



## PA ART THERAPY LICENSE FAQ FOR LEGISLATORS

### **Q: What is the independent license for Pennsylvania Art Therapists?**

**A:** The Pennsylvania Art Therapy Licensure Council (PAATLC), on behalf of Pennsylvania's Art Therapists, is proposing an AMENDMENT to the existing LPC/Social Work License originally adopted in 1987. In the 1987 law, Art Therapists were credentialed as Licensed Professional Counselors in an ambiguous category called *"a field closely related to the practice of professional counseling"*. Art Therapy was undifferentiated from *"related fields"*, such as social work, psychology, art therapy, dance/movement therapy, drama therapy, music therapy, human services, counseling education and child development and family studies.

PAATLC is currently seeking an independent license that defines and differentiates "Professional Art Therapists" as a distinct profession with unique education, theory, and techniques. If the art therapy license bill is passed, it will create the Licensed Professional Art Therapist (LPAT) law in Pennsylvania, which will establish legal standards of education, ethics, and training, and regulate the practice of art therapy in PA. The license will also establish an art therapist as a representative of the profession's voice and needs to the State Licensure Board.

### **Q: Why are we pursuing an Art Therapy License and why is it necessary?**

**A:** Art Therapists already benefitted from access to licensure and insurance reimbursement as Licensed Professional Counselors (LPC's) since 2001. However, burgeoning awareness and popularity of art therapy have caused more and more non-art therapists and under-trained individuals to use art in clinical practice or claim that they are art therapists or "doing art therapy". Pennsylvanians with developmental disabilities, mental health disorders, the elderly, those suffering from addictions, and other underserved populations are among our most vulnerable citizens. Untrained/undertrained practitioners may not be aware of the impact of various media on a client's emotional/mental functioning. Likewise, they may not know how to guide the client to calm and safety if unexpected images, emotions, regressions, traumas, or impulses emerge. Errors due to insufficient training and experience may cause the client psychological or even physical harm.

The primary goals of the proposed license bill are A) to protect the public from ineffective/inappropriate care, and B) to ensure that Pennsylvanians' have awareness of and access to the highest quality treatment available from this valuable mental health profession. Secondary goals include representation of art therapy at the state licensure board, autonomy of administration of the profession at the state level, and differentiation from the educational standards of professional counselors, which is a distinct profession from art therapy (and vice versa).

### **Q: How will the art therapy license protect the public?**

**A:** This bill establishes **title protection** for professional art therapists. Only people holding the Licensed Professional Art Therapy (L.P.A.T.) credential can call themselves professional art therapists or say they are providing professional art therapy if they advertise or engage in private practice of art therapy. The high quality and unique training and services provided by LPATs will be made public and will enable the public to seek out and participate in high quality art therapy to address their challenges and enhance their lives.

## **Q: Is this legislation going to expand government or increase budget costs?**

**A:** We believe that HB 932 will either be revenue neutral or even increase state income. Art Therapists are already licensed as LPCs and they are already figured into the budget for the administration of the LPC. Also, it is important to remember that we are not requesting the creation of a brand-new licensure board. For these reasons, costs should remain largely unchanged or even increase state revenue.

- We anticipate that most art therapists who are not currently licensed by the Board will seek to be licensed as professional art therapists.
- We also anticipate that many art therapists holding counseling licenses will apply for separate or second licenses. This will be so if they want to engage in independent practice or be allowed to represent themselves to the public as licensed to practice art therapy.
- In addition, we expect that having a distinct art therapist license will encourage many recent art therapy program graduates to remain in-state or return to the state to obtain licenses.
- Lastly, there will be incentive for art therapists who left PA to pursue work in nearby states with art therapy licenses to return to Pennsylvania to obtain licenses.

