, hard-of-hearing, or deafblind.

Subp. 28. [Repealed, L 2003 1Sp14 art 5 s 30]

Subp. 29. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 30. [Repealed, L 2003 1Sp14 art 5 s 30]

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4747.1100 CONTINUING EDUCATION REQUIREMENTS.

Subpart 1. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 2. **Continuing education requirements for licensee's first four years.** Licensees must, as part of meeting the clock hour requirement of this part, obtain and document the following clock hours within the first four years after their initial license effective date according to the board's reporting schedule. Alcohol and drug counselor training obtained up to three years prior to January 27, 1998, which meets the requirements of this subpart must be considered as having met the requirements of this part. Alcohol and drug counselor classroom education obtained any time prior to January 27, 1998, which meets the requirements of this subpart must be considered as having met the requirements of this part.

A. Six clock hours in Native American issues, including gaining knowledge of:

(1) the practical application of traditional Native American spiritual and cultural living to clients;

(2) the functioning of traditional Native American cultures before the arrival of alcohol and drugs;

(3) the changes that alcohol and drugs have caused in the traditional Native American cultures;

(4) the history of the Native American experience in the United States and its effects on the influence of alcohol and drug use among Native Americans;

(5) the development of United States policy in regard to Native Americans and how this has influenced Native Americans;

(6) the progression of social scientific thought and its influence on Native Americans as it relates to alcohol and drugs;

(7) how the licensee must demonstrate sensitivity for a client's healthy, culturally appropriate lifestyle;

(8) the licensee's knowledge of cultural practices that will recreate a supportive, alcohol-free environment;

(9) the licensee's awareness and ability to identify the dynamics of an alcohol and drug subculture, as opposed to traditional Native American practices; and

(10) integrating self-evaluation into personal and professional development.

B. Six clock hours in Asian American issues, including gaining knowledge of:

(1) existing referral agencies whose focus is practicing with Asian American clients, including counties and community-based agencies;

(2) the various subgroups within the Asian American population in the United States, including their languages, religious practices, and place of origin;

(3) the dynamic of Asian American emigrational history, including the regulated immigration patterns and the refugee resettlement after World War II, from the Indo-Chinese War to the present time;

(4) current trends of alcohol and drug abuse among Asian Americans;

(5) various approaches to practicing with Asian American clients, including prevention, intervention, treatment, and continuing care approaches;

(6) understanding Asian American family dynamics, its traditional values, and its relation to recovery from alcohol and drug abuse;

(7) understanding cultural assets, and spiritual and religious healing as they relate to the recovery from alcohol and drug abuse; and

(8) integrating self-evaluation in the licensee's personal and professional development.

C. Six clock hours in deaf and hard-of-hearing issues, including gaining knowledge of:

(1) the history of the deaf American experience in the United States as a basis for understanding the continuing oppression deaf, deafblind, hard-of-hearing, and late-deafened people face;

(2) barriers, such as confidentiality, accessibility, and social stigma, to assessment, treatment, and recovery for chemically dependent deaf, deafblind, hard-of-hearing, or late-deafened people;

(3) psychosocial aspects of being deaf, deafblind, hard-of-hearing, or late-deafened;

(4) various approaches to serving the deaf, deafblind, hard-of-hearing, or late-deafened client, including prevention, intervention, treatment, and continuing care approaches;

(5) issues surrounding chemical dependency and people who are deaf, deafblind, hard-of-hearing, or late-deafened;

(6) deaf culture, norms, community, and issues relative to and differences among deaf, deafblind, hard-of-hearing, or late-deafened persons;

(7) work and volunteer experiences with deaf, deafblind, hard of hearing, or late-deafened persons;

(8) a variety of communication modes including, but not limited to: American Sign Language, tactile signing, speech reading, oral speech, manual coded English, and written English;

(9) existing referral agencies whose focus is serving the deaf, deafblind, hard-of-hearing, or late-deafened client, including counties and community-based agencies;

(10) family dynamics and its impact on the deaf and hard-of-hearing individual; and

(11) integrating self-evaluation in the licensee's personal and professional development.

