



To: The Ohio House Finance Subcommittee on State Government and Agency Review

From: Danielle Smith, MSW, MA, LSW, Executive Director

Re: Testimony in opposition to licensure board consolidation in HB 49

Chairman Faber and Ranking Member Patterson, thank you for allowing me to voice our opposition to the board consolidation language in HB 49 which would consolidate licensing boards, including the regulatory body for social workers. I am the Executive Director of the National Association of Social Workers (NASW) - Ohio Chapter which is the association that represents Ohio's licensed social workers. We are highly concerned that the changes proposed would negatively impact the profession and the clients that we serve.

First, I want to provide some background on the profession of social workers. We are by far the largest profession that is included in the group of professions affected by these bills with more than 27,000 licensees. We work in every county in Ohio in more than 100 practice areas ranging from child welfare, behavioral health, aging to macro practice in communities.

If enacted, these bills would eliminate the social work licensing board and place it under a new board regulating seven professions. Our licensing board is currently consolidated with licensed counselors and licensed marriage and family therapists. If enacted, psychologists and chemical dependency counselors would be added to create a *Behavioral Health Professionals Board*. Our opposition to this proposal is not an opposition to working in a consolidated board structure. We've been working well within our current consolidated structure with the counselors and marriage and family therapists for a number of years in a licensing board that sustains itself through licensing fees. We oppose the structure of the new board that relegates social workers to two seats on the board structure even though social workers would constitute 70% of the workforce regulated by the new board. This means that all of the work that had been done previously by a committee of four social workers and one public member would be condensed to two social work representatives. If the social workers were ever absent, individuals with no training in social work could make decisions that determine the education and oversight of our 27,000-member profession. Furthermore, it would impact the protection of our clients. It would be impossible for two social workers to be knowledgeable about the full range of practice areas that social workers work in, which is why more than two social workers are needed on the board, preferably 3-4 representatives to adequately represent social work. As I stated earlier, social workers work in behavioral health, in fact we are the largest professional within this system, but we also work in more than 100 other practice areas.

This legislation threatens public health by weakening regulatory oversight and therefore weakening the mission of Ohio's licensing board to protect the public. Under the proposal, non-social workers who do not understand the complexity of our practice could make decisions about ethical codes of conduct and disciplinary action. It is reckless to devise a system where one profession is responsible for protecting

the public by regulating another profession when they have no real understanding of that profession's legality and ethical standards. For example, this proposal is akin to having disciplinary actions for police officers decided by fire response personnel because their work is "similar enough." We have an example of this problem from our Kansas NASW Chapter. Kansas has a similar board structure to the structure that is being proposed in this bill. In 2009, a person applied for a social work license who had a felony of first degree murder. The two social workers on the board reviewed her information and both determined that she was not appropriately rehabilitated to earn privilege of social work licensure. They asked the full board to not approve her for licensure but were outvoted by the other members. She is now a licensed social worker, despite the best judgements of her social work colleagues. Composite boards without profession specific committees that are authorized to make disciplinary actions reduce the scrutiny and expertise of regulatory work.

We are concerned about the unknown ramifications of this proposal on the workforce. What will happen to the timeliness of decisions on licensing applications and scope of practice issues if that responsibility is transferred from board members to the board's staff? If the board is unable to process license applications in a timely way due to new responsibilities, it will have a negative impact on the workforce and economy as it delays social workers from starting jobs.

The majority of states regulate social workers in a standalone licensing board due to the large number of licensees even though the vast majority of states have fewer social workers than Ohio. In the states that have consolidated, the board's membership tends to be proportionate based on the number of licensees. In fact, North Carolina, which is the genesis of the anti-trust concerns from the dental board, has a standalone social work committee.

Again, on behalf of our 27,000 social work licensees statewide, I thank you for allowing me to voice our concerns about the license board consolidation proposal. We welcome working with the legislature and administration to find options to meet the goals of preventing anti-trust violations and consolidation, but we need more time to thoroughly vet the language to reduce unintended consequences.

Thank you,

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