Another cost-saving feature of HB 932 is outsourcing credentialing responsibilities to The Art Therapy Credentials Board, Inc. (ATCB), an organization accredited by the National Commission for Certifying Agencies (NCCA). Cost to the state would be minimal as an Art Therapy-specific proficiency certification exam and code of professional practice exist. The PA LPC law already accepts the ATCB certification examination as qualifying criteria for licensure. Continuing to use the ATCB examination will keep costs down.

## **Q: Under the new Professional Art Therapist License, who CAN call themselves art therapists?**

**A:** The law begins by creating a new legal term for Pennsylvania art therapists, assuring the public that holders of the titles “Professional Art Therapist”/“Licensed Professional Art Therapist” have met the highest legal standards of training and postgraduate experience.

Non-art therapists and undertrained related professionals may not call themselves “art therapists” or say that they are “doing art therapy” if they are engaged in private practice. They may still use art materials in their practice; this is not something that can be regulated.

- Holders of the new LPAT credential may identify themselves as “Licensed Professional Art Therapist”, “Professional Art Therapist”, or “LPAT”.
- Graduates of master’s or doctoral level art therapy programs may use the term “Art Therapist” **IF** under supervision by acceptable supervisors for the ATR-BC or the LPAT.
- Art therapists who have the LPC (Licensed Professional Counselor) and are ATR-BC (Board Certified by the ATCB) can call themselves art therapists but not Professional Art Therapists or LPAT.
- Related mental health professionals who hold only the LPC and not the ATR-BC cannot call themselves art therapists.
- Dual licenses, LPC and LPAT, may be held by those individuals who qualify for both and pay both sets of dues.

- “Art Therapy Student”/“Intern Art Therapist” are terms that master’s and doctoral level art therapy students may call themselves while enrolled in clinical art therapy education and supervision. Undergraduates may not call themselves art therapists or art therapy interns.

**Q: What would the LPAT bill establish legal professional standards for?**

- Art therapy education, clinical experience and supervision, continuing education.
- Making the ATCB art therapy certification exam the official licensure examination for LPATs.
- The right to perform clinical diagnosis, as established under the current license for professional counselors.
- Art therapy representation on the PA State Board of Social Workers, Marriage and Family Therapists and Professional Counselors.
- Being bound with fellow art therapists to uphold a code of safe and ethical professional practice and being held accountable to remain up-to-date with innovations in practice through continuing education requirements.

**Q: Do art therapists need to have special art therapy judgement to make decisions about client safety and treatment and how is it developed?**

**A:** Art therapists must achieve the highest levels of proficiency in independent diagnostic, clinical, safety, and ethical judgement in order to practice this profession. Art therapists possess a specialized skill set to:

- assess and diagnose developmental, cognitive, trauma, substance abuse, or mental health disorders
- evaluate for suicidality/homicidality
- warn against risk of harm or substance abuse relapse
- develop appropriate treatment plans and execute appropriate, ethical, and excellent psychotherapy or therapy services

**Q: If the License is adopted as currently drafted, who will qualify for the LPAT?**

**A:** As the bill reads now, successful LPAT candidates must satisfy the following criteria:

1. Holds a Master’s Degree with a minimum of 60 semester hours or 90 quarter hours of graduate coursework in art therapy and related mental health content from an AATA Approved or CAAHEP Accredited program, or from a program which is the equivalent to an approved or accredited program in art therapy, as determined by the board.
2. Holds a doctoral degree in art therapy or a field determined by the board to be closely related to art therapy from an accredited educational institution.
3. Master’s level licensees require 3,000 hours of postgraduate clinical experience.
4. Doctoral level licensees require 2,400 hours of supervised clinical experience; 1,200 hours must be obtained post-doctorate.
5. LPAT supervision hours must be provided by a Licensed Professional Art Therapist, Board Certified Art Therapist, and is inclusive of supervision provided by other professionals listed as acceptable in LPAT regulations.
6. A passing grade in the ATCBE (the board certification exam).
7. Submission of application, supporting documents, and payment of the licensing fees.