D. Six clock hours in Chicano/Latino issues, including gaining knowledge of:

(1) existing referral agencies whose focus is serving the Chicano/Latino client, including counties and community-based agencies;

(2) the various subgroups within the Chicano/Latino population in the United States;

(3) current trends of alcohol and drug abuse among the Chicano/Latino community;

(4) various approaches to serving the Chicano/Latino client, including prevention, intervention, treatment, and continuing care approaches;

(5) understanding Chicano/Latino family dynamics and its relationship to recovery from alcohol and drug abuse;

(6) understanding cultural assets as they relate to recovery from alcohol and drug abuse; and

(7) integrating self-evaluation into the licensee's personal and professional development.

E. Six clock hours in disability issues, including gaining knowledge of:

(1) disability awareness;

(2) overview of chemical dependency and disability;

(3) identification of disability;

(4) familiarity with the Americans with Disabilities Act;

(5) implications for accessing treatment, exit planning, and aftercare support;

(6) adaptations of methods and materials for increased effectiveness in practicing alcohol and drug counseling with persons with disabilities; and

(7) ability to know when consultation is needed.

F. Six clock hours in African American issues, including gaining knowledge of:

(1) existing referral agencies whose focus is serving the African American client, including counties and community-based agencies;

(2) the various subgroups within the African American population in the United States;

(3) current trends of alcohol and drug abuse among the African American community;

(4) various approaches to serving the African American client, including prevention, intervention, treatment, and continuing care approaches;

(5) understanding African American family dynamics and its relationship to recovery from alcohol and drug abuse;

(6) understanding cultural assets as they relate to recovery from alcohol and drug abuse;
and

(7) integrating self-evaluation into the licensee's personal and professional development.

Subp. 3. [Repealed, L 2003 1Sp14 art 5 s 30]

Subp. 4. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 5. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 6. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 7. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 8. [Repealed, L 2012 c 197 art 2 s 45]

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4747.1400 RULES OF PROFESSIONAL CONDUCT.

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Subp. 4. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 5. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 6. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 7. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 8. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 9. Competency in practice with ethnic minority, disabled, and identified population group clients.

A. A licensee meets the standards in part 4747.1100, subpart 2, when practicing alcohol and drug counseling with a client who is a member of an ethnic minority group, an identified population group, or a client with a disability by acting according to this subpart. If a licensee is inexperienced as compared to other licensees or the professional community's standard of care in practicing alcohol and drug counseling with ethnic minority, identified population, or disabled clients, the licensee:

(1) engages in ongoing consultation with a licensee who meets the professional community's standard of care with respect to such clients;

(2) practices under the supervision of a licensee who meets the professional community's standard of care with respect to such clients; or

(3) refers the client to a licensee who meets the professional community's standard of care with respect to such clients.

B. An alcohol and drug counselor fluently speaks the primary or preferred language of the client, works with a certified or qualified interpreter according to Minnesota Statutes, section 546.44, and uses the services of a certified or qualified interpreter or refers the client to a licensee who either is fluent in the client's primary or preferred language or works with qualified interpreters.

C. Licensees who practice alcohol and drug counseling with deaf, deafblind, hard-of-hearing, or late-deafened clients:

(1) are proficient in American Sign Language at the advanced-plus level or higher of the Sign Communication Proficiency Interview (SCPI) ratings, if the client's primary or preferred language is American Sign Language; or

(2) are trained in working with and work with an American Sign Language interpreter who qualifies as both a certified interpreter and a certified transliterator by the Registry of Interpreters for the Deaf or certified at level four or higher by the National Association of the Deaf; or

(3) refer the client to a licensee who is either proficient in American Sign Language at the advanced-plus or higher level or who is trained to work with a certified American Sign Language interpreter or transliterator. Licensees who practice with such clients must submit a statement signed

by a supervisor that the licensee has demonstrated a minimum proficiency in practicing with such clients.

D. Licensees inexperienced compared to the professional community's standard of care in practicing alcohol and drug counseling with members of identified population groups:

(1) engage in ongoing consultation with a licensee who meets the professional community's standard of care with respect to such clients;

(2) practice under the supervision of a licensee who meets the professional community's standard of care with respect to such clients; or

(3) refer the client to a licensee who meets the professional community's standard of care with respect to such clients.

Subp. 10. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 11. [Repealed, L 2012 c 197 art 2 s 45]

Subp. 12. [Repealed, L 2012 c 197 art 2 s 45]

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